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Foreword: by Sara Livadeas, Deputy Director, Joint Commissioning

Thank you for taking the time to read this Market Position Statement, the first of its kind from Oxfordshire County Council. It is aimed at existing and potential home support providers and those interested in the delivery of home support services within Oxfordshire and will inform discussions we have together.

In this statement we set out our current purchasing practices, our understanding of demand, and how that demand may change in the short to medium term. We also outline current trends and our plans for commissioning home support across all service user groups.

We are committed to stimulating a diverse, active market where innovation and energy is encouraged and rewarded and where poor practice is actively discouraged. We want to create an environment where businesses can thrive by delivering high quality social care services that people want. This is an important role for us and a key part of shaping the kind of place we want Oxfordshire to be; a place where people can live their lives as successfully, independently and safely as possible and where, regardless of age or ability, people can determine the help they need.

The initial scope of this document is for Adult Social Care services but we recognise there are strong overlaps with services for children. If you are a provider and have ideas about how home support services can best support and meet the needs of children who require services in their own home, we want to hear from you.

This Market Position Statement will be followed by one for Care with Housing, due by the end of February 2014, and one for Care Homes, due by the end of March 2014.

You will be able to find these documents and more at www.sourceoxfordshire.org.uk our website for Oxfordshire providers and customers.

Our Market Position Statement is the start of a dialogue with care providers. We look forward to talking with you about it and finding out what you can offer to give people in Oxfordshire more choice, independence and control over their lives.

Sara Livadeas
Deputy Director – Joint Commissioning
January 2014
A Customer Charter for Home Support Services

During 2013 we worked with people who receive care, their informal carers and organisations that provide care to develop a Customer Charter for Home Support Services. Together, they co-produced the charter. It sets out the standards which service users expect to experience, providers need to deliver and against which providers’ performance will be assessed.

Standards for Home Support Services

If you receive support at home from a care agency, these standards are for you, they set out what you can expect.

If you are a care agency, these are the standards that are expected from your staff and the standards that Oxfordshire County Council will use to monitor the quality of your services.

Home care staff will:
- introduce themselves when they arrive;
- know you and your support plan;
- be trained to deliver the support you need;
- always deliver support to a good standard.

When your home care worker visits you, they will:
- focus their attention on you;
- be pleasant and treat you with dignity and respect;
- do their very best to arrive on time and let you know by telephone if they are going to be late;
- tell you when they are leaving;
- check to see how they can best support you at the start of each visit;
- not rush you - they will help you at a pace that suits you;
- carry out all agreed tasks;
- make sure that you are comfortable at all times;
- communicate and discuss topics that interest you;
- check that you are happy with the support you are given and encourage you to tell us how they can improve;
- show you your care record if you ask for it;
- be aware that their visit may affect other household members.

These standards have been jointly written by people who receive care in their home and home care support agencies.

If you have any compliments, comments and complaints about the home support you receive please contact your care agency; usually talking to someone in the service can put it right. But if not, please contact Oxfordshire County Council by calling 01865 815906, emailing complaints@oxfordshire.gov.uk or writing to: Complaints Team, Oxfordshire County Council, County Hall, New Road, Oxford OX1 1ND.
Our vision for Oxfordshire

A number of documents set out the context in which we work and our visions for Oxfordshire. Oxfordshire’s Joint Health and Wellbeing Strategy outlines our aspiration for Oxfordshire stating that by 2016:

- More adults will have the support they need to live their lives as healthily, successfully, independently and safely as possible, with good timely access to health and social care services.
- The best possible services will be provided within the resources we have, giving excellent value for the public.
- More children and young people will lead healthy, safe lives and will be given the opportunity to develop the skills, confidence and opportunities they need to achieve their full potential.
- Everyone will be given the opportunity to voice their opinions and experiences to ensure that services meet their individual needs.

Alongside the our Joint Health and Wellbeing Strategy are the Joint Commissioning Strategies for Older People, People with Physical Disabilities, Mental Health Needs, Autism, and Learning Disabilities. These all uphold our vision of enabling people to live independent and successful lives.

