

Adult Social Care Commissioning Strategy 2023 – 2033



WARRINGTON
Borough Council

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Section 1

Setting the scene

In Warrington, our aim is to put the views, experiences and ambitions of people who use services, their families, and unpaid carers, at the heart of our commissioning plans.

It is critical to us that people's views and experiences are heard and taken into account. People that use services have already taken a central role informing this strategy and will continue to do so as it develops over the next few years.

Our challenge is set out how we respond to the expectations and hopes that people have, both now and in the future.

Adult social care in Warrington aims to deliver the right care, at the right time, in the right place. The only way we can do this is by listening to people and understanding where our services work well and where we need to improve.

This is why our strategy begins with the views and aspirations of the people who we support. We will continue the conversation with people and our partners to embed consultation, co-design and co-production in everything that we do.

What people say about social care in Warrington

"They have listened to the problems I have encountered and given support face to face before the COVID-19 pandemic and over the phone during the pandemic, with ideas to help keep me sane through this journey."

"I want to be involved with and contribute to my community."

"Increased respite has improved my own quality of life. I've been able to spend some time on my own interests and also have a break away!"

"I want support to make and keep in touch with friends and to enjoy a social life."

"I've been helped a lot, but the rest of the system is scrambled. I was passed backwards and forwards."

"I get support that is person-centred, that is all about me and what I want, and in a way that works best for me."

"As a carer I would like to feel more valued and appreciated."

"I need support to feel safe when I'm in my home and when out and about in the community."

"I want to be involved in decisions about me and my care and support."

"I want to choose who supports me – my support workers know me, and I know them."

"I want to get support to get involved in education and learn new skills."

A joint foreword

This strategy is an important document because it sets out our long term ambition for Adult Social Care in Warrington. Our starting point is what matters and what works for people, and the strategy is deliberate in recognising the primary importance of people having more choice and control in their lives.

It commits us to working with others and to re-think the way that social care supports people to live a fulfilling life. The plan is purposefully long term because the level of change and joint working required to deliver the change in approaches and culture will take time. The strategy also reflects the changes we are starting to see in terms of needs and what people are telling us they want from care and support services to help them to remain independent. For example, there is a lot in the strategy about support for informal carers and the benefits of technology.



Cllr Paul Warburton,
Cabinet member for statutory health and adult social care

Our objectives are to ensure people can access care and support in the right place and at the right time. For most of us, most of the time, that means support that enables us to live in our own homes and communities wherever possible. We will be re-shaping services and markets to deliver an increased proportion of care to support people at home and in their local community.

While this is a council strategy, we recognise that no single organisation can deliver our ambition alone. There are many partnerships, joint plans and activities that link with this strategy, and we will be working in more integrated ways with our partners at place. The Integrated Care Board, NHS, independent and voluntary providers, and colleagues across the system are central to bringing these ambitions to life.

There will be regular updates and reports covering our progress against the commitments and plans, and we look forward to seeing the changes and difference it makes to people's lives.



Catherine Jones,
Director of adult social care

Vision

Warrington Borough Council's vision is to ensure our residents live healthy, happy and independent lives.

Warrington Together's vision is to ensure Warrington is a place where we work together to create stronger neighbourhoods, healthier people and greater equality across our communities.

Our vision for adult social care in Warrington is to ensure we work together with people to support them to live well. We want to encourage and enable people, their families and carers to stay well and live independently for as long as possible.

When support is needed, our aim will be to identify approaches that build upon strengths so that people can take control, arrange, and influence their own support and or care.

To deliver the best outcomes and value for investment, we will work closely with all partners and are committed to a more integrated and place-based approach to commissioning.

Overview

Commissioning services

We spend £81million on commissioned services. We commission a range of services to support people in their own homes, as well as accommodation with care and support, and technology that helps people to stay independent. During 2020/21, 1,756 people over the age of 65 received short term support, and a further 3,363 were supported by long term provision.

Warrington's thriving charitable and voluntary sector

Voluntary organisations, including those offering information, advice and guidance, support hundreds of people in Warrington each year. There are over 1,000 registered local charitable and voluntary sector organisations in Warrington, many of them small and informal, supporting people to access leisure, education, and community life.

Co-production and co-design

We recognise that people with lived experience are the best people to work with to design services that affect them. We will continue to develop our model of peer led support, consultation and co-production, to maximise their feedback and input.

Commissioning in partnership

We will prioritise working with other organisations to deliver better and more integrated services that meet people's needs and help them to stay independent.

Our key aim

The key aim for this strategy is to work in partnership to co-design innovative, and place-based opportunities and services. We will promote strengths and support people to live independent lives in homes that they choose that meet their needs and aspirations.

Our challenges

An ageing population, budget constraints, workforce issues, and access to local, quality housing, and people staying in hospital longer than required are the main challenges facing social care in Warrington.

Local needs and population change

Warrington's over 65 population is due to increase – projections indicate a 21% increase in people aged 65 and over from 2018 to 2028, and 44% in 25 years, from 2018 – 2043. This is an increase of just over 17,000 people.

Increasing and changing support needs

Over 48% of people who use our services have a primary support need of physical support, 21% require mental health or memory and cognition support, and 18% have a primary support reason of learning disability

An estimated 2,500 people aged 65 and over in Warrington are living with dementia, and this is set to increase.



Introduction

Adult social care is changing. Councils across the country need to change and adapt in order to meet increasing levels of demand, with unprecedented budget constraints, population growth and significant difficulties recruiting care and support staff.

Projected demand in Warrington, along with understandable rises in expectation for sufficient, high quality, and person-centred services that offer choice and control to individuals, shows us that this challenge will continue to grow. These long-term challenges require a long-term vision, which is why this plan is focused on the next 10 years. A lot can change over five to 10 years, so we expect to review and update this strategy on a regular basis.

The COVID-19 pandemic tested people and systems and it pushed our services and finances to their limits. During this time, communities in Warrington showed how resilient, supportive and self-sufficient they can be, while our care workers remained dedicated throughout, continuing to support residents with compassion and professionalism.

The local voluntary, charitable and independent sectors are innovative and adaptable, and have shown their ability to respond quickly to a changing landscape, ensuring that people are safe and offered the care and support that they need. This strategy aims to build on these strengths, working with our partners, to ensure that our systems are sustainable and effective. To offer choice and meet the needs of our residents, both now and in the future, considerable change is required.

There are both opportunities and challenges in the coming years. This strategy aims to reflect both the statutory duties for the council, and our local 'place' and 'system' strategies, plans and aspirations,

particularly those that will progress the alignment and integration of services and joint investment to improve health, wellbeing and choice.

