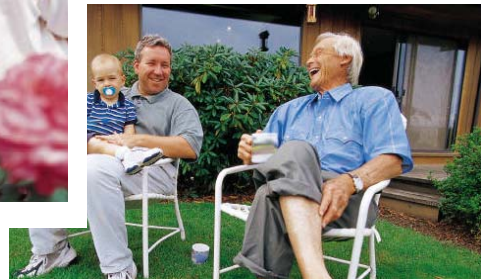




# Growing Older Making Choices



## Adult Social Care Commissioning Strategy for Older People's Services Executive Summary

March 2007

# Executive Summary

## Introduction

1. The U.K. has an ageing population, with an increasing proportion of people aged 65 and over<sup>1</sup>. This change in the population structure of our society will inevitably produce different challenges for health and social care services in the future. Over the next 20 years, the number of people with impairment and dependency will significantly increase the demand for social care, which will put pressure on available resources<sup>2</sup>.
2. The government's vision for social care and the NHS is to help older people stay as healthy, active and independent as possible, for as long as possible. Aspirations of independence, dignity and choice for older people are cross-cutting throughout government departments<sup>3</sup>. The current national policy context supports partnership working and providing services that are responsive to people's needs<sup>4</sup>.
3. The Council and its partners are committed to empowering older people to enjoy a good quality of life.
4. Extensive consultation has enabled us to listen to and incorporated the views of local people into our strategic planning activities. Our consultation activities focused on listening to older people who were seldom heard, hard to reach or from minority groups. Insights from this consultation have helped us to plan support that will be appropriate to meet the diverse needs of our whole community. Older people told us that they want to be supported to live at home for longer. This strategy looks at how we can reconfigure services to meet this aspiration and it represents our collaborative plan to develop and modernise services for older people in the next five years.
5. Commissioning is the process of deciding the type and the level of support that is required and specifying, securing and monitoring how this is met.
6. This strategy will influence support and service plans and contracts. It will be complemented by detailed purchasing plans which will specify budgets and what supports they will be used to fund, as well as details of immediate planned service investment, disinvestment and de-commissioning. Purchasing plans will be presented to the Council Executive for approval.

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<sup>1</sup> See <http://www.statistics.gov.uk/CCI/nugget.asp?ID=6>

<sup>2</sup> Wanless, D (2006) *Securing good care for older people. Taking a long-term view*. London: King's Fund

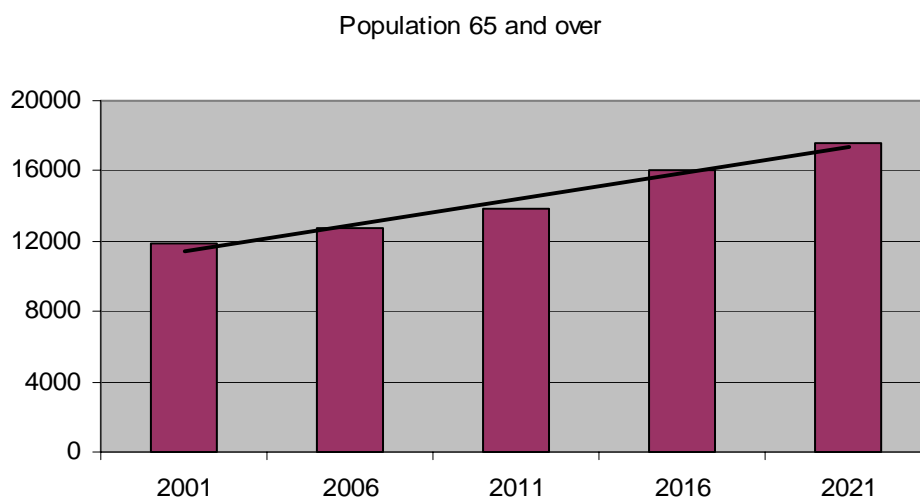
<sup>3</sup> e.g. Department of Work and Pensions (2005) *Opportunity age*. London: DWP; Department for Communities and Local Government (2006) *Strong and prosperous communities. The local government white paper*. London: TSO

<sup>4</sup> Department for Communities and Local Government (2006) *Strong and prosperous communities. The local government white paper*. London: TSO; Department of Health (2004) *Choosing health: Making healthier choices easier*. London: Department of Health