Our overall vision for Adult Social Care reflects the need for personalised, high quality services to be delivered across the county. In order to achieve this we need a diverse market of high quality care providers that give choice for service users.

Key messages: Our vision for Oxfordshire

- We want people of all ages to lead healthy and safe lives.
- We want people to achieve their full potential and to be independent.
- We want to ensure that the right services are available at the right time in the right place.
- We want services users to tell us about their experience of the services they receive.
- We want home support providers to consider how they can best support these objectives.
The demand for home support services

Oxfordshire is one of the most rural counties in the South-East of England and West Oxfordshire is one of its most rural districts.

Each year the population of Oxfordshire grows and with it the number of people who need care increases. Census data from 2011 tells us that one in six people (16%, 103,742 people) of an estimated 653,800 people living in Oxfordshire were aged 65 and over.

Although we do not know exactly how many people need home care in Oxfordshire, we can tell from the 2011 census that a considerable amount of Oxfordshire residents have a long term health problem.

In 2011 people were asked to identify whether their day to day activities were affected by a long term health problem that was either related to old age or had lasted for at least 12 months.

The results suggest that 46.3% of people over 65 in Oxfordshire were affected to some level and 21.6% were affected a lot.

Figure 1 shows the results across five districts. We can infer that people who live in Cherwell and Oxford feel their daily lives were affected by their condition more than the county average.

*Figure 1: Prevalence of Disability among Older People Aged over 65 in 2011 (%)*
An estimated 24,000 older people in the county are significantly limited in how they live their lives. Of these we estimate that:

4,000 (16%) receive long term support managed by the local authority. 1,600 of these people are in a care home. The other 2,400 receive home support or purchase their support through a Direct Payment.

5,700 (24%) receive intensive (50 hrs+) informal care from a family or friend

2,100 (9%) self fund a care home placement

3,400 (14%) self fund care at home

8,800 (37%) have a potential need who could come forward and ask for care

Over the next ten years:

- The number of older people living in Oxfordshire will rise by 23%.
- The number of people over 85 will rise by nearly 40%.
- People with disabilities will live for longer, often with more complex needs.
- It is estimated that the gender balance of older people is forecast to remain constant with 55% of over 65's being female.
- The number of people with dementia is forecast to increase by 28% from 2012 to 2020, from 7,800 to 10,000.
- People over 90 with dementia is forecast to rise by 48% in the same period - from 1,736 to 2,565.
- As the population changes in size and need so the demand for social care increases.

Figure 2: Number of people aged 65 and over in Oxfordshire 2011-2020 (0,000s)

<table>
<thead>
<tr>
<th>Region</th>
<th>Increase</th>
</tr>
</thead>
<tbody>
<tr>
<td>West Oxfordshire</td>
<td>+ 30.1%</td>
</tr>
<tr>
<td>Vale of White Horse</td>
<td>+ 24.4%</td>
</tr>
<tr>
<td>South Oxfordshire</td>
<td>+ 23.4%</td>
</tr>
<tr>
<td>OXFORDSHIRE</td>
<td>+ 23.3%</td>
</tr>
<tr>
<td>Cherwell</td>
<td>+ 22.9%</td>
</tr>
<tr>
<td>Oxford City</td>
<td>+ 7.1%</td>
</tr>
</tbody>
</table>

(Sources: Calculations based on the ONS 2010-based Subnational Population Projections and the 2010-Based Projections - Principal Projection for England)
We also know that:

- The number of older people receiving home care arranged by the council rose by 6.6% in 2011/12 and by a further 12% in 2012/13.
- Those supported by a direct payment rose by 13.7% and 4.6% in the same periods.
- The average support package size for all people living at home is currently ten hours per week.
- Since 2001 there has been an increase in the proportion of unpaid carers in Oxfordshire from 8.4% in 2001 to 9.4% in 2011.
- Many people will get their care needs met by family and friends. The people they are supporting may or may not buy additional care.
- In Oxfordshire an estimated 11,000 people are currently providing informal care of more than 50 hours per week.

