

Ageing Well Partnership Board
2 pm, Thursday, 16th May 2024

Grenville Room, New County Hall, Truro, TR1
or
on Microsoft Teams: [Click here to join the meeting](#)

Agenda

	Item	Time	Lead
1	Teams Guidance, Meeting Etiquette (Page 2), Introductions and Apologies	2:00-2:10	Chair
2	Minutes of the Meeting Held on 2024 (Page 3), Actions and Matters Arising	2:10-2:15	Chair
3	Updates from Attendees	2:15-2:45	Chairs
4	Dementia Strategy	2:45 – 3:05	Dr Allison Hibbert & Kate Alcock
5	Comfort Break	3:05 – 3:15	
6	Pentreath - Social Prescribing. How this can help support over 55's	3:15 – 3:35	Helen Rundle & Social Prescriber
7	The Filo Project Helping to reduce social isolation	3:35 – 3:50	Gayle Andrews
8	Any Other Business	3:50-4:00	All

Teams Guidance

Please prepare by reading the papers sent out for the meeting.

When joining the meeting, you will be placed in “the waiting room”. Healthwatch Cornwall will then accept you to join the meeting. Your camera and audio will already be on.

Mute yourself when you are not speaking so that there is no noise in the background.

Use the chat box for any comments or questions you have. Everybody will see them unless you choose to share privately.

Please use the ‘raise hand’ function when you wish to speak.

You will be asked to unmute when it is your turn to comment.

If you need to temporarily leave the meeting, please turn off your audio and camera.

Presentations will be shared on the screen.

Meeting Etiquette

All members are expected to participate constructively in line with agenda items whilst being respectful of the views of all members.

All members of the Carers Partnership Board have the right to meet in a safe atmosphere where all voices are respected and can be heard equally.

The current Board’s Terms of Reference includes the following.

In order to allow the Carers Partnership Board meetings to be conducted efficiently and with decorum, Members of the Board will:

- *Work in partnership with each other, listening to and respecting each other’s views*
- *Undertake to represent all the Carers in their Forum Areas*
- *Indicate they wish to make representation through the Chair*
- *Not single out individual Members for scrutiny or challenge*
- *Not interrupt and be guided by the Chair*
- *Respect confidentiality and privacy*
- *Keep to the agenda*
- *Represent the strategic needs of carers and not bring to the meeting concerns from individual carers*

Healthwatch Cornwall operates a Zero Tolerance policy on Bullying and Harassment. This applies to both face to face and online meetings.

MEETING NOTES:	Older Persons Partnership Board
DATE:	15 th February 2024, 2:30pm
LOCATION:	Room 2N:03, New County Hall, Truro and via Microsoft Teams

ATTENDANCE

Name	Position	Organisation
Cllr John Tivman (JT)(Chair)	Councillor	Cornwall Council
Robert O'Leary (RO)	Partnership Boards Lived Experience Project Officer	Healthwatch Cornwall
Mike Hooper (MH)	Partnership Boards Officer	Healthwatch Cornwall
Dr. Allison Hibbert (AH)	GP Lead Launceston Community Hospital – Interest in Older Adults	Cornwall NHS Foundation Trust
Beccy Summers (BS)	Patient and Public Involvement & Engagement Lead - Research	University of Exeter
Gayle Andrews (GA)	Area Co-Ordinator	FILO project
Jayne Price (JP)	Lead Contract – Unpaid Carers Service and Inclusion Matters	Cornwall Council
Jacqueline Martignetti (JM)	Carer	Truro Carers Group
Cllr John Bastin (JB)	Councillor, Chair of Adult Social Care Scrutiny Committee, Co-Chair of Carer Partnership Board	Cornwall Council
Julie Ford (JF)	Carer	Carers Group
Karen Hills (KH)	Scheme Manager (over 55s)	Anchor Housing
Kate Alcock (KA)	Head of Commissioning: Older People and Carers	Cornwall Council
Kate Mitchell (KM)	Intermediate Care for Adults	Integrated Care Board
Mary Ashton (MA)	Carer	Truro Carers Group
Moriah Prestley (MP)	Interim Strategic Commissioning Lead	Cornwall Council
Sue Hooper (SH)	Dementia Advisor	Alzheimer's Society
Sunnie Jarvis (SJ)	Community Partnership Manager	Anchor Hanover Group

APOLOGIES

Name	Position	Organisation
Alison Short	Advocacy Coordinator, Cornwall and the Isles of Scilly	The Advocacy People
David Gregory	Network Coordinator	Cornwall Memory Cafe
Kelvyn Yates	Deputy Chief Executive	Age UK Cornwall and Isles of Scilly
Kirst Dexter	Network Coordinator	Cornwall Memory Cafe
Sarah Keast		Cornwall Council
Keith Judkin	Lived Experience Participant	LE Member
Stuart Cohen	Commissioning Manager	NHS Kernow Clinical Commissioning Group

	Agenda Item	Action
1.	Teams Guidance: Meeting Etiquette and Introductions	
	<p>The meeting recording commenced.</p> <p>The Chair (JT) opened the meeting by welcoming the Board members and ran through general housekeeping and online meeting etiquette.</p> <p>Board member introductions were made and apologies received.</p>	
2.	Homecare Commissioning	
	<p>KA greeted Board members and explained that the role of the Older People and Carers Service Commissioning Team on the Partnership Board is to support the involvement of members in the identification process of commissioning new services.</p> <p>KA's teams are responsible for Care Home and Homecare Services. Understanding the immediate and future need, availability, and funding for these services will inform the strategy that will set out the distribution of funding to buy in the right services for as many in need as possible.</p>	

	<p>Together with MP, whose team has been working on the new Homecare plan for the County, the aim has been to help ensure enough Care Home/Homecare services for the future, investigating all types of Carers service availability and all possible solutions for the future.</p> <p>KA called for the Partnership Board to support the team to understand the needs and opportunities both now and in the future.</p>	
<p>3.</p>	<p>Supported / Specialist Housing</p>	
	<p>MP greeted Board members and shared the presentation slides.</p> <p>The Home Care Support Recommissioning Project: Strategic Context Delivering Better Care.</p> <p>The aim of the project is to investigate the provision needs for Home Care Services in Cornwall. The process started, with a range of activity and engagement events that ran from February 2023.</p> <p>The Strategic overviews and objectives that drive the recommissioning involve key points that focus on; <i>The right Care in the Right Place, at the Right Time</i>, working with the carers, those receiving the care and the professionals from care and clinical settings to develop a supportive community for individuals.</p> <p>There is a Market Sustainability Plan that outlines the high-level objectives across a range of different areas such as homecare and this can be shared with the Board if required.</p> <p>In February 2023 the journey started with an outline Business Case. Setting out the recommendations and key lines of enquiry for the commissioning of homecare services in Cornwall.</p> <p>In May 2023 MP joined the team and ran stake holder conferences, two of which were face to face sessions held in Truro and included a wide range of representation from service users and service providers.</p> <p>There was also a sustained eight-week period of online engagement that focused on the afore mentioned key lines of enquiry.</p>	

On the tenth week a feedback session was held creating some key themes:

- Sustainability
- Carbon Neutral
- Technology and its effects on homecare.
- Service Delivery and how this would work within the new contractual cycle,
- The Model to be adopted.