## Analysis of need in Bracknell Forest

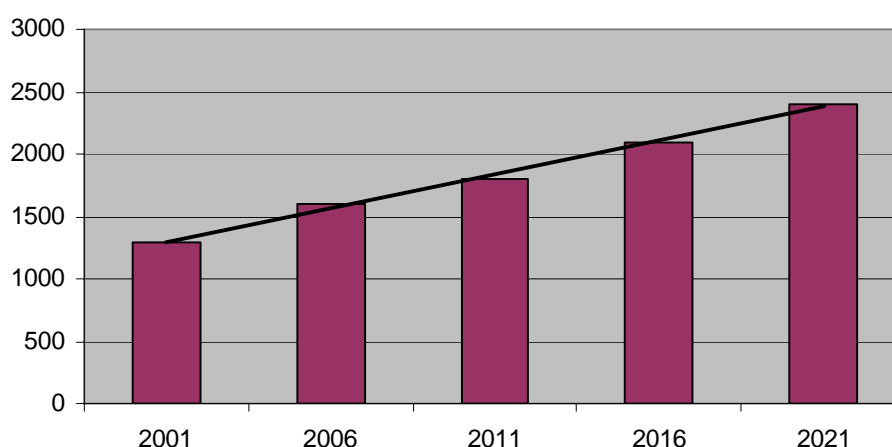
7. In 2001 there were approximately 12,000 people aged 65 and over, making up close to 12% of the borough's population<sup>5</sup>.
8. Between 2006 and 2021, the number of people over 65 years is expected to increase steadily to an estimated population of 17600 (an increase of approximately 38.5%).

### The number of people aged 65+



9. The most significant increase in the older people population is expected in the 85+ age group. It is anticipated by 2021, there will be 2400 people aged 85+ (an increase of approximately 50% from 2006).

### The number of people aged 85+



10. Not only is there a predicted increase in the number of older people, but the diversity will also increase. It is anticipated that the proportion of older people from BME communities will reach over 10% the local population by 2011.

<sup>5</sup> Office of National Statistics (2001). Census data.

11. The demographic changes in the Borough present challenges for planning to meet an increasing demand for support and meet individual needs.

## What local people told us

### Key themes

12. Extensive consultation with local older people, carers and community stakeholders provided an insight into what was important to support older people to enjoy a good quality of life. Key themes of people's views were about:
  - Retaining independence and having choice about how to best be supported.
  - The value of 'sense of community' and friendships should be supported.
  - The importance of older people being treated with respect: fairly, properly, with courtesy, efficiency and helpfully.
  - The role of carers needs to be acknowledged, valued and supported.
  - Support should be 'uncomplicated' and consider the needs of families as well as the older person. This supports a holistic approach to meeting need through a coordinated service approach.
  - The GP was considered to be an important source of advice and information. Information other than through the GP needs to be provided in a clear and concise way, possibly through a comprehensive information pack.
  - A single point of contact, or 'helpline' would be useful to provide information and signposting to a range of supports.
  - Having a green, safe and well-maintained community environment is important for health and well-being, and encourages people to get out and about.
  - Involving older people in evaluating services, by developing easy to read forms, individualised to service. The council should ask 'what could we have done better?'
  - Feedback on people's comments about services should be provided and what people say should be used to improve support in the future. Older people want to know how their views are going to be actioned and want realistic timescales for actions.
  - More one-to-one support is needed straight away, as soon as an older person has a diagnosis (e.g. such as dementia).
  - Service users to be included in discussions, having high level representation (such as on partnership or management boards).
  - Better partnership working (between voluntary, health and social care) to identify older people who may not be linked to support networks.

## Community Care services

13. The table below shows the number of local older people who received a community care service from Bracknell Forest Borough Council for periods between 1 April 2004 - 1 March 2005 and 1 April 2005 - 31 March 2006.