**Adults of working age**

This group includes people aged 18-64 who have physical disabilities, learning disabilities, mental health issues, acquired brain injury, or autism.

The largest proportion of support at home for adults of working age is delivered by supported living providers who hold block or framework contracts with the council. Some support at home is also provided by more generic home support providers. Demand tends to be for support within the family home, or to individuals, with complex tasks.

There is a particular need for staff who are trained in severe epilepsy and diabetes and for agencies able to respond to service users with challenging behaviour or mental health issues. A person centred approach is essential, supporting people to take part in a range of daily living activities and to have control over their lives.

Adults of working age receive just over 2,000 hours of home support per week. Adults with a learning disability receive 210 hours per week with those with a physical disability accounting for the remainder. The average packages is 10.3 hours per week.

Just over £30,000 per week is spent on 80 clients who receive non standard home care, such as live in home care and more than £270,000 per week is spent by 804 clients of working age via direct payments.

National research estimates that between 2012 and 2030, the number of adults with a physical disability who need social care will grow between 1.8% and 6.5% per annum and the demand for social care for adults of a learning disability will increase between 2% and 2.7%.
Extra Care Housing (Housing with Care)

We currently have support contracts in place with nine Extra Care Housing Schemes; in Oxford (3), Banbury (2), and one each in Abingdon, Bicester, Thame and Yarnton.

Care and support is usually delivered by an on site care provider on a block purchase arrangement for 24/7 unplanned or emergency response ‘core service’. In addition, residents have the choice to purchase their individual, planned care needs on a spot purchasing basis either from the on site care provider or from any other community based domiciliary care provider.

We have agreed plans to expand the provision of Extra Care Housing accommodation over the next few years. New Extra Care Housing care contracts will be tendered in 2014 in West Oxfordshire, the Vale of White Horse and South Oxfordshire Districts. Alongside this, numerous private developments are progressing within the County.

A Housing With Care Market Position Statement will be available in February 2014.

Children’s Services

On average we purchase approximately 200 hours per week of home support Children’s Services with this increasing to 400 hours a week during school holidays. We are aware that this is an area that remains under developed and there is a clear market opportunity here for home support providers who can deliver services to children with an increasingly complex range of needs.

Key messages: The demand for home support services

- There are more older people and their life expectancy is increasing.
- People with a disability are living longer, often with more complex needs.
- There is a low level of demand for Home Support services for adults of working age (particularly those with a learning disability and mental health issues) and in Childrens’ Services; there are opportunities for development in these areas.
- We want to hear from providers about the services they can offer to best support and meet the needs of Adults and Children who require services in their own home.
The current supply market

Our service model has five main components:

- Information, Advice & Guidance
- Reablement & Further Assessment
- Support Planning & Brokerage
- Care & Support Delivery
- Ongoing Review and Assessment

Information and Advice

Home support providers give low level advice and information to service users as a part of normal service delivery. In the future, we want to see this developed so that provider organisations become a valuable information resource for the people they support.

Recovery and reablement

Recovery and reablement plays a key role in our service model. We believe that people should be supported to maintain and regain as much independence as possible at all stages of their care pathway. Whenever possible and appropriate people who require care and support will be considered for a period of reablement.

Oxfordshire’s Reablement Service is positioned as close as possible to the beginning of the assessment process. It contributes to the assessment of clients’ needs for ongoing social care support. The service is currently delivered by Oxford Health NHS Foundation Trust under a contract that runs until September 2014. In October 2013 alone the service provided 235 episodes of reablement.

Mainstream home support in Oxfordshire

Within Oxfordshire there are currently 85 social care organisations, listed by the Care Quality Commission, for the delivery of home support services.

Over the past ten years we have increased the number of contracted providers on our Approved Provider List for Home Support Services from 19 to over 70 (November 2013). We encouraged this growth to help assure sustainable high quality services from which people could directly purchase home support services using their Personal Budget.

Many providers continue to rely on us for a significant proportion of their income and we are the single largest purchaser of home care services in Oxfordshire.

