

East Renfrewshire Health and Social Care Partnership

Strategic Commissioning Plan

August 2023

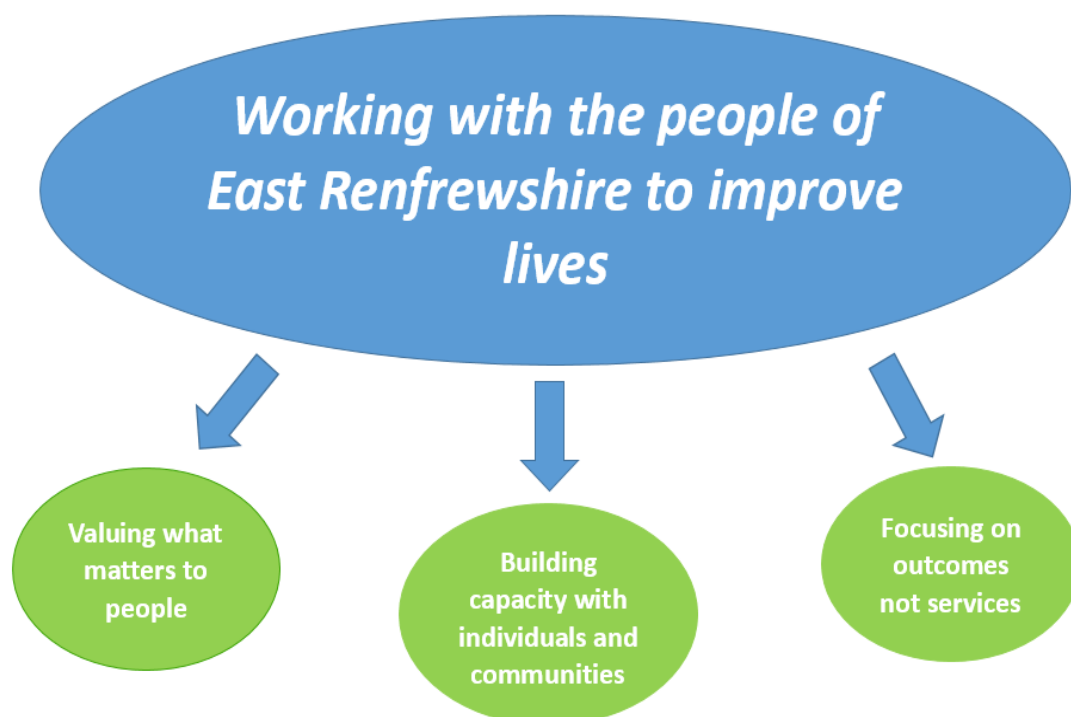
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Contents

Introduction - our collaborative commissioning partnership approach	3
Demographics and needs assessment	5
Current market context in health and social care.....	9
New opportunities – understanding needs and the local market	11
Financial context and Savings Recovery and Renewal.....	13
Contractual Arrangements and Procurement Plan	15

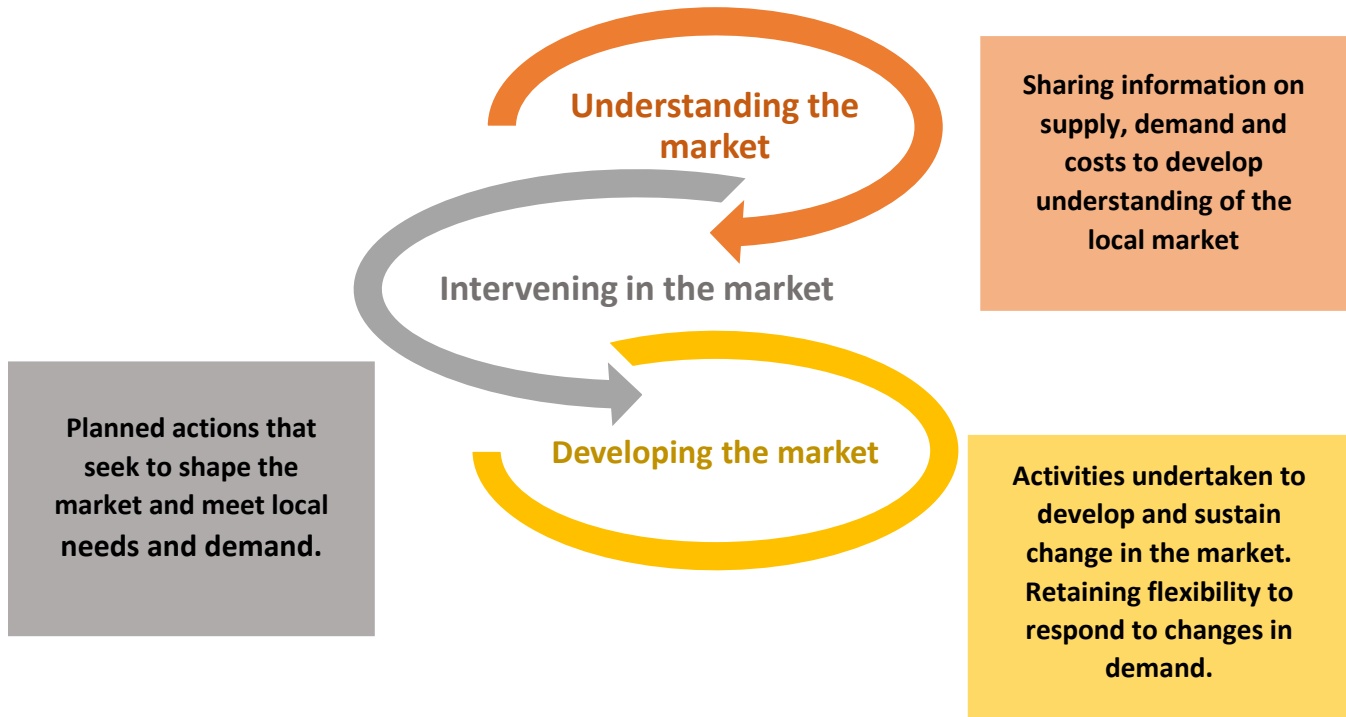
Introduction - our collaborative commissioning partnership approach