In May/June 2023 a range of advisory groups were set up with a focus on those key themes, one set comprising of providers and one of service users.

MP noted that no Carers Partnership Board members appeared to have attended the groups.

The last session was held in January 2024.

The key area for the commissioning team is understanding the benefits from the new approach that commissioners are aiming to implement in October 2024.

Capacity to meet the demand is important. And can be achieved through:

- Increasing efficiency – optimising the travel and logistical elements for timely carer appointments.
- Strategic Partnership working with key providers – consolidating the relationships.
- Exploring alternatives- to existing homecare, looking at using technology – such as iPads/tablets to check in with care providers. Not necessarily replace but to enhance care.
- Improve recruitment and retention of staff – increase the inflow of appropriate staff member who are qualified appropriately.

The Stakeholder Engagement Plan was shaped from the advisory group feedback. It's crucial that the knowledge and transferable skills of carers is included as expert advice.

The new model will aim to be more flexible to better meet the needs of carers and those who receive care, when needs change, the provision needs to change accordingly.

Companionship is important for wellbeing and needs to support the carer as well as those receiving care, taking time to understand how they feel and their needs.

People who use the services need to be Involved in the Care plan.

There needs to be greater lived experience involvement in quality panels and the feedback used when commissioning key care providers in the near future.

The commissioning approach focuses on:

- Delivery – Will be across 11 Alliance/Geographical Zones throughout Cornwall overseen by one Strategic Provider, and meeting regularly with Cornwall Council Commissioners to run through the Key Performance Indicators and expectations.
- Commercial – A one stage invitation to tender and 8 year contractual framework with Cornwall Council break options at years 3 and 6.
- Financial- A Core Hourly Rate Calculation, Travel and Mileage Rates and other payments to Strategic Providers related to administration/ key performance indicators, covered by additional grant funds.

MP shared a slide that showed the current geographical map of carer travel to appointments, then also showed the potential of how the travel could improve with the new approach.

A timeline of delivering the model was shared.

The presentation is attached as Appendix 1.

Cornwall Supported and Specialist Housing Strategy 2023-25

KA shared slides and updated Board members.

In 2022 Cornwall Council commissioned the Housing Learning and Improvement Network – focusing a long-term strategic approach on delivering accommodation – *right type, right place, right time*.

In 2023 the Supported Housing Regulatory Oversight Act set out statutory responsibilities of inspection and licensing supported

accommodation for Local Authority Housing Departments. Currently there are not many landlords that hold the licenses.

We know that by 2050:

- There will be 5612 homes required for older people, a mixture of affordable social/rent and open market/shared ownership.
- There is currently a lack of Extra Care Housing offer in Cornwall, with very limited provision. There will be a commitment to build these houses in the future.
- Residential Care will need an additional 825 beds, although the models of meeting the needs for people have changed over the years and many people are now cared for in their own homes, there remains a requirement to build more care homes to meet the predicted demand.
- Nursing Care is predicted to require an additional 2901 beds.

KA shared the Implementation Plan for meeting these requirements and requested that Board members talk to KA and the team regarding the needs for future care to support the transformation.

The presentation is attached as Appendix 2.

Questions and comments

JV – commented on the importance of addressing the logistical difficulties of travel for care providers, and the challenges for travelling in the summer.

In terms of the Companionship consideration, the current 15-minute calls should be scrapped.

The Personal Care Plan must be read properly at every visit so that information is not missed and facilitate good, effective communication.

MH asked from a question in the chat – will there be a set of values for the care providers to meet?

	<p>MP fed back to Board members that there appears to be nothing currently documented regarding values, this new approach will mean that more work is undertaken by the commissioning teams, understanding provider ability to meet need in terms of choices of how the care is received, from this piece of work there will be a policy created and a protocol that will set the values.</p> <p>KA commented that as part of the recommissioning work for Homecare, a robust specification has been co designed with the people that use the services and underpins all the delivery of homecare services, setting out the aims, objectives, and Cornwall Council’s Delivery Plan in line with the shared ambition for vibrant, safe and supportive communities.</p> <p>This process builds an alliance of providers, commissioners, and people who use the services in reviewing the offering during the eight-year contract. This will ensure that providers develop and modernise their services inline with the needs of the people who use them and help drive the values for the future.</p>	
<p>4. & 5.</p>	<p>Carers Service Offer and Inclusion Matters Service</p>	
	<p>JP Greeted members of the Board and thanked them for the opportunity to raise the profile of the Carers Service and The Inclusion Provision.</p> <p>Cornwall Carers Service is commissioned with a model of three levels of support.</p> <ul style="list-style-type: none"> • Level one: Self-Management, live chat and qualified advice, news, and guidance. • Level Two: Enhanced support when needed, development of a wellbeing plan, connection to local and national provision for Carers, advice on maximising income and grants, access to training led by Carers, access to a range of Community Resources. • Level Three: Carers personal budget or direct payment. Supporting Carers through more challenging circumstances. Manage their own health, supporting hospital admissions and discharges, access to benefits and welfare, developing 	

wellbeing, access to Carers Needs Assessment and Support Plan.

It is designed to support Carers to manage and maintain their role. With a focus on level one and two to support Carers as much and as early as possible, there is an option of progression to level three if the other levels have been exhausted.

JP shared an infographic slide showing the range of support that the Carers Service offers, providing everyone with an accessible service and information on grants, residential activity and local activities, Carers Passport, Carers Register and Statutory Carers needs assessments.

Individuals can refer themselves to the service, as well as professionals referring on behalf of a person.

Inclusion Matters Provision is open to all organisations, small groups, and individuals to create sustainable support options.

Made up of five organisations in partnership, the model facilitates a much wider scope for access to resources, delivering on the aim of helping the communities of Cornwall to increase their wellbeing, stay health, get active and increase the community connections for all residents in the County.

The Cornwall Link website is free to join and available to provide local community information on activities and groups etc. people can add their service or group information for others to access accordingly.

The Helpline 01872 266383 is the first port of call to access the Inclusion Matters service.

There is also support to access training on digital skills and enjoy the benefits of being online.

Community coach and specialist advisor support are also available to provide holistic assessments to identify what is most important to the individual, supporting them to set and reach their goals and aims. Benefits health checks and advice are also provided by the Specialist Advisors helping to improve financial wellbeing and confidence.

Wellbeing Volunteers are available to support people in working towards their goals and aims.

The five partnerships of Inclusion Matters provide a greater opportunity for Carer Identification and connection to Carer Support Services

Volunteer opportunities are available to support those accessing Inclusion Matters Service.

Question and Comments

RO asked that given the evidence of pressure on Carers, with recent statements such as *'empathy doesn't get me a night's sleep'* regarding the volunteers how many are there currently, how many does the service expect to recruit and how quickly are volunteers matched to support individuals? JP responded that currently there are fifteen active volunteers, also a number who remain attached to the service but not currently active. The usual contact for an initial assessment is within 72 hours where the Carer's needs are identified and then ongoing work over a 6 week period helps to connect them with a volunteers and support services to reach goals and aims.