We estimate that:

- We currently purchase c.900,000 hours of home support per annum.
- In Older Persons services 50% of the service we purchase is delivered by the ten largest provider organisations.
- Our purchasing accounts for 52% of the business conducted by our contracted providers.
- The other 48% cent of a providers business is purchased by private payers including those people using a Direct Payment.
Support usually covers a broad range of care requirements. These range from basic support tasks through to more complex requirements for Continuing Health Care funded packages that require training from our Health partners. For further information please refer to our Shared Care Protocol training on www.sourceoxfordshire.org.
Services are delivered to people who have an acquired brain injury; have suffered or are recovering from a stroke; suffer from a long term debilitating illness; have dementia; have a mental health illness or are at the end of their life.

**Service performance**

In the more rural areas of the county we experience delays in pickup times and increased prices. One of the challenges providers face is coordination of staff to deliver services in a rural setting.

The average time across the county between a referral for service and support starting is eight days. This is too long and we want to reduce this to a maximum of three days as we believe the delay has a knock on effect throughout the care pathway.

A number of locations have particular difficulties where waiting times consistently exceed the county average. These are Bicester; Burford and Carterton; Charlbury, Chipping Norton and Woodstock; Kidlington and Yarnton, and Witney.

Conversations we have had with providers and other stakeholders have highlighted the lack of predictable service volume being a key issue preventing them from investing in resources to meet the demand more effectively.

We have recently offered preferred provider status for new referrals with linked incentive payments for early starts in the five areas listed above. This has been offered as a pilot and runs through to March 2014. Providers have indicated that such arrangements should help them to offer guaranteed hours to their staff.

![Figure 3: Planned visits and actual hours delivered](image)

The pattern of care provision highlights some of the traditional pressure points for service delivery - mainly morning and evening visits, as shown in Figure 3 above.
We want providers to explore alternative service options for tasks such as medication visits. This will enable providers to release mainstream care workers for new work.

This will require them to discuss options and implement service alternatives with other partners for example, community groups and other community services, assistive technology options and health options including telehealth and telecare.

**Workforce**

The county has high employment and a high skills base with low unemployment (fewer than 2% of residents claim jobseekers allowance). There is competition for labour, particularly skilled labour, and this leads to employment and service areas with a shortage of skills.

Recruitment and retention of staff, particularly in the more rural areas of Oxfordshire, are some of the challenges social care providers face in Oxfordshire; new providers often struggle to gain a strong foothold in the market. Home support providers often use zero-based hours contracts and past research has suggested that interest in social and health care jobs across the county is low.

We want to work with providers who can promote a positive image of social care services and who can attract new staff.

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**Key messages: The current market**

- A Reablement service is provided at the start of the Social Care pathway.
- We work with c.70 Home Support providers.
- We purchase about 900,000 hours of service.
- In Older Persons services ten providers deliver 50% of our council’s purchased service.
- We predict a 40% turnover of home support cases per year.
- The time between referral and service commencing is too long.
- Providers experience recruitment and retention challenges.
- Some providers struggle to meet demand in the more rural areas.
- Preferred provider status and incentive payments are being piloted in some areas.
The quality of care

The quality of care in Oxfordshire is generally good and there is a solid foundation of quality home care providers delivering services in the county.

We know this because we assure quality through a number of activities and these contribute to our assessment of the overall quality of services delivered:

- annual user surveys;
- the use of phone in days;
- a review of complaints;
- analysis of electronic time monitoring data;
- annual quality Monitoring Visits carried out by Council staff;
- reviewing Care Quality Commission reports.

Each year we survey people who use social care as part of a national survey. Overall our surveys suggest that 90% of service users are either satisfied or very satisfied with the service they receive.

Key areas for improvement, highlighted from complaints and feedback, are late visits, missed visits and poor continuity of care.

These areas have been addressed in the Customer Service Standards for Home Support, developed by service users, informal carers and care providers. These are presented on page 5. In the future we will judge the quality of services provided against these standards.