East Renfrewshire Health and Social Care Partnership under the direction of East Renfrewshire's Integration Joint Board (IJB), builds on a secure footing of a 16 year commitment to partnership working in East Renfrewshire. Our market facilitation statement represents the current position in our ongoing conversation with people who use service, partner providers who deliver with us, carers and other stakeholders who form part of East Renfrewshire Health and Social Care Partnership (ERHSCP). Our strategic vision is to create opportunities to work together to shape the local health and social care environment to ensure that together we can progress the aims of the HSCP Strategic Plan 2022-2025 and be responsive to the changing needs and aspirations of the people of East Renfrewshire.



We have already published information through our Joint Strategic Needs Assessment and through our performance reports. The Strategic Plan 2022-2025 which sets out the vision and priorities for service change and improvement in East Renfrewshire. This market facilitation statement sets out how we expect to deliver our strategic intentions, working together with partner providers through our commissioning and procurement arrangements.

It is important to ensure residents have choice and control through a variety of providers and creative support options. They must also understand what support is available and be able to make informed choices by having easy access to information about the quality, flexibility, safety and cost of services.



We will seek to do this through a market shaping approach by:

- sharing with current and potential providers the intelligence we have on population trends, the current demand for and costs of care
- future demand and the shape of the social care economy
- sharing our ideas known about how we believe the market needs change over time, in response to changing residents expectations and economic, demographic and legislative context
- identifying opportunities for collaboration to develop and sustain the local social economy
- being clear with providers about how we will intervene in the market, through the investments we make and the encouragement and advice we give, to achieve a balance in the supply and demand for services
- explaining why we need to disinvest in some areas and increase spending in others, giving those organisations who wish to grow and adapt to new circumstances time to do so.

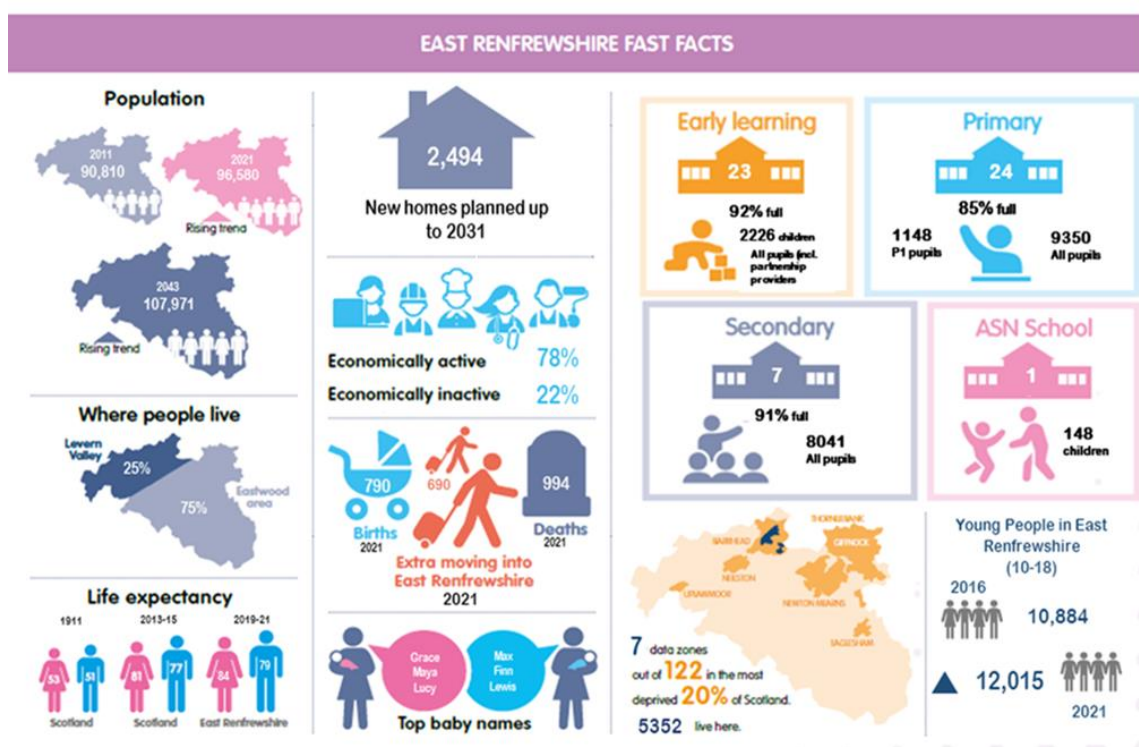
Our Plan will complement and add value to the business planning and development activities of current and potential providers. It sets out how the HSCP is working with all partners in health and social care to maximise use of the available resources.