RO asked regarding the technology provision, what is the uptake and are there any barriers such as online fraud etc. JP responded that an important part of the education and support provided covers being safe online.

The technology itself – people are often looking for access to the smaller devices such as a mobile phone or tablet, there are funding barriers for this but all avenues for access to the benefits of being online are perused.

JM Commented that older people are not always able to access social media and other online resources, with the reduced number of Carer Support Workers in recent times, accessing information is difficult in these circumstances. JP agreed that the model of the service has changed over the years, newsletters can be sent out by requesting this via the helpline.

There are many more advice team members now, the Carers Wellbeing Practitioners (previously known as Care Support Workers)

	<p>are working more to support those Carers reaching level three, with complex needs.</p> <p>Recruitment is underway to increase and support that team in the future.</p> <p>MA Commented that After 20 years of being involved with the Truro Carers Group, it seems that the wheel is being reinvented. Having personal experience of little awareness of being a Carer, inclusive access to the right information is essential.</p> <p>As a Carer, time is a big factor that impacts the availability to access information, courses, or online resources.</p> <p>Although Volunteers will help with wellbeing, there is no one to look after those that receive care when needed to allow time for other activities or appointments.</p> <p>What support is available for hospital visits and admissions? JP responded that there are lots to update on from the comments made that can be provided after the meeting but can confirm that there is support within the hospital, the increasing number of Carers Corners are delivered by the admiral Nurse Team.</p> <p>KA offered further information on the review of the Carers Strategy looking at how to support Carers most effectively, one of the biggest themes from the feedback was regarding the need for a break. From this a small number of respite beds were commissioned as part of trialling the best ways of supporting Carers.</p> <p>The presentation is attached as Appendix 3.</p>	
<p>6.</p>	<p>Dementia Strategy: Service Update</p>	
	<p>AH greeted Board members.</p> <p>Partnering with PROMAS, Memory Matters recently provided a course and the day support for Carers to attend an educational meeting on Caring for those living with Dementia, which was very successful.</p>	

Alongside AH's clinical role, based at Launceston Hospital, the other element is as System Lead for Dementia, working with KA and other Commissioners to develop a Dementia Strategy.

AH shared experience of being a Carer for a family member with a diagnosis of Dementia with Board members.

Although Dementia can affect younger people and is not an inevitable element of aging, we know that the prevalence increases with age and that it is a long-term condition.

The Current figures from NHS England for those over 65 years of age with a diagnosis of Dementia is 5735 in Cornwall. The estimates are that the figure should be nearer ten thousand and shows there is likely to be a gap in diagnosis. We do know that one in three of us will have a degree of dementia. The Alzheimer's Society promote that when meeting one person with Dementia, you have met one person with Dementia.

The aim of having a Strategy is to ensure that Dementia remains a priority for commissioners as the prevalence is increasing and eventually will naturally become the priority.

The focus is to follow the Well Pathway:

- Preventing Dementia well
- Diagnosing Dementia well
- Treating people well
- Supporting people well
- People die well.

It is not widely known that Dementia is now one of the leading underlying causes of death, ahead of Cancer and Heart Disease. Therefore, it is essential we offer the right care for people throughout their Dementia journey.

Extensive work has been undertaken with colleagues in Cornwall Council to produce a joint Strategy and the Dementia Improvement work continues.

Some of the achievements over the last few years were impacted by the COVID pandemic, but now work has recommenced on receiving a timely diagnosis, as this is the key to unlocking the right support.

In 2019 Co production work and events gathered views and ideas for service improvements. Most recently the work from Healthwatch, Memory Cafes and other agencies on the *Hear our Voice Report*, to which some Board members may have contributed, included many in depth surveys and interviews to understand the issues and views of those with lived experience.

The report, which can be shared with Board members, is somewhat hard hitting, but holds good honest feedback. It shows that Carers feel isolated and reflects some of the key issues mentioned today regarding respite and easy access to information. The value of regular reviews and knowing who to contact were also highlighted.

Since the report AH and KA attended several events through Cornwall such as Memory Cafes and met with those using services to understand their current views and needs, which again reflected the current key issues of respite, carer breaks and accessing information. There are huge challenges within Dementia Care to make changes.

It remains important to link with the Older Persons Partnership Board as we know it is a long-term condition and relevant for the Board.

The Strategy is a commitment from Health and Social Care to maintain focus on Dementia over the next three years and can be shared with Board members after the meeting.

Most recent improvement work includes:

- A Free monthly education programme for Health and Social Care colleagues in Cornwall –Dementia training
- Respite beds.
- Education for Carers
- Access to specialist services such as Psychologists
- A specialist ward within Cornwall for specific hospital care - in the past most people had been sent out of County to access specialist care and treatment, although accessing the right hospital treatment and onward care does remain a huge

	<p>challenge, having the specialist ward has made a significant difference to those with lived experience.</p> <p>There is also an emphasis on more people being cared for at home, utilising the relevant support mechanisms and greater use of technology.</p> <p>Within the strategy preventing Dementia is an important factor.</p> <p>People may not be aware that there are modifiable risk factors that can help with prevention, and there will be work with Public Health to publicise the messages on Dementia Prevention as key aspects of health aging.</p> <p>There is an Educational Lead and a Clinical Lead in post to support Dementia Prevention. There is also more information on maintaining cognitive health once diagnosed.</p> <p>The Strategy will be reviewed by a joint health and Social Care Steering group.</p> <p>AH will share the slides on the Integrated Care System Milestones for Dementia, to the Board members after the meeting.</p> <p><u>Questions and comments</u></p> <p>RO commented on the importance of Dementia prevention and maintaining the links with the Older Persons Partnership Board.</p> <p>AH agreed and provided some of the smaller detail, such as maintaining good hearing and the importance of social connections to keeping the brain active.</p>	
7.	Updates from Members	
	No updates received.	
8.	Discussion on the future of the Board through 2024	
	Recommendations from workshops - The initial workshop, held in October 2023 was successful in terms of professional input,	

unfortunately not as successful from the lived experience attendance.

A 2nd workshop was held to promote the input from the lived experience. A lot of the feedback was received regarding the title of the Partnership Board, that can at times bring thoughts of frailty. If the title changed it may attract more lived experience members. This was reviewed and the two suggestions for new titles were:

- Ageing Well Partnership Board
- Positive Ageing Cornwall – which showed to be the most popular

Purpose & Value and how can we best support those with Lived Experience – A survey will be undertaken during many Healthwatch Cornwall engagement events over the next month to capture the interest and views of people 55+ in the County, such as what people feel the priorities are in maintaining health and wellbeing as we age.

This feedback from the surveys will help inform the Board agenda moving forward.

Recently, creating interest to join the Board from those with lived experience has been difficult, often people are in Caring roles and have other time limiting challenges.

Capturing the views and ideas in the surveys will help drive changes.

Questions and Comments

SH commented that many people 55+ are still working which impacts availability. JP suggested that conversations could be had within the communal lounges at the Cornwall Care Service Schemes. RO responded that input is needed from all professionals that attended the initial workshop to promote the Board with those using their services, perhaps not to be age defined, which was another element of feedback.