Together, we aim to develop communities where people live and age well, where everybody feels connected, plays an active role, and has a good quality of life. This means access to safe and affordable housing, jobs for working age people, a focus on the wellbeing for everyone at all stages of life, and good local health and care services that promote people's strengths and utilise their assets.

Adult social care in Warrington

Social care provides care and support to help adults of all ages with physical or learning disabilities, mental illness, substance misuse, or frailty. The council is responsible under the Care Act for assessing, understanding and meeting need, commonly through council services, commissioned/contracted provision and/or supporting family carers and friends who provide informal care. It is also responsible for local 'market shaping' to encourage quality, choice and sufficient, appropriate provision, as well as local contingency planning in case of provider or market failure.

In Warrington, we are committed to working with communities and people with lived experience, testing new approaches to wellbeing, prevention and care. A central theme is helping people to live and age well in their own home, supported in different ways, for example through paid and unpaid carers, technology, and community services.

Our adult social care commissioning strategy intends that:

- People are supported to live well and remain independent
- People have more choice and control over their day to day lives, including their care and support
- People are helped to recover their independence quickly, for example after a fall or illness

Section 2

Adult social care in context

How are we doing, and what are our challenges?

The national picture

A key focus for national change is to transfer control to people and put them at the forefront of decisions around their care, moving towards person-centred care and strengths-based practice.

This national drive to prevent, reduce and delay needs, to learn from each other, and to build an evidence base of what works, recognises that communities have strengths and resources that are part of the commissioning landscape.

Two key government documents lay out expectations for the health and social care for the next five to 10 years, and our plan mirrors this long-term approach.

People at the heart of care

Published in December 2021, the government set out its plan/ commitments for the reform of adult social care over the next five to 10 years. The White Paper proposes change and development across both services, and notably a considerable shift in the way, and how much people will pay for care.

While the detailed plans, expectations and potential funding associated with the reforms are still emerging, the overall vision is one that proposes to:

- Offer people choice and control over the care they receive
- Promote independence and enable people to live well as part of a community

- Properly value our exemplary and committed social care workforce, enabling them to deliver the outstanding quality care that they want to provide
- Recognise unpaid carers for their contribution and treat them fairly

Highlights

- 'Innovative models of care programme' to support local systems to build the culture and capability to embed into mainstream innovative models of care
- National funding for a new service to make minor repairs and changes in peoples' homes, to help them remain independent and safe
- A new obligation for Integrated Care Boards (ICBs) and NHS England to involve carers when commissioning care for the person they care for
- A knowledge and skills framework (KSF), career pathways, and linked investment in learning and development to support progression for care workers and registered managers
- A commitment to support councils, including specific support to strengthen their market shaping and commissioning capabilities
- A long-term plan to address care worker pay and a move towards greater parity with the NHS for comparable roles

Joining up care for people, places and populations

Published In February 2022, the government focused specifically on the impetus for more integration in the planning, commissioning and delivery of co-ordinated, joined up and seamless health and social care services – right care, in the right place, at the right time.

The main themes include:

- Shared outcomes which prioritise people and place
- Developing effective leadership and accountability
- Financial framework and incentives
- Digital and data – maximising transparency and personal choice
- Delivering integration through workforce and carers

Highlights

- Measures for reshaping services within ‘place’ with pooled and aligned resources to achieve the plan
- Shared outcomes will be developed by all partners and with communities, including people with lived experience
- Local leaders will have the flexibility to use joint resources to meet the particular health needs of their population
- The introduction of an integrated skills passport to enable health and care staff to transfer their skills and knowledge between the NHS, public health, and social care
- Cross-sector training and learning, joint roles for adult social care and health staff in both regulated and unregulated positions
- Empowering people to have greater control with increased use of digital health apps, and all residents, professionals, and carers to have a single health and care record by 2024

National policy and change impacts directly on local commissioning, communities and people. The need for councils to adapt and explore new ways to deliver short and long term social care and improve access to the right support has never been greater.

The COVID-19 pandemic and the current cost of living crisis is affecting people all over the country. Services and communities must remain flexible and innovative so that they can react as and when they need to.

Councils in England spend around £16.5 billion on social care each year and demand and costs continue to rise. The number of adults aged 18 to 64 requiring care is forecast to increase by 29% in 2038, compared with 2018. For people aged 65 and over, this is higher at an increase of 57%.

The cost of care is also increasing, with a projected 90% increase in costs of care for adults aged 18 to 64 by 2038, compared with 2018, and a 106% increase for people aged 65 and over

The Health and Social Care Act 2022

This act is the legislative part of a wide range of policy reforms, introduced by the government. It aims to transform health, care and wellbeing, particularly improving health and care services through better health and care integration, and tackling growing health inequalities.

Integrated care systems (ICS) were introduced on 1 July 2022 and aim to enhance local and regional partnership working. Key intentions are to tailor care and support to the needs of local communities and to address the sustainability of combined services, while improving outcomes for people.

Along with ‘Joining up care for people, places and populations’ and ‘People at the heart of care’, publications to support the act include the White Paper for ‘Levelling up the United Kingdom’, and the government’s report ‘Build Back Better: Our plan for health and social care’.

The government also proposes changes to the Mental Health Act in 2022, setting out new duties for commissioners. These include:

- A duty to ensure an adequate supply of community services for people with a learning disability and/or autism
- A duty on commissioners that every area should understand and monitor the risk of crisis at an individual level, for people with a learning disability and autistic people in the local population, through the creation of a local 'at risk' or 'support' register
- A proposal to strengthen people's legal rights to an advocate, legislating for people to automatically get support from an advocate when they are admitted to hospital, including for voluntary patients



The local picture - 2023

Warrington is a large unitary authority in Cheshire. The town is known for its thriving economy and has a population of more than 200,000 people. The borough is a blend of rural villages and new town developments, with areas of prosperity in the affluent outer suburbs, and high levels of deprivation prevalent in the inner wards.

Warrington's population has continuously risen over the years with the development of Warrington town, bringing cultural diversity and vibrancy, and economic growth through new, often global, businesses and this is expected to continue.

However, as our population ages, the health and care system faces significant pressure, as we prepare to support higher levels of frail older people and rising instances of dementia and long-term conditions, with a diminishing workforce.

Our priorities

Values and objectives are built on a 'clean, green, vibrant town', 'safe and strong' communities, a 'thriving economy' and 'healthy and happy' residents. One of these key priorities is to ensure that 'Our residents live healthy, happy and independent lives'.