Demographics and needs assessment

Our Strategic Plan 2022-25 identifies 9 priorities which the HSCP along with our partner providers in the third and independent sectors, provide a range of health and social care services to individuals, families and carers.

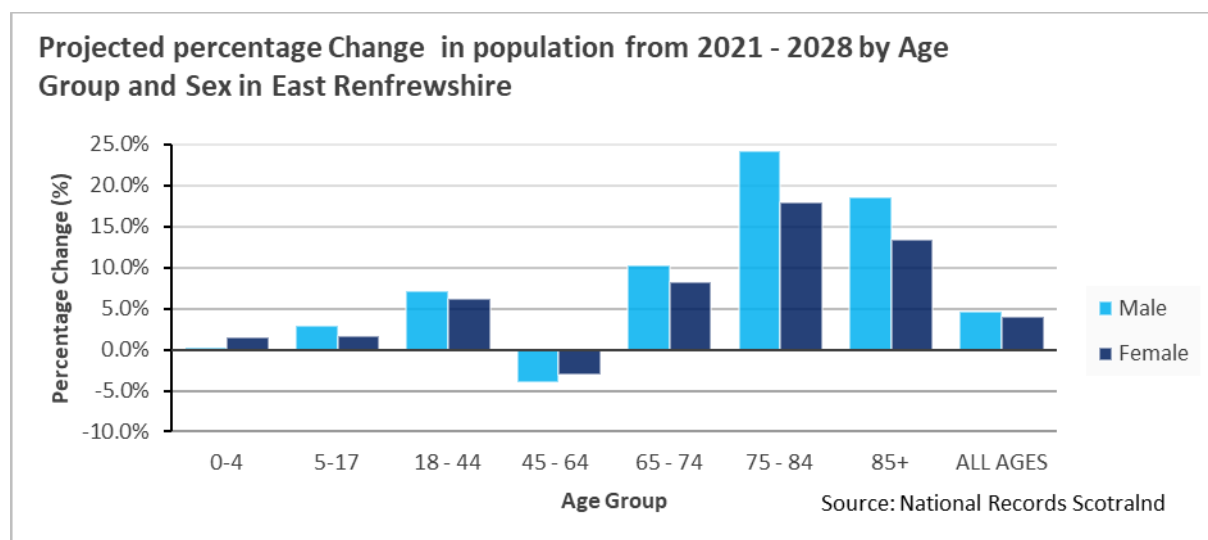
- Working together with children, young people and their families to improve mental and emotional wellbeing;
- Working together with people to maintain their independence at home and in their local community;
- Working together to support mental health and wellbeing;
- Working together to meet people's healthcare needs by providing support in the right way, by the right person at the right time;
- Working together with people who care for someone ensuring they are able to exercise choice and control in relation to their caring activities;
- Working together with our community planning partners on new community justice pathways that support people to stop offending and rebuild lives;
- Working together with individuals and communities to tackle health inequalities and improve life chances;
- Working together with staff across the partnership to support resilience and wellbeing; and,
- Protecting people from harm.

Our Joint Strategic Needs Assessment is available as a supporting document and provides a detailed needs assessment to support the Strategic Plan. A full socio-demographic profile has been developed for East Renfrewshire and covering our two localities (Eastwood and Barrhead) giving information on population, households, deprivation, health profile, life expectancy and use of services.