KA Informed the Board that as part of commissioning services Healthwatch Cornwall are contracted to support the voices of those who use services and support changes and improvements in the services provided.

The contract is now due for renewal and as per the usual process there needs to be a set of specifications that identify the role of Healthwatch as a core function and managing Partnership Boards. KA proposed that Board members assist in writing the specifications alongside the mandatory elements. There is now an opportunity to join this work up with the Board ideas and changes.

RO agreed and felt that there are many subjects that could be raised and addressed by increasing the strength of the Board.

MA commented that, in previous meetings those being cared for attended with their Carers and professionals have answered questions raised.

RO added that the way forward could be to focus on the collective themes or trends to drive the agenda and the relevant professional attendance to track questions and actions taken. JT agreed, adding that the right people/professionals attending the meetings would be the way forward.

RO provided an example of the recent proposed closure of the St Mawes Pharmacy, obtaining any information from the Integrated Care Board had been challenging. It was felt that had this issue been brought to the attention of the Partnership Board members earlier the collective approach of the Board may have supported a more effective timely process.

JT agreed that good communication is the key, to reduce the delays in process.

MH update the Board that there is an action from the Carers Partnership Board to investigate ways of modernising the now-defunct Carers Forums function. KA confirmed that this work had been impacted by COVID and remains an important element of the Carers Strategy to meet need, looking at a mixture of different ways to be effective.

JP acknowledged the Carer Forums model, there were originally nine across the County, however, there were also some very large gaps in the different groups of Carers. Considering this it's important that we also now capture as many different Carer views as possible.

	<p>With regards to technology, the Carers Service also have a responsibility and commitment to be inclusive for those who do not use technology or access social media/online provision.</p> <p>RO agreed and again referred to the power of the collective voice in making change happen.</p> <p>SH Agreed regarding the challenges of using technology, Post COVID 19 Pandemic, Cornwall Council provided computer training sessions and Cornwall Neighbourhoods for change offer some very good training, however accessing transport to attend these sessions is also very difficult. More provision and consideration are required. To Note: The Alzheimer’s Dementia helpline 01872 277963 is there for signposting in supporting Carers.</p> <p>JT commented on the library services for internet and computer provision, also support in using the devices and online access. JT asked if there was a directory of help and support services.</p> <p>JP confirmed there are several directories in circulation, the disadvantage is that they can very quickly become out of date.</p> <p>JT suggested the option of lose leaf booklets to replace out of date information with new details.</p>	
<p>9.</p>	<p>Any Other Business</p>	
	<p>Date of next meeting: Thursday 16th May at 2pm. Hybrid with venue to be confirmed.</p> <p>JT thanked everyone for attending and closed the meeting.</p>	



Delivering Better Care

Home Care and Support Recommissioning project

**Strategic Commissioning Lead (interim) –
Homecare Older People and Carers,
Cornwall Council**



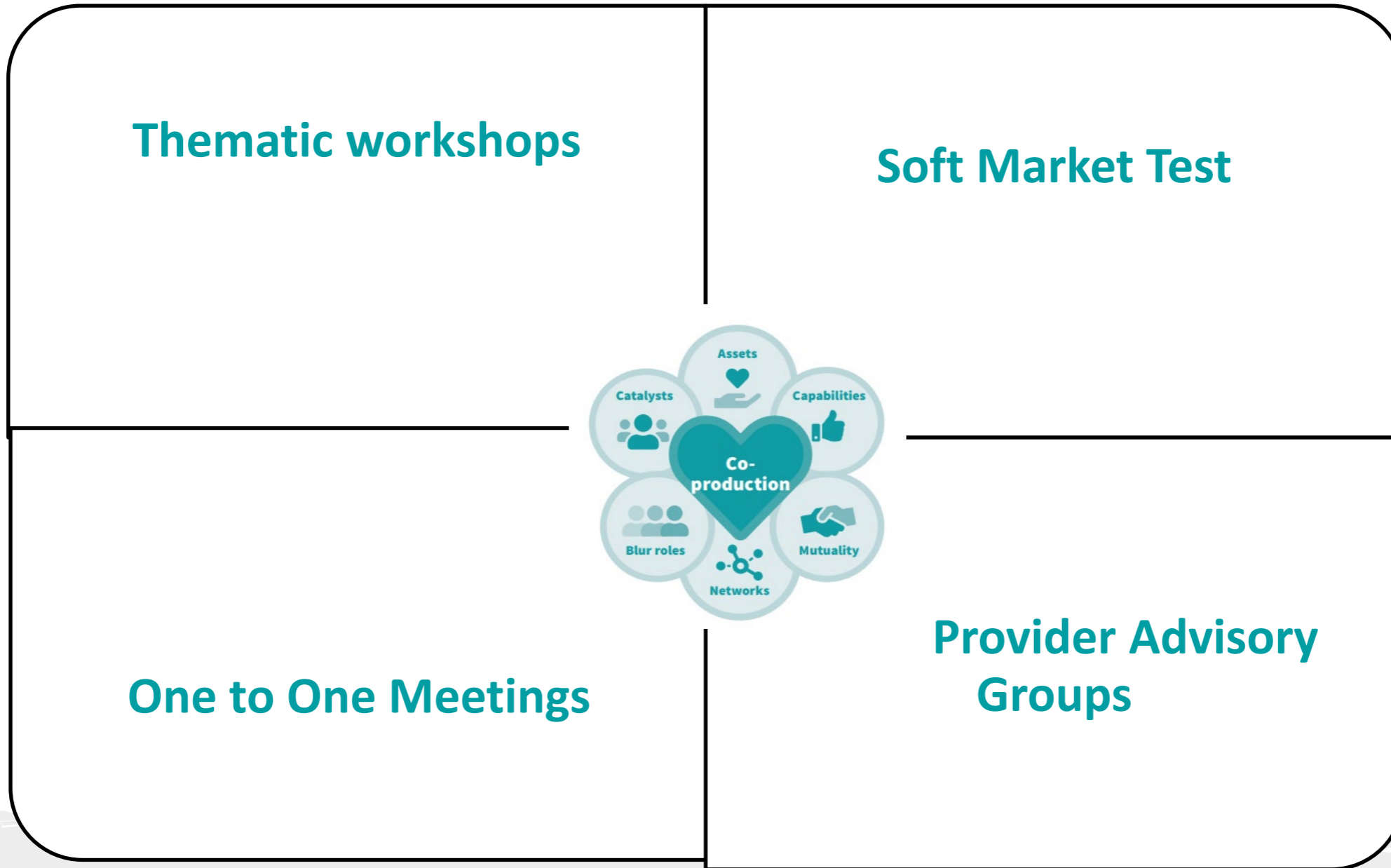
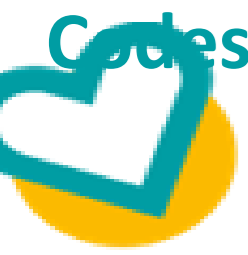
Our Home Care Commissioning Journey

- The Council's Business Plan 2022-26 includes the **Vibrant, Safe and Supportive Communities Outcome Delivery Plan**, which identifies 'Home Care Recommissioning' as a key intervention.
- In 2022, Cornwall Council codesigned and published the '*Delivering Better Care Commissioning Strategies for Maximising Independence and Better Lives*', setting out shared intentions to develop the community-based support market.
- In January 2023, the Council developed an Outline Business Case, which set out the initial recommendations and Key Lines of Enquiry for the future commissioning and purchasing of Home Care services in Cornwall.
- Stakeholder conferences commenced in April 2023.
- In April 2023, the Council engaged with Home Care providers and other key stakeholders to set out the strategic intentions for the future commissioning of Home Care services and the plan to investigate a number of Key Lines of Enquiry to allow for the further development of the Full Business Case.