This priority reflects our aim, within adult social care, to work with communities to find new approaches to enhance wellbeing, develop prevention activities, and improve social care, so that we can help people to live well for as long as possible, in their own home.

Our continued commitment to work effectively with our partners will help us to use joint resources more effectively, explore how technology enabled support can help to achieve outcomes, and develop joint approaches to retain the health and social care workforce.

Our people

People are our town's greatest asset, and we will continue to build on the community activity that thrived in Warrington during the COVID-19 pandemic, encouraging our residents to help each other to live well and to reduce the need for care.

As well as informal and unpaid care, thousands of people in Warrington are provided with health and social care support by around 5,700 committed, paid professionals. High quality care is dependent on a sufficient, confident and skilled workforce with the right values, providing care in the right place at the right time. A number of factors, such as pay, managing risk, career progression, and perceptions of the care industry, have led to recruitment and retention being a major challenge. Across the sector in Warrington, staff numbers have not kept up with demand for care and support, which continues to rise, particularly in people's own homes.

Social care staff are a vital part of our national and local economy, but workforce presents the biggest single challenge facing our sector. For example, in our care at home workforce, we experienced a near 30% turnover of staff in 2021/22. Not all turnover results in workers leaving the sector, over half (54%) of starters were recruited from within the adult social care sector, and although employers need to recruit to these posts, the sector at least retains their skills and experience. However, the cost of living crisis and the increase in travel costs has seen staff move from roles where they visit people at home to more accommodation based roles, like care homes.

Our location, at the centre of the North West's transport and communications networks, has been a key factor in Warrington's economic strength. Warrington is a major location for business start-ups and established major employers. This is great news for the town, however, the care sector finds itself in direct competition with commercial and attractive alternatives. This means that we need to work much harder to recruit and retain our staff.

People projections

- The number of people under 65 is estimated to decrease by approximately 8,400 from 2018 to 2043
- Warrington currently has a high proportion of middle-aged people aged 45 to 59 who will turn 65 between 2026 and 2041
- Projection from 2018 to 2043 is a 98% increase in 85 to 89 year olds and a 138% increase in those aged 90 and over

The local picture – what is happening now in 2023

Warrington has a range of good quality small, local and larger national care providers and organisations operating in the town, offering care and support, and advice and guidance services to meet the needs of our local population. We spend around £81million per year on adult social care.

However, looking forward, we do need to commission differently. Along with more provision of affordable and accessible housing, we need a wider variety of care and support options, so that there is sufficient supply and more choice for our residents, as well as easy access to other community help.

We have statutory responsibilities regarding 'market shaping' and ensuring there is sufficiency. There are a series of plans and documents that cover how this is done in detail, reflecting local need and what is required to grow our providers. This is the key point of reference, and sets the agenda for the wider provider market.

Support for unpaid carers has increased significantly over recent years. Between 2021 and 2022 there has been an increase of over 96% in the number of carers in receipt of a direct payments – from 189 to 372 people).

However, we need to do more if we are to meet our aim to support people at home and to avoid long-term care. The Warrington Carers Strategy (2021 – 2024) sets out how we respond, alongside our partners, to carers. It has been produced in close collaboration with carers of all ages to ensure that their voice is heard and that their priorities become our priorities.

Thousands of Warrington residents are supported through voluntary and charitable sector organisations each year. This includes information and guidance, equipment provision, and frontline community support.

There are over 1,000 registered voluntary sector organisations in Warrington, offering support, and information and advice services. These range from over 800 'micro' organisations, which are often volunteer led, over 100 'small', 80 'medium' and just seven 'large' organisations are in operation. This tells us that Warrington has a thriving voluntary care sector, and one that understands the needs and aspirations of our local people and places.

In Warrington, we support around 550 adults to manage their own care and support through direct payments. Direct payments also pay for equipment and activities that promote independence. We will continue to work with our partners to increase the number of people accessing these payments.

Working age people

In Warrington, 117 people aged between 18 and 65 access day services, but the majority of people of all ages are supported to live independent lives at home during the day. However, we need a wider range of activity and employment opportunities and support. We want to ensure people can access and make the most of their local area to develop interests and hobbies and their own personal strengths.

Through our joint mental health strategy, and working with primary and secondary care services, we are developing ways in which people with serious mental illness have their physical healthcare needs met locally.

The number of people accessing work and training is low and we offer support through the use of individual placement support workers, linking in with local employment services.

A joint venture alongside Warrington Disability Partnership, resulted in Warrington's first smart flat at the Centre for Independent Living. By applying new technology to an adult social care setting, new opportunities are being developed to support people, increase wellbeing, improving independence, and achieve personal outcomes.

The number of people aged 65 and over who have a moderate or severe learning disability, and likely to be in receipt of services, is set to increase by 25% by 2041.

Supported living

Services enable individuals with disabilities to live independently, with appropriate support to help them manage a tenancy or a home that they own, and to achieve greater freedom. This is an area of high performance for Warrington and we support 413 people in this way.

This accommodation based support gives people more choice and control over their day to day lives and more opportunities for the future and we plan to do more to build on this.

Currently, 96 people live in care settings away from Warrington, and each person receives a regular review to ensure that it remains their choice and is the right place for them to live. We recognise that it is often better for an individual to live as close to their family, local connections and community as possible, so we will continue to consider this through our strategic planning, particularly for those preparing for adulthood.

Older people

Residential and nursing care accounts for £26million of our overall spend. 'Home first' is our principle aim, but when residential care is necessary, we aim to ensure that it is of high quality.

In Warrington, we currently commission 30 residential homes for older people, of which 20 provide dementia care, 14 offer nursing care, of which 11 offer nursing dementia care, with two providing 'dementia plus', and one home supporting people with acquired brain injury. Our evidence suggests that we need less residential care for people who could remain at home and more nursing care for those with a higher level of need.

Older people's day services support just over 70 people with day care and activities. However, as a percentage of the total population aged 65 and over, this is just 0.16%. In Warrington, we want people to enjoy their local communities and for everybody to have the access to all available resources for as long as possible. To do this, we will need to find new ways to engage and then support people to achieve their individual aspirations and maintain independence, whatever their age.

Home care is commissioned for almost 1,000 people, with over 10,500 hours of support commissioned per week, a 15% increase since 2019, but it is still not enough. We often have around 80 people awaiting packages of care at home. Delays in new care packaged brings pressure to our hospitals, other services and unpaid carers. We need to increase the amount of support that we can offer, however, we must also look at more ways to enable people at home, so that the use of long-term care is minimised.