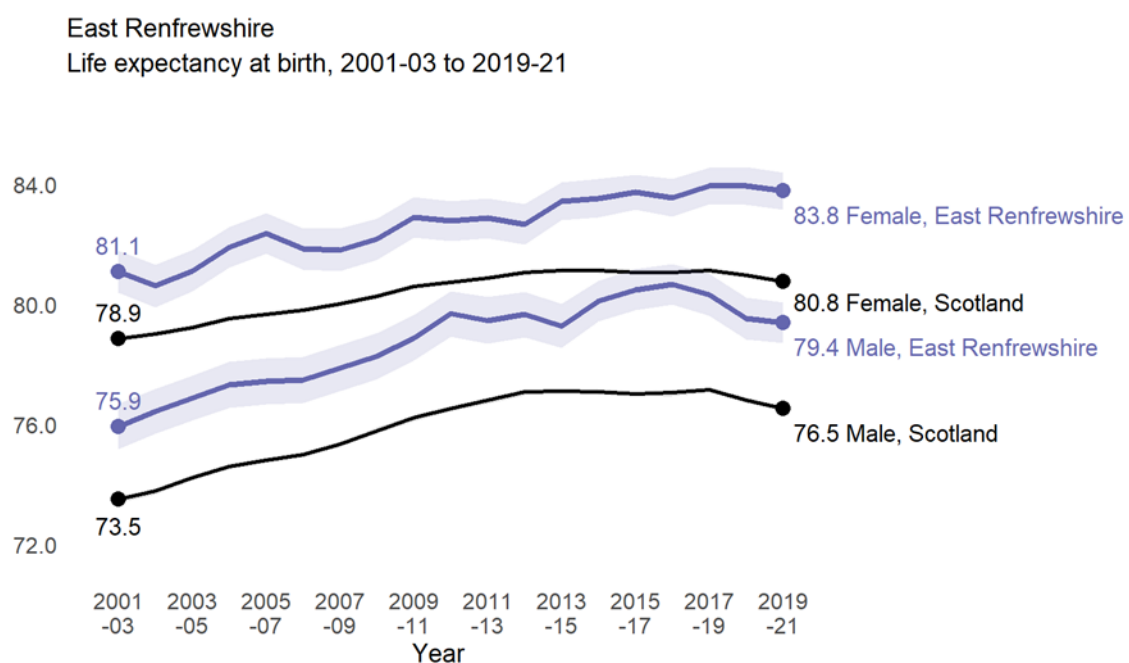


From this detailed analysis we know our population is changing with a corresponding increase in the health and care needs of our residents. Overall, East Renfrewshire’s population is growing with the most significant growth among our younger and older population, who we know to make greater use of universal health services.

The overall projected rise in population is similar to the increase seen in the five years to 2021. The population aged 75 and over is projected to increase at a rate of 18.8%. The 65+ population is projected to increase from 20.6% of the population in 2021 to 22.5% of the population by 2028. The table below provides an overview.