Rationale / Comments

Key Points

- Council member briefing in April 2023 onwards.
- Presentation to the partnerships board in June 2023.
- Online surveys carried out between April to June 2023.
- In August/September 2023, the Full Business Case was completed and signed off by all parties.
- Work commenced on producing the required documents for the tender pack, contract and evaluation. This was completed end of January 2024.
- Two Provider briefing events in September to October 2023.
- Provider Q&A September to October 2023.
- Market development days in November 2023.



Themes of Questions from Providers

- Role/function of Strategic Provider
- Relationship of Strategic Provider and Individual
- Service delivery - retainers, working in the zones, customer choice and impact
- Business process - payments, ECM, retainers and mileage
- Submission process – how alliances are formed
- Work with health
- Workforce strategy

What the our stakeholders told us

- **Providers:**

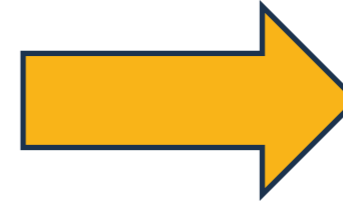
- ... told us that they are eager to work together collaboratively, and that they see the financial benefit for their businesses and staff and how a new approach could help to reduce the inefficient approach to delivery that a competitive market creates. ✓
- ... were clear in their feedback asking us to reconsider and remove the original lead and sub-contracting approach, and to provide them with support to reduce carbon emissions. ✓

- **Care Staff:**

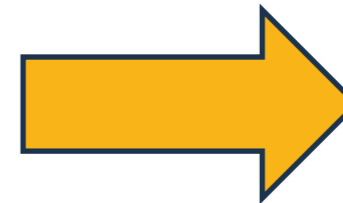
- ... told us that Scheduling and Rota Improvements would make a significant change to their working life. This included more flexible shifts and ensuring that time to deliver care was maximised. ✓

- **People Receiving Care:**

- ... showed a strong desire for flexibility in care. Flexibility would mean being able to ask Care Staff to help with the little things that make up their days. ✓
- ... that they would like us to focus on a need for better communication, cooperation and respect amongst all people and services involved in providing care, more personalisation and localised care that reflects the needs of the geography and demography of Cornwall. ✓



The new model prioritises collaboration and cooperation between the Council, Providers, and other involved Services. This is evidenced in the shift away from the lead and sub-contracting model and Alliance led package optimisation work.



Feedback on Scheduling, Travel & Carbon Emissions support have contributed to a decision to codify a focus on clustering Home Care Services to minimise travel – this will work to optimise capacity in the market, improve care staff experience, and contribute to meeting emissions targets through reduced travel.



Geographical zoning emerged in Provider discussions as a favoured option. It was felt that **“geographical zoning will enhance and encourage collaborative working and help condense travel. Open more opportunity to link up with different commissioned services for infrastructure.”**

Our Approach

Delivery

- 11 Alliances across 11 Geographical Zones
- An Alliance comprises of one Strategic Provider and Individual Providers who are the Alliance Providers.
- Providers are paid for the actual hours delivered during the invoicing period, usually 28 days up to the total commissioned hours.
- Care is commissioned and provided using an outcome-based approach.

Commercial

- Open procedure; one stage invitation to tender process.
- 8 year contractual framework with Cornwall Council break options at year 3 and 6 .

Financial

- Core hourly rate calculation developed with consideration to the Home Care Association methodology for 2024-25.
- Travel and mileage rates have been split into 4 bands based on ProComp analysis of optimised opportunity.
- Administration payments to Strategic Providers.
- KPI / Gainshare payments to Strategic Providers based on 3 KPIs.
- Additional grant funding has been used to cover the cost of the new approach.



Key Benefits for Providers

- 1. A further, mid-year increase in the hourly rate paid for home care of c.£1 per hour** (subject to bids from providers).
- 2. Rates for travel and mileage that are reflective of the geographical area** and its constraints and opportunities.
- 3. Access to annual inflationary uplifts**, which will be linked to the Living Wage Foundation Rate and the Consumer Price Index.
- 4. Access to the Strategic Provider Gain Share**, which is a sum paid to each Strategic Provider, to reflect their additional responsibilities for the Alliance including administration, optimisation and Operational Provider of Last Resort.
- 5. The opportunity to maximise efficiencies in service delivery** both on a package-by-package basis but also at a more strategic, geographical zone level and potentially beyond, which will reduce travel mileage and time and increase profitability.
- 6. The opportunity to improve staff recruitment and retention** by reducing the gaps between visits and optimising travel routes and times. This means staff are paid more and spend less.
- 7. Greater flexibility of care hours for the person**, which helps providers to optimise the available capacity and allows the person to have more control over how their package of care is delivered. This will include faster, more co-ordinated decision making in respect of changes in a person's package of care.
- 8. Regular dialogue with Commissioners**, which will allow issues to be proactively addressed and for strategic capacity planning

Delivery Model

- Cornwall will be divided into 11 Geographical Zones
- Post codes will be used to determine which Geographical Zone the Person lives in and consequentially which Place-based Alliance will deliver their Package of Care.
- Home Care Services will be delivered via 11 place-based Alliances, where a group of Home Care providers have come together to work collaboratively to deliver the Service. Within each place-based Alliance there will be:
 - A Strategic Provider - will be identified by the Alliance during the Tender Process to administer the Alliance, coordinate capacity optimisation, provide the Operational Provider of Last Resort Function and act as the Alliance's strategic link to Cornwall Council.
 - Individual Providers - who are the providers of Home Care Services that are working as part of the Place-based Alliance.
- Individuals Providers will be able to independently submit an offer directly to Cornwall Council via the Adam system.

Rationale / Comments

Based on the Council's Adult Social Care localities, aligned to the Primary Care Networks and post codes.

New Packages of Care will be advertised to the relevant place-based Alliance for the Geographical Zone in which the Person lives, which will be determined by their post code.

Individual Providers in the Alliance will collaborate to identify the optimal capacity to meet the Person's assessed needs, outcomes and preferences, while optimising travel routes and considering any other relevant factors.

This will ensure fairness across the request system.

Delivery Model

- Within each Place-Based Alliance there is one Strategic Provider (Operational Provider of Last Resort) who acts as the coordinator organisation.
- Alongside the OPoLR there will also operate a Strategic Provider of Last Resort (SPoLR).