Year	Total		Community based services in home		LA residential care		Independent sector residential care		Nursing care	
	2004/05	2005/06	2004/05	2005/06	2004/05	2005/06	2004/05	2005/06	2004/05	2005/06
Physical & sensory disability & frailty	1034	1477	804	1241	76	76	109	108	148	168
Learning Disability	18	21	18	19	0	2	0	4	0	0
Mental Health	26	117	26	93	0	8	0	16	0	18

(Source RAP return- P1)

14. We anticipate that there will be an increase in the number of older people using social care services over the next 5 years.
15. The Council enables a range of support that is timely and respond to a variety of needs, whether through targeted support and services, those that focus on prevention and well being, or housing related support. The Council has given a strong and overarching commitment to ensure that support is accessible and appropriate to meet the diverse needs of our community, particularly for people from black and minority ethnic communities.
16. **Support for carers** includes:
- Advice and information about helpful local resources and organisations
  - Arranging short term care (respite) for the person that is being cared for
  - Putting people in touch with other carers

- Taking account of carers' needs when assessing or reviewing the needs of the person who is being cared for.

17. The Council, with partners, has developed a range of **preventative support and services** that offer options for older people. These services are available to older people who may not be eligible for Council services:

- The **Falls clinic** monitors older people who have been affected by falls. It offers falls prevention advice; assessment at home and environmental advice; provision of aids or equipment; and therapeutic programmes.
- The **Intermediate Care service** helps to prevent unnecessary hospital admissions, prevents delayed hospital discharge and offers rehabilitation and specialist stroke support.
- **Exercise classes**, in particular Tai Chi, are held in a number of venues throughout the Borough, including sheltered accommodation for older people.
- The **Look In café**, offers good value meals and snacks throughout the day Monday to Saturday in a friendly, supportive social atmosphere.
- The Age Concern **Handyman scheme** undertakes minor repairs and adaptations to older people's homes and is a key support in falls prevention.

18. **Direct Payments, Individualised budgets** and **self directed support** are modern support options for older people, which the Council encourages as a way to give people more control over their support. In lieu of social services delivering a standard service, the council gives older people control of their own budget, and they have the power to arrange their own care to meet their identified needs. We have developed ways to make these support options more simple for older people, to help them enjoy the benefits of having more choice and control about how they are supported.

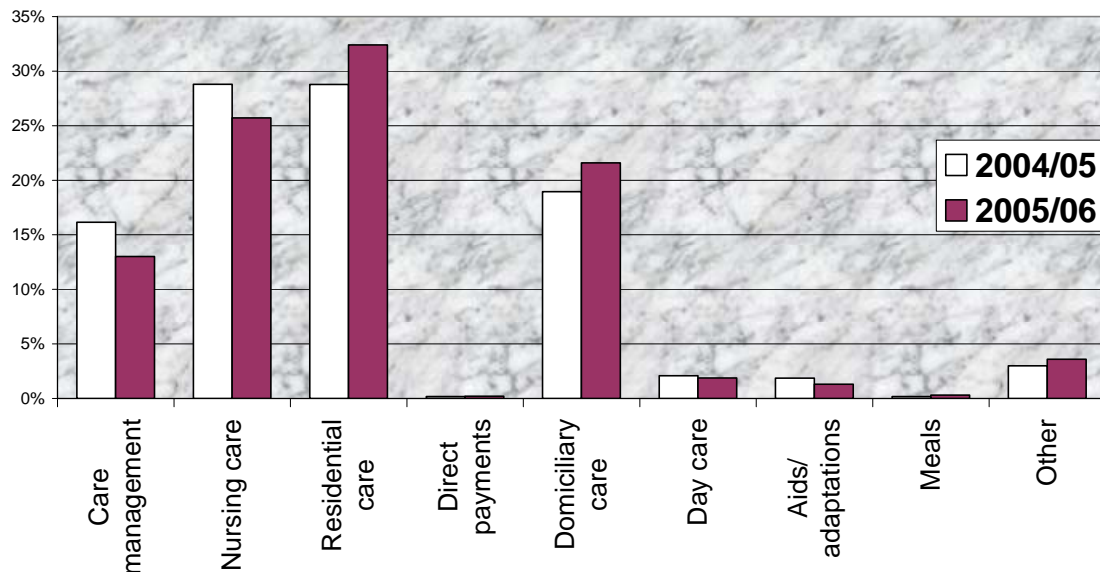
19. Demand for **Domiciliary Care** services is expected to increase in the future. In 2006, the Council arranged support for 590 households. If current policies and arrangements for service delivery were to continue, it is projected that this would increase to 710 households supported through homecare by 2011. The hours of support provided would also increase; from 5828 hours (2006) to 9500 hours each week (2011).