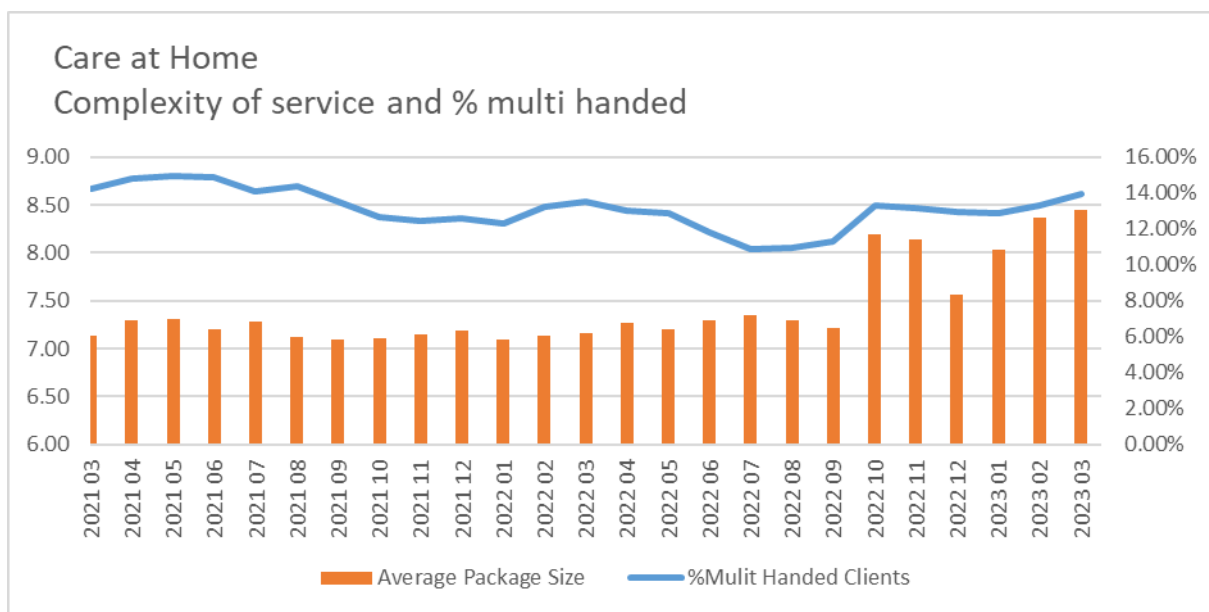


Life expectancy within East Renfrewshire amongst males has grown faster than the national rate with life expectancy for men rising 3.5 years in the last 20 years. This is reflected in the population projection for males in the coming years.



In addition, there has been significant growth in our most elderly population with a 49% increase in the number of residents aged 75 years and over the last decade. The 85+ population is projected to increase by 15% between 2021 and 2028. People over 80 are the greatest users of hospital and community health and social care services.

There has been a shift in the way that people are being cared for with an increasing proportion of people being cared for at home; and a shifting 'balance of care' away from long term care homes placements. With this shift in balance, our care at homes services have seen increased complexity and higher levels of care need. Between March 2020 and March 2023, the average size of care at home packages increased from just over 7 hours to nearly 8.5 hours per week. 14% of our service users now require support from two or more carers; up from 9% in February 2020.



However, there are notable discrepancies seen across the area with some neighbourhoods experiencing significant disadvantage. More than half of East Renfrewshire’s population (53%), and 67% of the Eastwood population live in SIMD datazones that are among the 20% least deprived in Scotland. All of East Renfrewshire’s neighbourhoods that are among the 20% most deprived are concentrated in the Barrhead locality, with a quarter of the population living in these datazones.

In line with this socio-demographic profile, we see differing health outcomes for the populations in our two localities. While life expectancy at birth is above the Scottish average for East Renfrewshire as a whole, it remains below average in the Barrhead locality. Early mortality rates and the prevalence of long-term conditions including cancers are also higher for Barrhead. Data also shows poorer outcomes for the Barrhead locality in relation to the percentage of the population prescribed medication for anxiety, depression and psychosis. Hospital admission related to alcohol and drugs are also higher for Barrhead.

Post Covid-19 impacts are still developing but it is clear that there have been negative consequences for businesses and employment prospects nationally and locally. The evidence clearly links economic disadvantage with poorer physical and mental health outcomes and we have seen the unemployment rate rise in East Renfrewshire. The impact on health inequalities has had a disproportionate impact for disadvantaged communities and specific vulnerable groups. The diminished or interrupted care and support has made disabled people, black and minority ethnic people, older people and children and young people more vulnerable. Mental health and wellbeing has been impacted across all age groups increased social isolation, distress, anxiety, fear of contagion, depression and insomnia in the general population. A number of key groups are at higher risk of adverse mental health outcomes. These include front line staff, women, and people with underlying health conditions, children and young people (up to age 25). Locally, we know that families and people we support have reported worsening mental wellbeing.

Although the HSCP has succeeded in maintaining the vast majority of services throughout the pandemic we have been required to adapt provision and prioritise those in greatest need, particularly during the tightest lockdown restrictions. Some service areas have seen increasing levels of need, frailty and vulnerability among the individuals they are working with where lower level, preventative interventions have been reduced, and increased carer stress.

The pandemic period has seen new ways that people engage with services with greater use of technology and a reduction in face to face contact. Learning from this has allowed services to review delivery approaches to meet the changing expectations of people following the pandemic. We have seen increasingly supportive working relationships between statutory, independent and third sector partners. The experience of the pandemic has reinforced the crucial role of the community and third sectors in delivering essential support to our residents.

Over the course of the pandemic we have seen incredible resilience, commitment and creativity from staff. We have seen innovation and collaboration, between partner organisations and with our communities. This capacity for change and innovation will underpin our activity as we move forward.

Current market context health and social care

Health and social care services are delivered alongside our third and independent support and care providers and partners. Through our service reviews, current market assessment and conversations with providers and engagement with people and communities we have identified key areas we want to address through market shaping that will support the delivery of our Strategic Commissioning Plan 2023 -25.