Around 30% of people living in Warrington buy their own support and access community resources independently of the council. It is still our responsibility to ensure that there is affordable, sufficient, good quality provision available, so that people have choice and control over their care for as long as possible. This 'market shaping' is vital if we are to provide the right support at the right time to everybody who requires it.

There has been over a 46% increase between 2020/21 and 2021/22 in the number of cases of people aged 65 and over in receipt of short term support (e.g. intermediate care support). We have seen a 7% increase between 2020/21 and 2021/22 in the number of people accessing long-term support for over 12 months.

A wide range of accommodation, short term practical and outreach support is provided for over 1,700 people each year to prevent, reduce, or delay the need for longer-term social care services. However, we know that some people would benefit from having this type of early intervention support in the long-term too, so that they can stay at home for longer.

Reablement and enabling services continue to grow in Warrington. We successfully support people who return home from hospital, or require support to prevent a hospital admission, or a move to a care home. Equipment and technology enabled support is growing in use, such as 'Telecare' or 'bed and door sensors' – this helps people to stay independent for longer. We recognise that there is a need for expansion and more joined up approaches to optimise the potential of innovations in technology and support.

Our primary challenges

The health and social care system in Warrington is facing a number of challenges that cut across services and communities. Our statutory duties to provide care and support are now almost entirely discharged through contracting with external, independent providers, so it is vital that we manage our relationships and support our 'market' to adjust and respond. Our main challenges need to be addressed in the short, medium and long term.

We continue to aim high, and if we are to meet the challenges that we face in the coming years, we need to make some big commitments.

Quality

Quality is always at the top of our agenda. We want all services to be safe, of excellent quality, and effective at meeting personal outcomes. By re-shaping delivery, harnessing new technology, and driving down variations in quality and safety of care, we can meet the changing needs of people who use services, reduce unintended harm or neglect, and increase positive outcomes.

Choice

Choice of care and support, whether that be provider, place, time, or type, is a reasonable expectation. People, including carers, require choice and control over the services that they use, and the home that they live in, the right to access and receive information to inform choice. This is directly linked to market capacity and the cost of care. We have made real improvements in care and support choices for people with learning disabilities and mental health needs, but if people are to maximise their independence and live full lives, we need to ensure better community and affordable supported living options.

Workforce

Workforce is the biggest issue that the health and social care sector faces, and in Warrington, our predicted reducing working age population makes this a clear challenge for the next decade.

Many people receive the care and support they need from unpaid care – from family, friends, or neighbours. Care workers have been in more demand and employers have found it increasingly difficult to recruit and retain staff.

Demand

Demand, due to our ageing population, is a major challenge now and for the future. With the example of a projected 138% increase in the population of people aged 90 and over, the volume of people requiring support is highly likely to increase significantly. Services that people require are also becoming more complex, with predictions showing an increase in instances of dementia and mobility support needs.

Financial

Financial challenges and significant unfunded cost pressures for all councils and social care providers remain. In Warrington, our strategy commits adult social care to investment in approaches that will prevent, reduce, and/or delay needs for care.

Adult social care in Warrington accounts for 49% of the council's net budget, and we currently spend approximately £81 million on commissioned services. There is an expectation that we will deliver a balanced budget each year, and over forthcoming years, adult social care will continue to play a significant role in supporting the council to meet the requirement of its medium-term financial plan. This strategy forms an integral part of setting our service priorities to manage demand, against a backdrop of uncertainty in respect of long-term funding solutions for the sector.

Market capacity

Market capacity does not meet our demand. Since March 2020, there has been a 9% increase in requests for support – from 8,803 to 9,631 people. There has also been a 46% increase in the number of people aged 65 and over in receipt of short-term support (e.g. intermediate care support).

Further to this, the length of stay in hospital is often longer than needed due to the capacity challenge. Longer stays in hospital lead to poorer outcomes for people and we want to address this.

Finance and cost pressures

The council spends 49% of its annual budget on services for adults and older people. With an ageing population and social care finance reforms there are unprecedented, there are challenges in ensuring sufficiency of care, while balancing future years' budgets within the financial resources available.

Purchasing longer-term care

In 2021-22, the gross cost of purchasing long-term care for the council was £84million. The proportions of spend are summarised in the charts below. Both charts illustrate the high proportion of spend on 24 hour nursing and residential care.

For the under 65 age group, there is also a large spend on supported accommodation services, mainly for individuals with learning disabilities/mental health needs. Through this commissioning strategy, we aim to increase the proportion of spend to support people to live safely at home independently, and reduce spending on residential and nursing care across all age groups.

Direct payments are also an area to highlight as a specific aim to increase the take up and spend in this area. This will help to support increased choice and flexibility across all ages for individuals and carers.

Investing in short-term support to promote and maintain independence

Adult social care provide a range of services to support people on a short-term basis – they are often focussed on recovery. For example, a significant area of investment is short-term reablement services after a stay in hospital, costing around £8million per year through both reablement at home and temporary stays in specialist intermediate care beds. Further support is also provided through respite/short breaks, and also mental health outreach services.

Wider preventative services

In addition to purchasing direct care for individuals, adult social care also invests in a range of preventative services with the voluntary and community sector to support the wider duties under the Care Act. This includes services connected to homelessness, domestic violence, carers support, information, advice and guidance, dementia support, advocacy, home adaptations, etc. These services play a key role in the delivery of our priorities.