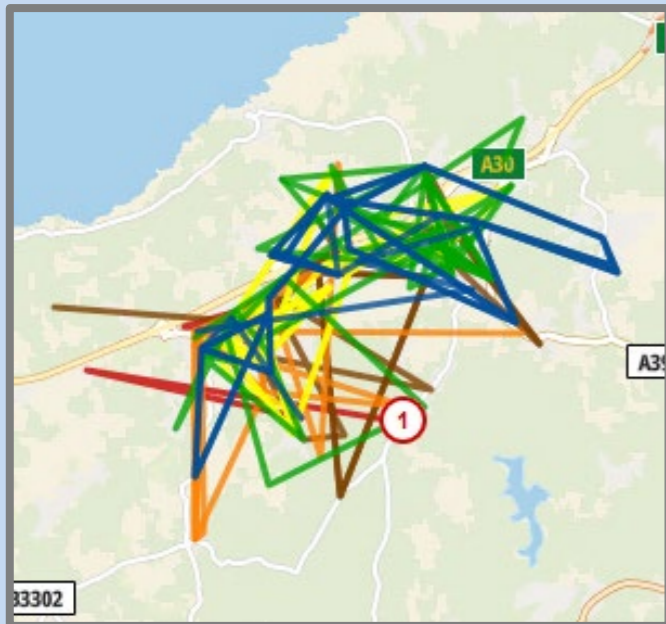
Rationale / Comments

The Strategic Provider is responsible for:

- Co-ordinating the capacity optimisation activity in the Place-Based Alliance.
- Creating a robust and sustainable Home Care market by acting as Operational Provider of Last Resort for the Geographical Zone.
- Ensuring the market supply sufficiently meets the demand in the Geographical Zone.

SPoLR will offer support to the Strategic Provider and the Alliance to prevent and manage fragility of the Strategic Provider or the whole Alliance and to intervene in the event of Strategic Provider or Alliance failure.

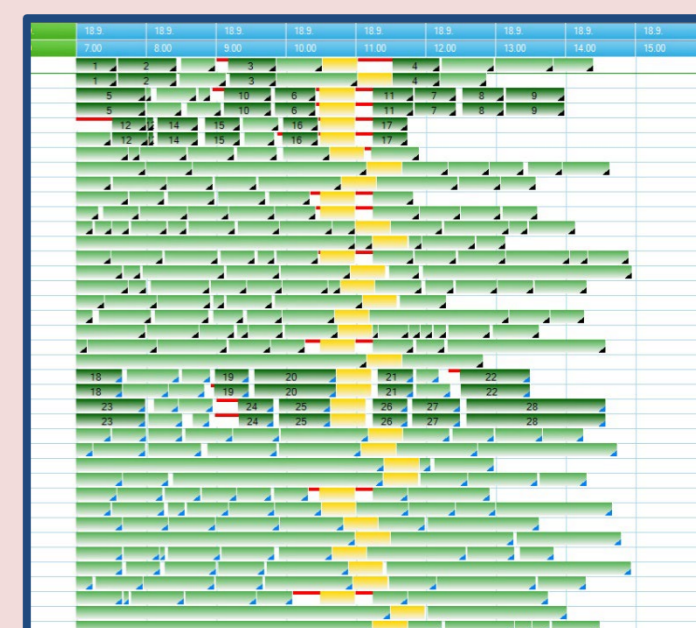




- **Current way of working:** Uncoordinated approach with many providers working in the same area
- **Providers' clients are spread over a wide area**
- **Workers must travel long distances between clients**
- Difficult for providers to utilise capacity effectively and maintain well-filled schedules for their care workers
- Sample of routes & schedules from North Kerrier:
Representing ~30% of providers & ~60% of service users



- **By cooperating in place-based-alliances** providers would be able to work in smaller localities
- **Significantly reduces the need for travelling**
- Becomes possible to create more compact, better filled schedules for care workers
- Example shows potential routes & schedules for 100% of clients



Commercial Model

- The contract for each Place-Based Alliance will be procured and awarded in eleven separate lots; aligned to the Geographical Zones.
- Tenderers will bid as Alliances.
- The procurement process will require standard minimum requirements to be met by all tenderers in an Alliance before the Alliance completes the Invitation to Tender stage.
- Each Alliance will consist of a minimum of one Strategic Provider and at least one Individual Provider.
- Strategic Providers will have additional responsibilities in return for additional fixed and variable payments.
- Alliances can bid for between one and eleven lots subject to structure, financial, economic, capacity and anti-collusion considerations.
- Bids will be evaluated against Quality, Price and Social Value criteria to find the most economically advantageous for each zone.
- Contractually there will be:
 - An overarching Alliance agreement between all of the providers and the Council
 - Individual service agreements between the Council and each provider
- Providers will join the alliance at the start of the contract and remain for the duration (3+3+2 years).
- The framework may be opened up to additional providers under certain circumstances to meet capacity.

Timeline

Provisional, subject to change

Spring-Autumn 23

Dec 23-Spring 24

Spring 24

Summer 24

**Engagement
Activities**

**Business Case
Approvals**

Procurement

Publish tender
Respond to tender
Evaluate responses
Award contracts

**Engagement
Report**

**Award
Contracts**

**Mobilisation of
new contract**





Thank you / Meur ras

If you have any questions or comments

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Delivering Better Care

Cornwall Supported and Specialist Housing Strategy 2023-2025

**Head of Commissioning – Older People and
Carers, Cornwall Council**



Approach

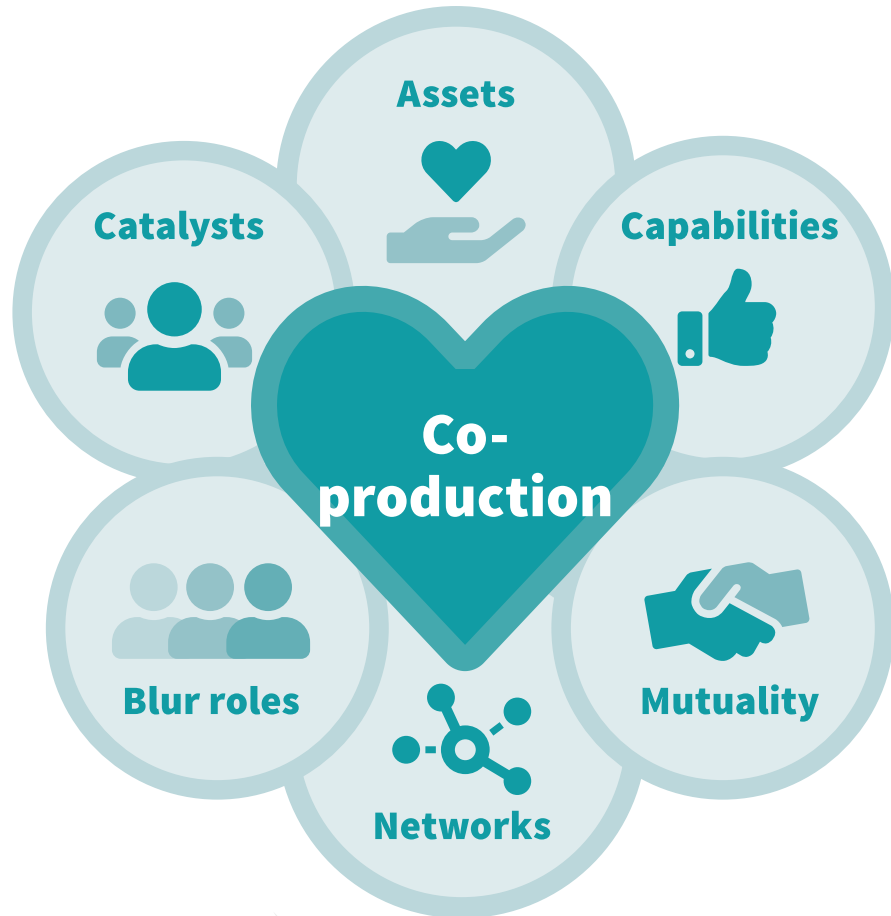
The Supported Housing Regulatory Oversight Act 2023

- Statutory responsibility to Local Authority Housing Departments to inspect, and license supported accommodation.
- A further requirement of the Act is to deliver a Supported Housing Strategy and needs assessment to be reviewed every 5 years.