- Recognising the resilience of staff groups have been impacted by ongoing challenges from the pandemic including recruitment and retention across all sectors.
- Growing demand for care at home services both in relation to care hours and increasing complexity of care is not matched by growth in cross sector capacity.
- Implementation of Supporting People Framework to ensure personalised approach with people in need are supported and resources are maximised.
- An area of increasing need is from children and young people with a neurodevelopmental diagnosis (including autism) or suspected diagnosis.
- Continue to support our care experienced children and young people and to fully implementing the findings of the national Independent Care Review report “The Promise”.
- Our person-centred approaches are committed to increasing choice and control, achieving outcomes and increasing use of Self-directed Supports.
- Services for people with learning disabilities will offer a broader range of opportunities and experiences.
- Young people in transition supported to maximise independence choice and control.
- Build on our collaborative community supports to minimise isolation through approaches such as befriending, peer support and the work of our Kindness Collaborative and Talking Points, linking people to local supports.
- Make best use of technology and health monitoring systems to support independence and self-management.
- Work collaboratively with housing providers to support independent living in our communities and to better understand local needs and future models of housing, technology and support.
- Support mental health and wellbeing interventions delivered through primary care, third sector and community-led activity.
- Work across all sectors to improve hospital discharge and better support for people to transfer from acute care to community supports.
- Continue to encourage collaboration between support providers for advice, information and support for carers ensuring local provision that best meets carers needs.
- Work with our partners to tackle inequalities and support residents with a number of long term conditions such respiratory illness, cardiovascular disease and obesity to provide physical and psychological health benefits
- Continue to protect adults at risk from harm by strengthening our processes and awareness of Adult Support and Protection with our partners, providers and the public.

Changing needs and demands

Whilst identifying our key areas for future work we recognise the immediate and future challenges for the partnership. Our Strategic Plan reflected the context of the post Covid-19 pandemic and response to immediate pressures. This was marked by both increasing and changing service demand pressures.

All services experienced a higher volume of referrals to adult and child protection; increased CAMHS referrals and increase cases allocated to our children's social work teams; increased referrals to Care at Home services (and capacity pressures on partner providers) and higher levels of frailty and complexity among those accessing adult services.

Demographic pressures remain a very specific challenge for East Renfrewshire as we have an increasing elderly population with a higher life expectancy than the Scottish average and a rise in the number of children with complex needs. Deconditioning and isolation for older people and adults with additional support needs alongside increased demand on carers have been reflected in our referrals. Mental health needs of all sectors of the population has been marked with reduced capacity in therapeutic services.

Working with our acute sector to minimise delayed discharges from hospital has increased demand on both our in house and external care at home services as we continue to require more community based provision. This has been further exacerbated with an increase in request from people in the community requiring additional care support.

The cost of drugs prescribed to the population of East Renfrewshire by GPs and other community prescribers is delegated to the IJB. This is a complex and volatile cost base of around £17 million per year with the potential to rise to £19 million in the coming year, without actions to mitigate.

Supporting the care market and our local care providers who deliver alongside the HSCP. The sustainability of the care provider market following Covid-19 is still being felt in relation to staff recruitment, retention and higher cost of living. We continue to work closely with all our partners to work through issues, support where we can and look to develop the best way of working, building on our collaborative and ethical commissioning approach. This will support our work to date, including the move to national contractual frameworks along with the implications from the independent review of adult social care and proposal for a National Care Service, which may impact on how we commission services.

Our budget projections identify the funding gap in future years could range anywhere from £5m to £10m in 2023/24 and our Medium-Term Financial Plan for 2023/24 to 2027/28 will be refreshed following the setting of our budget for 2023/24.

A Supporting People Framework implementation is underway to ensure that we can provide person centred support to people in greatest need, utilising all supports available and to maximise the resources available to us. Working with individuals, families, partners and third and independent sector to review current and future care needs to ensure we can maximise resources using a risk based approach to assessment of need. A key focus will be on maximising shared resources and assets through a collaborative approach to delivery of health and social care services.

Working with our local partner providers we developed a shared statement of intent setting out agreed principles and approach which are co-designed with wider partners and stakeholders. (Appendix 2) .We achieved this by working together through a series of engagement events between June 2022 and March 2023, involving HSCP services partners, stakeholders and people with lived experience. Colleagues from Health Improvement Scotland (HIS) and Coalition of Care Providers Scotland (CCPS) as our critical friends allowed for open, honest and meaningful conversations between partners and providers setting the scene for future collaboration. Our ongoing discussions using the feedback from the events further refined our approach and utilised good practice guides (CCPS and HIS) reflecting the principles of ethical commissioning to consider our shared approach and principles. Our engagement events identified key themes and areas to progress and opportunities for collaborative working;

- Funding and transparency on budgets
- Communication and information
- Involving providers, partners and people
- Culture change
- Processes and systems
- Staff valuing and rewarding

Additional areas where collaborative working were considered included; opportunities to shape future services as part of a redesign of services , shared learning and training opportunities , better communication and understanding of services and existing networks, and how to build on positive local community partnerships that have developed since the Covid-19 pandemic and learning from partners who were sharing resources.