The local picture – partnerships and commissioning

Partnership working

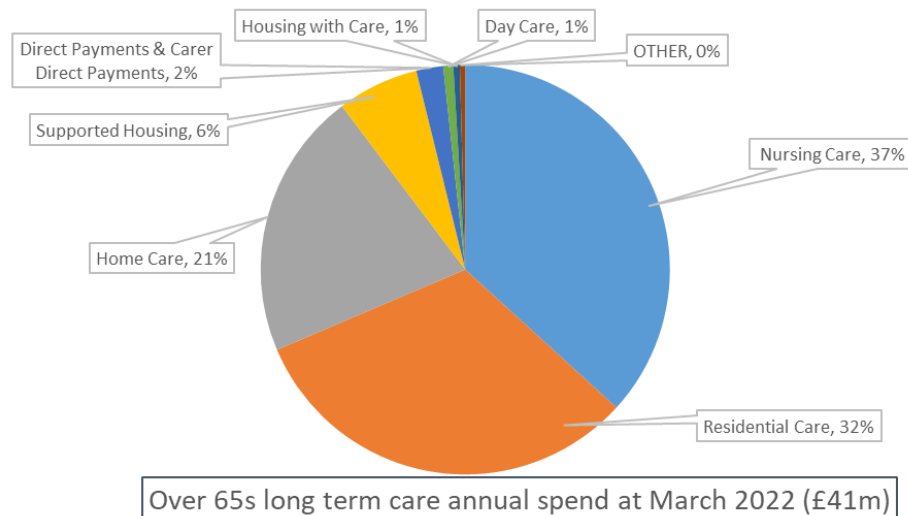
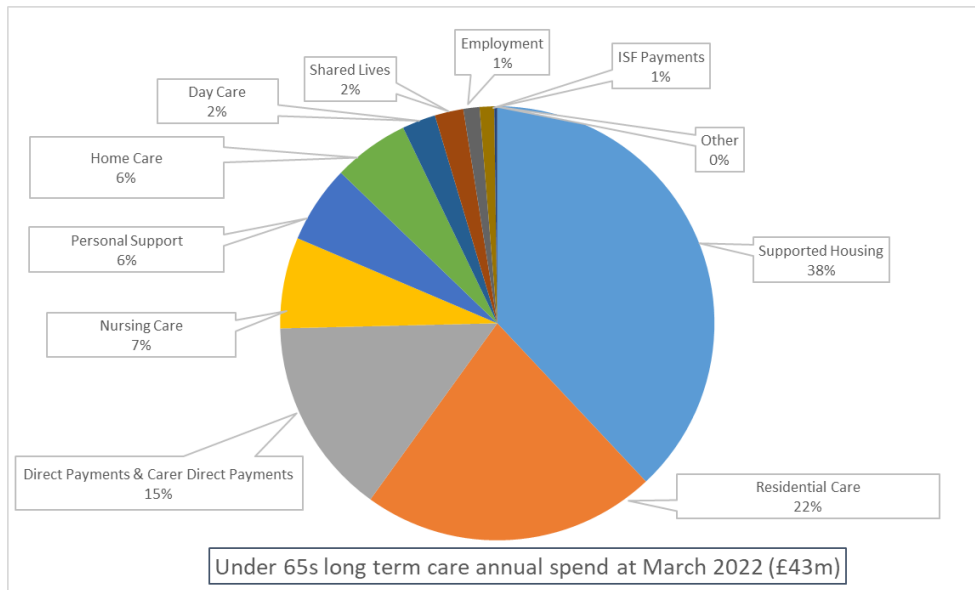
Partnership working is a big part of how we achieve success. Adult social care cannot operate alone, especially through a mixture of national and regionally led changes associated with the development of the Integrated Care System (ICS), alongside our own local plans. We are in a phase of significant change and transformation.

The Warrington Together Partnership Board (WTPB) will grow further and be the primary local forum for our shared vision, strategy, and joint or aligned investments. It is early stages for WTPB, but this will accelerated during 2022-24 as the agreements and governance guided by the place and lead are established.

Adult social care in Warrington has a positive history of collaborating with local partners, and combining resources to support local people with their health and care needs, through our health and wellbeing board, the ICS and our place based approach. Although the task over the next decade is substantial, we will work with partners across the sector with the aim to approach national and local challenges positively and creatively.

Health partners said

“Warrington has a good reputation for partnership working but we aspire to make it great. The sum of the parts is far greater than those of the individual parts. Let’s hope the opportunities the ICS presents can be capitalised on to deliver our ambitions.”



Partnership voices

There is also a vibrant voluntary and charitable sector in Warrington, and with the right support and conditions there is immense scope for them to play a wider role in both the delivery of services and the development of services.

Voluntary care partners said

"We would like more interaction with our council colleagues – we can help to solve issues."

"New solutions don't always need to be about funding, but adapting to need and doing things differently."

"We need to learn from and continue such innovative practice such as 'Safe and Well' during the pandemic', it's time to be brave, to take risks, and to do things differently."

"One of Warrington's greatest assets is its diverse and vibrant voluntary care sector. We have long known that the sector has the ability to innovate, to scale and pivot services on a limited budget, and galvanise community assets."

Independent providers said

"I believe a lot of what happens is due to personalities and a mutual respect on both sides. Commissioners need to be interested in the views of providers, rather than paying lip service and I think the Warrington commissioners do this."

"We need to have a more cohesive medium and long-term strategy to ensure social care is seen as a positive career choice."

"We plan to find new ways to partner and innovate with independent care providers, as we want to develop a more creative, varied and responsive market. The development of community alternatives to care will require that we work with all sectors to grow new responses where there is the most need."



Section 3

Commissioning our future approach

Person centred, strengths based and outcomes focused commissioning

Adult social care commissioning is changing and we are committed to delivering significant improvements and changes to the way that we commission. We need to work with all partners in Warrington to focus on the creation of supportive and connected local communities, targeted interventions, and integrated care pathways, that make the most of strengths and skills, and a vibrant care and support market to deliver clearer routes to support when needed.

Radical action is required to manage rising demand and to create market capacity. Due to our growing commitment and support for people to stay at home for as long as possible, our use of residential care has reduced and is expected to fall further. Increased 'extra care' provision, reablement support, day services, respite, and care at home has already helped shift the proportion of people living in residential care homes. However, the rise in the number of people with dementia means we will still need different, additional long and short-term options to provide care and support for them.

To ensure that we have sufficient affordable and available services, we need to work with our partners, independent sector, and communities, to design innovative alternatives to traditional care. We already support more people with care at home than we ever have, but the number of people awaiting care continues to rise because there are significant workforce shortages. Population changes and a refocus on support in people's own homes means that more needs to be done to help people stay at home safely – it is vital that we find alternative approaches.

Commissioning approach

Our commissioning approach reflects the council's direction of travel for more joined up and supportive places, led by the people who live in them. We will improve by:

- Giving more support and consideration to growing local voluntary and community sector organisations
- Keeping workforce development and retention as a priority feature for all contracting and service development
- Presenting clear sector by sector forward plans of requirements for the market to use to inform their activities in Warrington
- Aligning all contracted services with the agreed 'place' pathways of care and support
- Further developing our provider forums and prioritising engagement with the market

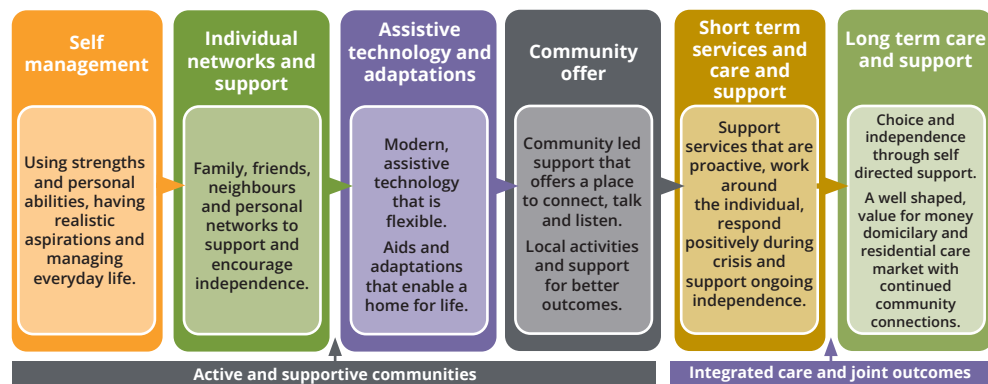
Commissioning principles

Our commissioning principles are person-centred and continuous improvement and learning. We will:

- Develop more intelligence led commissioning using long-term data and analysis
- Take a collaborative approach to design and problem solving
- Join and align our priorities and investments with our partners
- Lead and encourage innovation to develop new services, including enabling risk sharing
- Trust and support our providers and partners through long-term commitments in our contracting, with open and transparent processes that build confident partnerships
- All decisions will consider the impact on outcomes for people and organisations, and value for money

Adult social care journey

We aim for each individual adult social care journey to begin with a conversation about active lives, strengths and skills, and we will continue to build our social care market to encourage and support this aim.



The benefits for adult social care and for communities will be:

- People who feel happy and satisfied with the community offer that they receive
- A social care workforce that is strengths based and working to the same aims
- Staff teams that are happy, productive, and feel supported
- A financially sustainable care and support system
- A care and support market that is stable, solution focused, flexible, and good value for money

With the right networks and targeted, timely support, people will:

- Feel supported as individuals
- Be supported to make good choices for healthy and active lives
- Find new ways to achieve their goals
- Feel more independent and connected to their communities

We have listened to providers, voluntary and community sector organisations, and other partners, and they are keen to be involved as we address the demand and capacity issues that we face, now and in the coming years.

We aim to support the adult social care market to be innovative through the development of a collaborative commissioning model, aligning to the Warrington Together strategic objectives, ensuring an adequate supply of future care, support, and opportunities.



Commissioners will continue to work directly with front-line staff and people who use services, including unpaid carers, to establish where there may be gaps, issues, or ideas. We will look to work with partners across the sector to develop solutions and generate ideas to improve services, best practice, and ways to deliver positive outcomes.

Co-production and co-design

Co-production and co-design will be an important part of how we commission services and we want to hear more Warrington voices of experience. We know that the experts in care are often the people that receive it and we recognise that we need to listen to and utilise this knowledge. We aim to develop mutual and reciprocal partnerships to enable peer advocate led discussions and arrangements with professionals.

Co-production begins with strengths, and supports the development of those strengths, building on people's existing capabilities and growing confidence as people take more control. We will develop a programme for the co-production and co-design of services, with people across communities. This will facilitate new markets that develop self-sufficiency and ensure that people have equal and timely access to a range of affordable and good quality, community-based support, including accommodation with care.

Following the principles of the Think Local Act Personal (TLAP) ladder of co-production, we will improve our listening and involvement of people through our support to providers and voluntary and community sector organisations. They are our links to communities and hold a wealth of knowledge and understanding of people with lived experience, or better consultation, connectivity and control for people through the sharing of innovative practice.

Initially, we will develop a framework for feedback and appraisal of quality from people who use services, their families, and carers. Our model of consultation and co-production with local community partners will support the development of new services and pathways for support.



Delivering better outcomes – our priorities

We have developed six linked commissioning priorities that we believe will deliver change through service delivery and culture.

The aim is that these six priorities are necessary to address the demographic, financial, and workforce challenges that we face. We aim to meet these priorities through our linked strategies and through council and joint place plans.

Our six key priorities are described on the following pages and provide examples of how we will change and progress over the duration of this strategy. We also describe 'three first things for a flavour of how we plan to make progress with each priority in the short-term. Please note, these priorities are not listed in order of their importance.

Priority 1 – Living well

Local, joined-up, community level opportunities and support, with universal services that connect people with each other and their communities.

Priority 2 – Independent at home

Supporting people to be independent at home, with timely interventions that focus on strengths, wellbeing, and independence. A responsive and co-ordinated offer of support in times of crisis or escalating need.

Priority 3 – Having the best day possible, every day

Ensuring good choice and opportunities for day, employment and training. Support for people to meet their aspirations, to be socially engaged and part of the wider community.

Priority 4 – Good local housing with care and support

Appropriate housing with care and support for all people, including those with complex needs. Care and support for independence where it is needed, provided in a safe, supportive and enabling home.

Priority 5 – Good, affordable, quality care near to home

Developing a care and support market that provides choice and sufficiency, and delivers person-centred care.

Priority 6 – Workforce

A confident, sufficient and skilled workforce, and a social care workforce that is recognised, respected and valued.



Our priorities

Priority 1 – Living well

'Living Well' in Warrington will build a whole system approach to supporting people to live and age well and ensure everyone has access to the information, resources, and skills to enable them to do this. Working with our strategic partners, local businesses and people, and further investing in our community and voluntary sector organisations, we will redesign the way we support individuals, providing the right support, in the right place, at the right time, building on the strengths of individuals and their communities.

Working with people and communities, we will be more innovative and flexible in the way we commission to meet needs. We will focus on localities and local support options for ensuring people are connected to others and stay active to support their health and wellbeing.

We will need our partners, providers, and community organisations to embrace working in a strengths-based way, promoting independence and wider wellbeing, and be fully committed to the Living Well programme in order to maximise the benefit for local people.

Over the duration of this strategy, to support our aims, we will:

- Develop training and communication so that the public and independent sector workforce are aware of and promote local assets and resources such as clubs, groups, and 'Good Neighbour Schemes'
- Work with local organisations and businesses to raise awareness so that they may contribute to the wider wellbeing offer (e.g. dementia awareness training for staff, Talking Points at their venues etc.)

- Evaluate the Living Well investment and interventions to support future decision making and long-term spend (e.g. people remaining in their own homes for longer) and roll out best practice

Three first things

1. Work with our Warrington partners to develop and promote place-based models of support that grow voluntary and community sector activity
2. Design a model of consultation and co-production with local community partners and people that supports the continuing development of new services and pathways for support
3. Develop access to information through online tools and face to face contact that will guide people to local opportunities and support



Priority 2 – Independent at home

Playing our part in the Warrington 'Place' programme, we are committed to delivering more proactive services with targeted interventions, and technology that provides flexible and intensive crisis support.