20. As more older people are choosing to be supported at home for longer, we project that the demand for **residential care** will remain steady; from 130 places in 2006 to 129 places in 2011. Demand for **nursing care** will increase from 126 places in 2006 to 136 places in 2011. It is expected that the type and level of residential and nursing care that will be required in the future will be more complex, as we care for more older people with dementia and complex needs. Over the next five years we will be shifting the emphasis from commissioning residential and nursing care to home based support and preventative work to enable people to live at home for longer.

21. A range of **Day Care** options are available in the borough. As more flexible models of support for older people are developing (such as direct payments and individualised budgets), day care options will need to be flexible, and offer older people more choice to meet their changing needs.
22. **Housing** and **Housing Related Support** options are available to help older people to live as independently as possible. In 2006, the Council provided 383 units of **sheltered accommodation** and three **extra-care schemes**. In the same year, Housing Association schemes provided 286 units of sheltered housing support in the borough. Some housing related support is also provided by private organisations.
23. We will undertake a review of the housing needs of older people and develop a strategy to address changing support needs of older people in the borough.

## Financial outlook

**Proportion of Gross Expenditure on Older People by Social Services on Different Services 2004/05 to 2005/06**



24. Social Services total gross expenditure on services for older people in 2004/05 was £12.9m; this rose by 6.5% in 2005/06 to £13.8m.

## Achieving our strategy goals

25. We have based our strategy on the four overarching goals from the white paper, *Our health, our care, our say*<sup>6</sup>. This will help us to respond to the forecast increases in demand, the wish of older people to remain at home and the increasing expectations for more choice and control. Goals and corresponding objectives of our strategy are:
26. **Goal 1. Better prevention and early intervention for improved health, independence and well-being**
- Provide services that emphasise the focus on prevention and helping people to avoid crises by enabling access at an earlier stage.
  - Provide comprehensive information that is easy to find, so that older people know what services and support are available in Bracknell Forest, and how they can use them to maintain or improve their quality of life.
  - Improve the way we work with other services and community groups to deliver services to older people, which are joined up and co-ordinated to respond to all aspects of people's needs.
27. **Goal 2. More choice and a stronger local voice for individuals and communities**
- Improve access and take-up of the Direct Payments Scheme, individualised budgets and self-directed support, as flexible and simple ways for older people to access support and care services.
  - Make sure suitable housing is available for older people and that a range of different accommodation and support options are available.
  - Help older people to take part in social activities and have a sense of well-being.
  - Give people a say in how services are delivered and made better through ongoing feedback from older people and their carers that use these services. We will have a range of ways to hear people's views. What people say will help us to improve the quality of services in Bracknell Forest.

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<sup>6</sup> Department of Health (2006). *Our health, our care, our say: A new direction for community care services*.

## 28. Goal 3. Tackling inequalities and improving access to services

- Make sure that older people can use the same facilities and services in the community, as everyone else can, to help them to have a good quality of life.
- Meet the cultural needs and expectations of older people, particularly those from Black and Minority Ethnic groups.
- Make it easier for people with multiple needs to receive service that meet all of their needs. This will include people with learning disabilities, mental health problems and dementia.

## 29. Goal 4. More support for people with long-term needs

- Adapt care services to respond to the changing needs of older people entering these services, such as the growing number of people aged over 85, people with complex needs and dementia.
- Make the most of the progress that has been made in assistive technology, to make it easier and safer for older people to keep their independence and stay at their home for longer.
- Develop the social care **workforce** to make sure that it can respond to the changing needs of older people in Bracknell Forest.

## Next Steps

30. This commissioning strategy and action plan details our commitment to improving services for older people, and offers a long-term, wide ranging overview of commissioning intentions. This strategy will influence support and service plans and contracts. It will be complemented by detailed purchasing plans which will specify budgets and what supports they will be used to fund, as well as details of immediate planned service investment, disinvestment and de-commissioning.
31. These plans will need to take account of the likelihood of the Council facing significant restrictions on financial resources over the next few years. They will recognise that the council needs to deliver efficiency through improved procurement and commissioning of services.
32. During the period of this strategy, we will investigate opportunities for joint commissioning arrangements with our partners, for more of our services for older people. By commissioning services together we can make the most of available resources and have a greater impact on improving the lives of older people in Bracknell Forest.