In December 2022 Cornwall Council commissioned the Housing Learning and Improvement Network to develop a Supported & Specialist Housing Strategy; with the aim that the Council can take a long-term, strategic approach to the delivery of accommodation – i.e. right type, right place, right time.



Process



- Extensive engagement with colleagues from Housing, Planning, Adult Social Care, Children's Services, and others (domestic abuse; drug/alcohol service commissioning; asylum seeker services)
- Engagement with a sample of external stakeholders
- Visits to a sample of supported housing services
- Analysis of an extensive range of data
- Informed by local policies/strategies and forthcoming national supported housing policy
- Iteration of drafts with steering group and other internal colleagues
- Contemporary housing and support practice guide to inform strategy

Scope

The Strategy and Implementation Plan covers the requirements for specialist, supported and accessible homes for:

- ▶ **People at risk of homelessness**, including people with multiple and complex needs, rough sleepers, people experiencing domestic abuse, people on probation, people with drug/alcohol related needs, refugees and young people (including care leavers, young parents)
- ▶ **People with learning disabilities and/or autistic people**
- ▶ **People with serious mental health needs**
- ▶ **Older people (people aged 55+)**
- ▶ **People with physical disabilities/long term conditions**





Requirement for supported housing for people at risk of homelessness up to 2050

▶ **c.195**

supported housing units needed for people **with complex and multiple needs** experiencing homelessness

▶ **c.32**

safe **accommodation** units needed

▶ **c.50**

supported housing units needed for people **on probation**

▶ **c.95**

supported housing units needed for people **with an alcohol and/or drug related need**

▶ **c.40**

supported housing units for **young parents aged 16-24**

▶ **c.175**

supported housing units for **vulnerable young people** (including care leavers)

It is anticipated that the vast majority of refugees and asylum seekers do not currently require supported housing. However, there is a possibility that a minority of refugees may potentially require supported housing in the future as a result of, for example, mental health issues and/or drug/alcohol related issues as a result of the trauma they have experienced.



Requirement for supported housing for people with learning disabilities and/or autistic people up to 2050



c.650

additional supported housing
units needed for people with
**learning disabilities and/or
autistic people**





Requirement for supported housing for people with serious mental health needs up to 2050

▶ c.355

supported housing units
needed for people with
serious mental health needs



Requirement for supported housing for older people up to 2050

▶ Retirement/sheltered housing

The estimated need is **c.5,612 homes** of which **c.1,964 homes** are estimated for social/affordable rent and **c.3,648** are estimated for open market sale/shared ownership.

▶ Residential care

The estimated need for residential care is an additional **825 beds**.

▶ Extra care housing

The estimated need is **c.3,880 homes** of which **c.1,940 homes** are estimated for social/affordable rent and **c.1,940 homes** are estimated for open market sale/shared ownership.

▶ Nursing care

The estimated need for nursing care is an additional **2,901 beds**.



Requirement for supported housing for people with physical disabilities/ long term conditions up to 2050

The estimated need for accessible housing for people with physical disabilities/long term conditions is **33,842 units**, this includes:

- ▶ **31,727** units of accessible/adapted homes (M4 2 standard)
- ▶ **2,115** units of fully wheelchair adapted homes (M4 3 standard)

Implementation

The Implementation Plan sets out **the actions and approaches to deliver** the Supported & Specialist Housing Strategy.

The plan is **smart** with a focus on:

- ✓ Actions which are enablers to delivery
- ✓ The delivery of the accommodation and support required



Given the scale of delivery requirements a disciplined 'programme management' approach is required.

- This will be tracked through the governance reporting into the Council's Outcome Delivery Boards and aligned to the interventions.

Supported Housing Programme: Implementation Plan for older people

2023	2024		→ 2031		
Q3-Q4	Q1-Q2	Q3-Q4		By 2030	By 2032
<p>By 2023/24: Strategic Review of sheltered housing stock delivered by CHL to support the development of a long-term plan for the future and to inform the HRA</p>					
<p>Winter 2023 The Council will develop with its ICS partners a market position statement for older people supported housing</p>	<p>Spring 2024 Visibility and oversight of all sites and planning applications for specialist housing for older people with early engagement process established with the marketplace.</p>	<p>Summer 2024 Expansion of the use of Supportmatch which provides live-in support to adults and families by matching people who need support</p>	<p>Summer 2024 Council to develop a new approach to the commissioning of older people care homes (residential and nursing)</p>	<p>By 2030 Delivery of 750 units of Extra Care by Mears Strategic Partnership across the three SPA locality areas.</p>	<p>By 2032 Council and Sanctuary to deliver a ten-year development programme to deliver seven new care homes and four refurbished.</p>
		<p>Summer 2024 Council to develop a new approach to the commissioning of Extra Care over and above the strategic partnership with Mears given scale of demand.</p>	<p>Autumn 2024 Council to secure outline planning on 5 to 7 sites it owns to expand the delivery of Extra Care and Supported Living.</p>		
		<p>Autumn 2024 Council to identify a new developer and operator for Trengrouse (Helston) and Trefula (St Day) Care Homes and to bring forward new development proposal who need support</p>			

Supported Housing Programme: Implementation Plan for people with learning disabilities and/or autistic people/people with a severe and enduring mental health need

2023	2024		2025
Q3-Q4	Q1-Q2	Q3-Q4	Q1-Q2
<p>Winter 2023 The Council will develop with its ICS partners a market position statement for learning disability, autistic people and people with severe and enduring mental health difficulties</p>	<p>Spring 2024 Visibility and oversight of all sites and planning applications</p> <p>June 2024 Housing and Support recommissioning for all supported living services to be completed</p>	<p>September 2024 The Council will look to utilise its own surplus land and property to support the delivery of supported and specialist accommodation for people with long term disabilities</p> <p>Winter 2024 Identify people with home ownership through the HOLD programme</p> <p>Winter 2024 Increase the number of Shared Lives carers who can support people with long term disabilities</p> <p>Winter 2024 Build a pipeline of development with the new providers as a result of the Housing and Support recommissioning exercise</p>	

Supported Housing Programme: Implementation Plan for people at risk of homelessness