We will aim to build on the success of our 'Home First' and intermediate care services, by expanding multi-disciplinary team working to include wellbeing services so that, for example, we prevent hospital admissions as well as support a speedy recovery. Recognising and managing need early will ensure that people are offered the right support at the right time, so we will work with stakeholders to research different approaches that will reduce wait times and speed up our processes, for example, 'trusted assessor' and crisis response models.

Technology Enabled Support (TES) and aids and adaptations are a key element for achieving our aims, and timely assessment and delivery will ensure that people can remain independent in their own homes for as long as possible.

We will develop a strategy and framework to improve access to equipment that supports independence, taking a flexible approach and recognising this is quickly moving and ever changing market.

To achieve and embed this priority over ten years, we will:

- Invest in low level wellbeing services to support physical and mental health and grow availability to support people to live well in the long-term
- Continuously analyse communities to understand what is working well and where gaps arise
- Deliver our Carers Strategy that promotes and prioritises carers to live and enjoy their own lives while caring for others

- Develop knowledge and processes for front-line staff to assess and deliver technology enabled support and physical adaptations swiftly and confidently
- Continuous improvement of preventative and reablement approaches to reduce long-term reliance on domiciliary care services (e.g. through new ways of working and contracting)
- Increase extra care and/or sheltered provision in under-served parts of Warrington

Three first things

1. Support unpaid carers to reshape the services offered to them and work with partners to address gaps or duplication in support provision
2. Investment for a new, fully integrated intermediate tier site to support the expansion of the Warrington reablement and independence model
3. Further develop our Warrington approach to deliver a reduction in hospital admissions and develop the market further to deliver short-term interventions that prevent escalation of need e.g. short breaks and urgent crisis response services



Priority 3 – Having the best day possible, every day

We aim to deliver services and resources that enable people to access a range of opportunities in their own local community, to live as active and equal residents, whatever their care and support needs.

Through the development of a tiered and more personalised approach, we will focus on individual strengths and skills development. We will also increase independence through daily living abilities, education, training and access to employment for more people. Maximising the use of self-directed support and personal budgets to access day support or activities will offer better choice and control to people and support this aim.

Our wider plans to improve the universal and community offer will also encourage people to make the most of local groups and assets, improving access for individuals and their support networks to focus on strengths, choices, assets, and goals.

Creating the 'best day possible' is a key priority for Warrington and our long-term strategy will be realised through:

- The development of access to wider wellbeing activities available within Warrington through improved information, advice, signposting, and an informed workforce
- Exploring and researching options for public sector employers to become supported employment role models, while fostering partnerships with local businesses to increase supported employment opportunities (e.g. widening of apprenticeships for all sectors of the Warrington community)
- Through our collaborative commissioning approach, we will create an environment where providers can work in partnership with commissioners and together, and our contracting of supported living and day services will enable them to exercise flexibility to adapt services to meet individual choices

Three first things

1. Develop and implement an age appropriate tiered model for day support that ranges from specialist services to community activities and short-term enablement
2. Increase connections for people with an interest in returning to learning by developing pathways or employment (e.g. prioritise access to employment skills and opportunities within the Learning Disability Strategy)
3. Complete a review and deliver recommendations to remodel day opportunities for older people in Warrington, including those with more complex support needs (e.g. living with dementia)



Priority 4 – Good local housing with care and support

Commissioning services that prevent escalation into care and support services, for example homelessness, is essential. This means intervening early enough to help and ensure that people either stay in their own home, or are provided with support that enables them to maintain quality of life in a new one. We will bring all partners together across the voluntary and statutory sector to integrate approaches and services where this will impact positively on increasing local choice and providing support for those with complex needs to live full and independent lives.

By communicating with individuals and groups to better identify future need, and building on work already completed through our housing and market reviews and position statements, we need to ensure that there are 'pipeline' future developments that will meet the needs of people with more complexity. For example, the development of new supported housing and support services to meet the needs of people who have complex needs such as learning disabilities, dementia, mental health needs, and acquired brain injury.

Real action is required if we are to realise our long-term ambitions, so we plan to:

- Ensure that people have swift and affordable access to minor adaptations and improvements, with a focus on timeliness of equipment related assessment and provision
- Further expand and develop the 'Shared Lives' accommodation offer
- Develop supported accommodation that is innovative and uses technology enabled support or strengths/asset-based approaches to support independence
- Work in partnership to improve development of and access to appropriate affordable housing, including bungalows, and sheltered accommodation
- Continue to work with housing and public health colleagues to tackle domestic abuse and reduce homelessness

Three first things

1. Forecast and invest to develop sufficient supported accommodation that can meet known needs across the borough, for example, with good transport links, access to community and learning opportunities, and open spaces
2. Introduce flexible approaches to support individuals to remain living in their own homes through the development of outreach and other support services
3. Increase targeted respite care/short breaks for young adults, adults with a learning disability, and for people living with dementia



Priority 5 – Good, affordable, quality care near to home

The care and support market will look very different in the next 10 years. It must be affordable and shaped to fit with the needs and aspirations of the communities that it serves. We will work with people, practitioners, and providers to develop a changed market that, wherever possible, offers a choice of care and support, with a focus on quality and value for money.

We will look to continuously support improvement of quality through our commissioning activity, improved intelligence gathering, and listening to feedback from people, including those that use/deliver services, unpaid carers, and other stakeholders.

Our plans and strategies will be developed to increase community access and support independent lives. A collaborative commissioning approach is required to ensure we maximise investments and reduce any duplication. We need to find more creative ways to help providers innovate and adopt new or best practice, encouraging the use of local pilot models for care and support.

We will recognise the value and potential of both new and existing providers as we shape our market for the future. Further development of the model for self-directed support, as an effective and realistic alternative to commissioned services, will be essential if people are to take control of their care and make informed choices to improve their health and wellbeing, and we will also explore other models of provision, for example, cooperative care.

We recognise that there is work to do in the coming years and we will need to:

- Integrate the workforce through training and sharing of culture between public and independent sector services
- Work with the sector to redesign provision to respond to the changing needs of individuals more effectively

- Increase targeted respite care/short breaks for people living with dementia
- Support the sector to make best use of appropriate technology within care homes
- Improve quality of and access to training and development for staff working in residential care
- Create formal market impact assessments for all new and recommissioned, or changing services

Three first things

1. Complete and implement the national Cost of Care exercise to deliver a fair, realistic and evidence based price for care homes and care at home
2. Ensure that the information for self-directed support is comprehensive, up to date, and accessible through different routes
3. Develop more short and long-term local provision for people with more complex needs (e.g. challenging behaviour/dementia)



Priority 6 – Workforce

Alongside our partners and the independent sector, we will work together to ensure that there is a unified approach to recruitment and retention of staff, and all available resources are managed as efficiently and effectively as possible.