New opportunities – understanding needs and the local market

East Renfrewshire has a diverse economy in social care with well-established range of care providers across the public, third and independent sectors. Building on strong foundation of partnership working and a commitment to collaborative approach to commissioning services. This is underpinned by our focus on a personal outcomes approach to enabling people to achieve and live a full life, it is about making a difference.

We will;

- Be outcomes focused with people at the centre of our commissioning approach
- Work with partners to better understand and sustain our local market
- Recognise our shared assets and opportunities within our local communities
- Address challenges e.g. recruitment and retention, cost of living , financial context
- Maximise the use of our collective resources

Future opportunities;

Our collaborative commissioning approach will work with partners and stakeholders to develop opportunities in the following areas;

- Supporting people to live independently – care at home to explore development of a care at home collaborative
- Day opportunities for adults with learning disabilities - work with partners to consider place based approach and range of services available
- Cross sector support for young people in periods of transition from school, home and independent living
- Post diagnostic support for people with a dementia diagnosis
- Supported training opportunity for people with additional support needs through Café services in Eastwood and Barrhead HCC
- Near Fatal Overdose development across local services
- Asset mapping to understand local assets and reduce duplication of service
- Collaborative approach to understand use of technology ,current and future housing needs and current allocation routes
- Explore the feasibility and scope for a cross sector Housing Forum for East Renfrewshire
- Collaboration on advice and information, providing shared language with consistent themes across directories and websites.
- Develop the market share split with external partners for care at home to meet demographic demands and achieve best value.

Financial context and Savings Recovery and Renewal

The annual report and accounts for the IJB covers the period 1st April 2022 to 31st March 2023. The budgets and outturns for the operational services (our management accounts) are reported regularly throughout the year to the IJB, with the final position summarised:

Service	Budget	Spend	Variance (Over) / Under	Variance (Over) / Under
	£ Million	£ Million	£ Million	%
Children & Families	14.741	14.281	0.460	3.12%
Older Peoples Services	25.619	24.085	1.534	5.99%
Physical / Sensory Disability	6.309	6.090	0.219	3.47%
Learning Disability – Community	17.902	18.629	(0.727)	(4.06%)
Learning Disability – Inpatients	9.559	9.591	(0.032)	(0.33%)
Augmentative and Alternative Communication	0.265	0.265	-	0.00%
Intensive Services	16.089	16.735	(0.646)	(4.02%)
Mental Health	5.729	5.392	0.337	5.88%
Addictions / Substance Misuse	1.626	1.543	0.083	5.10%
Family Health Services	28.923	28.921	0.002	0.01%
Prescribing	17.098	17.872	(0.774)	(4.53%)
Criminal Justice	0.029	(0.001)	0.030	103.45%
Finance and Resources	1.972	1.868	0.104	5.27%
Net Expenditure Health and Social Care	145.861	145.271	0.590	0.40%
Housing	0.486	0.486	-	-
Set Aside for Large Hospital Services	29.075	29.075	-	-
Total Integration Joint Board	175.422	174.832	0.590	0.40%

The most significant challenges for 2023/24 and beyond include:

- delivering a difficult range savings to ensure financial sustainability, recognising this is at odds with our historic focus on prevention
- managing the real tension between reduced service capacity as a result of savings and maintaining discharge without delay from hospital
- understanding the longer term impacts of Covid-19 on mental and physical health in the longer term
- recruitment and retention of our workforce, particularly in the current cost of living crisis
- managing prescribing demand and costs in partnership with our GPs
- supporting the physical and mental health and wellbeing of our workforce and our wider population, again further impacted by the current cost of living challenges
- meeting increased demand for universal services without funding for growth, including increased population demand and new care homes opening with the area
- we may also need to prepare for the challenges and opportunities that may arise from a national care service.

For 2023/24 the cost pressures identified in our budget are of £10.34 million is offset by available funding of £3.28 million leaving a funding gap of £7.06 million. A savings programme is identified to deliver this in full, but we recognise there may be some areas where we will not achieve a full year by 31 March 2024 and this will be supported by the remaining earmarked reserves we hold.

Our Savings, Recovery and Renewal programme will continue to be reported to the IJB on a regular basis and provides detail on progress on savings, project work and service redesign. The prioritisation of care, to support those with the greatest need is required to deliver around 50% of our savings.

The funding gap in 2023/24 is £7.06 million and presents a very significant challenge particularly when taking into account the continued recovery from Covid-19, pay, inflation and capacity challenges.

Contractual Arrangements and Procurement Plan

Scottish Government's Guide to Strategic Commissioning Plan (2015) defines commissioning as; Assessing and forecasting needs, linking investment to agreed outcomes, considering options, planning the nature, range and quality of future services and working in partnership to put these in place. The strategic commissioning cycle was developed to identify the key processes and steps and seeks to outline four key requirements to; plan, do, review and analyse. All 4 areas are interdependent, involve a range of stakeholders and are interdependent. The complexity of the processes have people at the centre where meeting outcomes is the key determinant of the commissioning approach.