2023	2024		2025
Q3-Q4	Q1-Q2	Q3-Q4	Q1-Q2
<p>Winter 2023 The Council will develop a market position statement for people at risk of homelessness who need supported accommodation</p>	<p>Spring 2024 Recommissioning of support for Young People, Young Parents and Families in supported accommodation</p> <p>June 2024 Housing and Support recommissioning for all supported living services to be completed</p>	<p>Winter 2024 Build a pipeline of development with the new providers as a result of the Housing and Support recommissioning exercise</p> <p>Winter 2024 Review the existing contract/s for all floating support services</p> <p>Winter 2024 Segment the Temporary Accommodation to understand who is known to housing and social care and undertake proactive case management</p> <p>Winter 2024 Development of a Sufficiency Strategy for Children and Young People with accompanying action plan</p>	<p>March 2025 Increasing the scale of the Housing First provision for those who have additional barriers to accessing supported housing</p>

Ongoing: Review effectiveness of Housing First with our Registered Provider Partners

Ongoing: The Council will look to utilise its own surplus land and property to support the delivery of supported and specialist accommodation

Supported Housing Programme: Implementation Plan for people with physical disabilities /long term conditions

2023	2024		2025
Q3-Q4	Q1-Q2	Q3-Q4	Q1-Q2
<p>Winter 2023 Review the DFG policy and address the waiting list</p>	<p>Spring 2024 Strategic review of DFG to determine who is best placed to deliver it and the approach</p>		
<p>Ongoing: The Council will use planning policy to require housing developers to deliver % of homes on new housing developments to be built to M4(2) standards</p>			
<p>Ongoing: The Council will seek to use planning policy to encourage developers to deliver homes on new housing developments to be built to M4(3) standards</p>			
<p>TBC: Develop and strengthen the database on existing adapted/accessible properties in the social housing sector</p>			

Any questions?





CORNWALL CARERS SERVICE

Support For Those Who Care

Inclusion Matters Service

Connecting Cornwall's communities



Older People's

Partnership Board 15.02.24





Cornwall Carers Service – Service Model

Level one help to self manage

Level Two enhanced support when you need it

Level Three Carers personal budget or direct payment

The Service Model is designed to support Carers to manage and maintain their caring role and their personal wellbeing.

With focus placed on level 1 and 2 of the service identifying and supporting more carers. With carers progressing to level 3 when all options within levels 1 & 2 have been exhausted.



INFOGRAPHIC

What support does the service offer



Carers Accessing Service

Intuitive website with live chat, text to chat options advice line



Carers register



Support for young and young adult carers, one to one support access to specialist support. A range of residential activity and local activities



Carers Passport



Carers Grants including GREG group support memory café support and added value grants



Statutory Carers needs assessment



Prevention and support to avoid crisis and Carer break down

Level 1 of the service includes a basic level of support live chat text to chat and inquiry either through self referral or vial the advice line seeks to understand what matters to you and what is important to you .

A guided conversation which is personalised and holistic explores with the carer support needs and connection to resources that help

Including the Carers emergency card which in its self is a tool to activate the planed contingency, but more importantly is an opportunity to explore and plan with the carer for the future looking to identify preventative measures to mitigate against crisis

Carers passport which is imbedded within the emergency card and recognised across the Devon Plymouth and Cornwall, and links carers into support available across hospitals

Carers register in order that we might better understand who our carers are how many carers there are in our locality, information advice and guidance about other carers registers that might be relevant eg GP carers register

E news letter which contains Carer relevant news Carer resources Carer support Carer concessions health information opportunities to raise the carer voice and profile

Referral and self assessment

Live real-time support and practical solutions through the highly qualified advisor team.



Enhanced support when you need it

Level 2 enhanced support when you need it

Assessment of need and development of wellbeing plan around what matters to you and what's important right now

Grants learning and development opportunity support to maximise income working with carers to develop and create sustainable solutions that make a difference.

Access to training and development through a competent and experienced team our Partner Promas offer an extensive range of learning and development opportunities social engagement and so much more.

Access to community resources and community coach support accessing a range of community support and activity.



Carers personal budget or direct payment Carers assessment

Level 3

Level 3 supporting carers through more challenging circumstances

Hospital admission and discharge seeking to support carers to safely and confidently manage their own health as well as that of the person they care for.

Practical support to access benefits and welfare entitlement

Support to understand and manage safeguarding risks

Support to access education employment and training

Support with bereavement

Support to develop your wellbeing

Carers Needs Assessment and Support plan



Inclusion
Matters

Connecting Cornwall's Communities

CRCC
supporting cornish communities

disAbility

Cornwall &
The Isles of Scilly
ageUK

CORNWALL
COUNCIL

Inclusion
Cornwall



Inclusion Matters Support



A Service that aims to make it easier for residents of Cornwall to find out the information and advice they need. To increase their wellbeing, Stay healthy, get active, increase their connection to community.



The Helpline 01872 266383 the first port of call for the inclusion service, the helpline is managed by age UK CIOS their trained advisors will support callers with information advice and guidance about community resources, activities, access to further support.



Cornwall Link a website with information about local groups in your area local resources, a place to find information and also share information. Community asset workers will support local peer support groups and organisations access Cornwall link raise the profile of their group or activity making them both more sustainable and accessible to individuals.

Inclusion Matters More specialist Support



Support to successfully and sustainably discharge from hospital. Holistic assessment discussion and discovery about what's important to you an inclusion plan around supporting your needs



Getting on line support and access to digital confidence and developing digital skills. Support to gain all the benefits of being on line.



Community coach support and specialist advisor support, Our community coaches will complete a holistic assessment identifying what's important to you, work with you to develop an inclusion plan that reflects your goals and aims and provide support to achieve your goals and aims. Specialist advisors can support you with advice and guidance complete a benefits health check connect you to support and resources that can help you to improve your financial wellbeing and confidence.

Inclusion Matters and volunteering



Wellbeing volunteers you can access a wellbeing volunteer, a team member will complete a holistic assessment talk about what's important to you. Develop an inclusion plan and match you with a volunteer who can work with you to achieve your goals over an agreed time frame.



Becoming a volunteer We support volunteers into the service, we can help you with your volunteering aspirations. As an inclusion matters volunteer you can access a wide range of training benefit from monthly supervision and support access to equipment to complete your volunteer activities, support to find an access volunteer opportunities Opportunity to become a wellbeing volunteer

Inclusion Matters the benefits of partnership working



The inclusion Matters team is a partnership, there are five partners. The partnership approach gives the service much wider scope and adds to its resources available to support need and achieve better outcomes designed by individuals.

Some examples

Household support funds have been available to partners and individuals accessing the service over the last 3/4 years. Bringing financial relief and assistance to hundreds of our service users. Carer identification and connection to carer support service. Assistance with welfare and entitlement.

Most recently the partnership is doing invaluable work around winter pressures. Supporting 267 individuals with unmet care needs.

HOW TO CONTACT US



Cornwall Carers Service 01736 756655



hello@carersadvice.org.uk



www.cornwallcarers.org.uk www.kernowyoungcarers.co.uk



Inclusion Matters 01872 266383



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