There will be a focus on approaches that recognise existing staff as an asset and do more to make them feel valued for the work that they do and the commitment they bring. We also want to ensure that we provide positive opportunities for all those who wish to work or volunteer in adult social care.

A strong and skilled workforce will be supported by a comprehensive and positive training and development offer, and we aim to bring more career structures and pathways to all care and support roles.

In the coming years, we will continue to act to retain a skilled workforce and to attract new talent, so we will:

- Cement links with Warrington’s Health and Social Care Academy and the University of Chester, using innovative approaches to increase take up of courses, with a specific aim to bring more people into the sector and increased staff development
- Expand strengths based practice/‘good conversations’ through induction, training and support tools for all workers
- Link the national Cost of Care exercise to the recruitment, development, and retention of staff
- Through contracting and regular review, ensure that skills and knowledge are a key aspect of induction and training for staff supporting people with complex needs
- Adopt best and innovative practice from local and national sources, such as Skills for Care and ADASS

Three first things

1. Develop an Adult Care Workforce Strategy closely aligned to the system workforce strategy that promotes cross-sector learning, strengths based practice, and good conversations through induction, training, and support tools
2. Support and target domiciliary care with the aim of reducing staff turnover by improving terms and conditions, and training and creating career pathways
3. Increase the use of positive pathways to potential employment within the health and social care sector (e.g. exploring apprenticeships, encouraging work placements, and supporting college leavers into caring roles)



Meeting need, delivering better outcomes, and offering more choice

The challenges that we face are significant, and we need to prioritise spend in the right areas if we are to provide good, timely support, while remaining financially sustainable. This means targeting resources and increasing investment in services and areas where they are most needed, and where we can support independent lives. This will help us to reduce spend in more traditional, long-term care and support services.

Avoiding admission and supporting discharge

- 20% increase in bed-based reablement care
- 25% increase in home-based reablement support
- 25% more people supported at home through more enabling domiciliary care
- 100% of contracts to include consideration for improvements through technology enabled support

Safe, high quality long-term care

- Up to 200 more Extra Care homes
- 100 more specialist nursing beds
- 100 less beds in residential care
- 60 more homes for people who need supported living with care and support

More active and independent lives

- 150 new opportunities for young adults through education, activity, training, apprenticeships, volunteering, or paid employment
- More day opportunities for older people to support at least 150 more people through our voluntary and independent sector partners

- Increase specialist dementia day services to support more than 100 people

Workforce

A commitment to a highly skilled and valued workforce who are appropriately rewarded for their work and the vital impact that they have on people's lives.



Next steps

Our high-level plan within this strategy identifies our priority activities, and we give further detail through the adult social care commissioning team's strategic and service level plans.

Linked key strategies and plans

If we are to successfully deliver this long-term vision, and change the way that we commission and deliver adult social care, we need to connect to other strategies and plans. These may be led by other council departments, or other organisations, and many of them will be jointly delivered. Some also further develop themes from within this strategy, with more detail provided on specific services, areas, and communities.

Warrington Strategies, plans and programmes supporting people to 'Live Well'

- Joint Health and Wellbeing Strategy
- Assistive Technology Strategy
- Carers Strategy
- Housing Strategy
- Dementia Strategy
- Warrington Joint Strategic Needs Assessment (JSNA)
- Learning Disability Strategy
- Autism Strategy
- Warrington Together
- Adult social care market provision statement
- Drug and Alcohol Strategy
- Warrington Local Transport Plan (LTP4)
- Active Warrington Strategy
- Mental Health Strategy
- Workforce capacity and development plan

- Active and supportive communities
- Warrington community-led support programme
- Warrington Town Deal

All adult social care strategies are to be included in a cyclical programme of development and review.

Governance and accountability

Our strategy will be monitored through our existing internal oversight and arrangements, via the new 'Place' related governance, and through resident contact and feedback.

Reporting and governance – individual and whole system approach



Key outcomes

- Improved wellbeing and experience of care and support in Warrington
- Better experience of health and social care services for people who access them
- Cross-organisational financial sustainability and value for money for residents

How will we know if we have succeeded?

Over the duration of this strategy, we will deliver our specific targets through the six key priorities that we have identified.

We are committed to creating a long-term commissioning landscape that is overseen by the governance we have in place, and we will return to our outcomes and report on our success and challenges annually.

Year 1

- More service users and unpaid carers will be using direct payments as a means of taking control and organising their own care
- Less client crisis and reduced repeat hospital admissions with our 'Home First' approach, aiming to maximise independence
- Reduced wait times for domiciliary care
- Reduced unplanned hospital re-admissions as more people benefit from reablement type services at home and when leaving hospital
- More targeted and specialist day facilities for frail, elderly people living with dementia and other complex needs
- Improved dementia support for people and their carers through the development of resources, opportunities, and signposting for those with lower, but increasing, levels of need

- Ongoing improvement of conditions for our front-line care workforce
- A visible collaboration between statutory and voluntary sector organisations through investment and decision making processes, showing partnership working across Warrington

Year 3

- Improved hospital and system discharge performance that has access to reablement services in acute settings through a system wide, single intermediate care function, offering both bed-based and home-based care
- Post 19 offer that is attractive and people choose to stay local
- Increased number of disabled people in employment
- Increased choice of accommodation and support solutions that improve independence for people with learning disabilities and mental health conditions
- Dementia support for people and their carers will improve through the development of specialist day support for those with medium to high level needs
- Up to date local information and advice that is routinely accessed by people so that they can make informed choices about their care and support
- Average care hours per week will be lower and more people benefiting from technology enabled support to enable them to remain at home

Year 5

- Significantly increased number of older person Extra Care units and affordable single story accommodation facilitated or delivered by the council
- Sufficient supported living accommodation for people with autism, learning disabilities, and physical disabilities, with resilience and planning

Year 10

- A high quality specialist market provision that meets the needs of the expected significant increases in the 85 year and over population
- Unpaid carers will feel that they are an integral part of our support network and are supported accordingly
- Flexible accommodation and support for people with mental health needs, learning disabilities, and physical disabilities, with continuous improvement in terms of technology and equipment
- A high proportion of the Warrington population will be keeping active, healthy and well in their communities, reducing the demand for health and social care services
- A workforce that is flexible, knowledgeable and respected, and meets the social care needs of the Warrington population

We will achieve better outcomes by evidencing that we have delivered on our commitments and by consulting, co-producing, and developing our partnerships – and we will continue to ask for input and feedback.

Working together to help people to live well in Warrington.