The Independent Review of Adult Social Care (Feeley report 2021) set out a challenge; *“We want to see an end to this emphasis on price and competition and to see the establishment of a more collaborative, participative and ethical commissioning framework for adult social care services and supports, squarely focused on achieving better outcomes for people using these services.”*

This has been central to recent policy and legislation including the National Care Service Bill (2022) and is enshrined in the 8 principles of Ethical Commissioning (Circular SPPN7/2021). These core principles describe a new way of working which will be human rights based, person centred, reflect peoples lived experience, have fair work principles, support climate and circular economy, financial transparency and deliver high quality care.

A recent publication - Commissioning for Outcomes by Care Coalition of Care Providers (CCPS - March 2023) provides a useful definition of outcomes as ‘the difference that is made by services or supports’.

Outcomes can be seen to exist at different levels:

- ❖ Personal: the difference made in an individual’s life.
- ❖ Organisational: the difference a service or organisation makes.
- ❖ Strategic: the overall difference made to a community or population.
- ❖ National: the high-level policy outcomes that all of the above contribute to.

Evaluation Support Scotland describe how the same outcome can be understood differently at different levels :

- Individual: I want to see my friends.
- Organisational: Service users have reduced isolation.
- Commissioning: Those at risk have access to a wider range of social opportunities.
- Strategic: People are able to look after and improve their own health and wellbeing and live in good health for longer.

East Renfrewshire HSCP commission services with procurement arranged through East Renfrewshire Council and NHS Greater Glasgow and Clyde under direction by the Integration Joint Board. The value of the current procurement plan (Appendix 1) is in excess of £36m. It is anticipated that the plan and its associated value will grow due to potential new opportunities, annual increases allowed for in many contracts and new national rates agreed in relation to other contracts.

The HSCP works alongside a range of external partners to deliver health and social care services as part of the following contractual arrangements. The contractual arrangements have been revised to ensure greater choice and control for individuals, sustainability for the provider sector and ensure compliance with Scottish Government policy. The report shows spend for purchased care for the 12 months from April 2021 to March 2022.

- ❖ **Care at Home** – £4.237 million total expenditure with £4,019 million through framework providers and £0.218 million off framework.

- ❖ **Care and Support** –£14.854 million total expenditure with £14.125 million through framework providers and £0.729 million off framework.
- ❖ **Nursing and Residential Care Contracts** – the total expenditure for both nursing and residential placements was £12.372 million there are 12 care homes in the area 1 of which is in house.
- ❖ **Quick Quotes** – The value of quick quotes in the reporting period in question was zero. A quick quote value is between £10,000 and £49,999.
- ❖ **Direct Awards** – The HSCP received approval to make 6 direct awards during the reporting period in question, working through the corporate procurement unit and legal services jointly. The awards were in the area of adult services and reflect the specialist nature of the purchasing activity.
- ❖ **Grant Payments** - the HSCP issued 28 grant awards to 20 organisations totalling £2.669 million.
- ❖ **Scotland Excel frameworks**- a number of contracts have been revised with the introduction of the following frameworks;
 - a. Secure Care
 - b. Fostering & Continuing Care Services
 - c. Children’s residential care and education including short breaks
 - d. Agency Workers (Social Care)
 - e. Care and Support

Wherever reasonably practicable services are commissioned using framework providers to arrange care and support. We recognise that there needs to be choice and control for individuals, families and their carers. Exceptions can occur for a range of reasons including provider capacity, requiring recruitment processes to be taken forward; provider contract compliance and other quality of care related matters.

A number of different types of agreements exist within the procurement plan, these include:

- Framework Agreement - an agreement between one or more public bodies and one or more service providers which sets out the terms and conditions under which specific contracts can be entered into throughout the term of the agreement. The National Care Home Contract (NCHC) is a Framework Agreement used by Local Authorities to purchase places in Care Homes in Scotland. The rates paid for these services are negotiated annually between the Local Authorities and Care Home providers. Framework agreements can be both local within a local authority boundary or national agreements across a number of local authorities as in the case of Scotland Excel care and support framework.
- Grant Agreements are payments made by the Partnership to Third Sector Organisations to support their activities.
- Term Contracts are delivered following a full procurement process.

The Commissioning Team in the Partnership are responsible for the development of specifications and will work with stakeholders and HSCP operational services to develop the service specification. The Team work closely with Council Procurement and Legal Teams to ensure contracts are compliant. Contract monitoring arrangements are undertaken by the

Team alongside operational staff to ensure commissioned services are aligned to Strategic priorities Partnership.