Key messages: Quality

- The quality of service delivered in Oxfordshire is good.
- 90% of service users are either satisfied or very satisfied with the service they receive.
- We want satisfaction levels to improve.
- Our Customer Standards will be the benchmark for good quality services.
- We will work with providers who can demonstrate continuous improvement.
- We will work with providers who actively ask for feedback from service users and use this to improve their services.
Future funding

Since 2010 we have had to save £127 million across all directorates and we are committed to saving a further £74 million between 2014/15 and 2017/18.

We anticipate a very challenging financial settlement for the next three to four years. While we have made significant savings already we expect a further reduction of £64 million, equating to about 20% of our budget.

Historically we have had a strong reputation for working in partnership with our health colleagues. Pooled budgets for Older People’s Services, people with learning disabilities, physical disabilities, and mental health needs have brought together both health and social care money, these are overseen jointly by the Council and the Oxfordshire Clinical Commissioning Group. Previously, health system funding and adult social care funding were managed separately.

This arrangement increases our purchasing power with Health and includes:

- Older people’s pooled budget now joint with the Clinical Commissioning Group (£171 million).
- Learning disability pooled budget (£79 million).
- Mental health pooled budget (£49 million).
- Children’s commissioned services (£84 million).
- Physical disability pooled budget (£19 million).
- Drugs and Alcohol Team (£9 million).

The information above needs to be considered alongside changes in the level of Council funding.

In 2012/13 our budget for older people was £81m of which £22m was spent on home care and direct payments for service users living in their own home. We estimate that £5.3m was placed via the direct payments route.

The table below shows our spend for home support services and for services purchased with a direct payment for 2013/14.

<table>
<thead>
<tr>
<th>Current estimates of annual spend (December 2013)</th>
<th>No. People</th>
<th>Annual Cost (£m)</th>
<th>Average weekly cost of package</th>
</tr>
</thead>
<tbody>
<tr>
<td>Older People</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Home Care</td>
<td>1,626</td>
<td>16,023</td>
<td>£190</td>
</tr>
<tr>
<td>Direct Payment</td>
<td>641</td>
<td>9,306</td>
<td>£280</td>
</tr>
<tr>
<td>Adults with a Physical Disability</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Home Care</td>
<td>182</td>
<td>1,984</td>
<td>£209</td>
</tr>
<tr>
<td>Non-standard Home Care</td>
<td>23</td>
<td>564</td>
<td>£471</td>
</tr>
<tr>
<td>Direct Payment</td>
<td>351</td>
<td>5,194</td>
<td>£282</td>
</tr>
<tr>
<td>Adults with a Learning Disability</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Home Care</td>
<td>31</td>
<td>250</td>
<td>£155</td>
</tr>
<tr>
<td>Non-standard Home Care</td>
<td>57</td>
<td>1,009</td>
<td>£341</td>
</tr>
<tr>
<td>Direct Payment</td>
<td>434</td>
<td>8,866</td>
<td>£393</td>
</tr>
<tr>
<td>Total</td>
<td>3,345</td>
<td>43,196</td>
<td></td>
</tr>
</tbody>
</table>
In Social and Community Services we are committed to fulfilling our responsibilities towards people who need care. This means we will continue to meet our statutory duties and provide or arrange good quality care for all people who are eligible for support from the Local Authority. We will continue to meet new demand as it arises. In order to achieve this with a reduced budget we have put forward proposals to cut back our provision on non statutory services.

Our overall strategy remains the same and to achieve this we will:

- Support people to live at home; to be as independent as possible and have control over their day to day lives.
- Support people to keep well and to reduce demand by providing services that prevent dependency further down the line; such as support to family carers, re-enablement, falls prevention and day services.
- Provide all services as efficiently as possible. This may mean doing things very differently.
- Continue to work with our partners to minimise the impact of cuts on service users, on staff and on providers.

Key messages: Funding

- We will continue to meet our statutory responsibilities.
- The council and its Health Partners have a strong joint working arrangement.
- We have pooled budgets across all client groups; this funding relationship increases our purchasing power.
- The council and its partners make a significant investment in Home Support in Oxfordshire.
- We expect funding levels will continue to come under pressure in future years.
Our future service model

Our role is changing from one of service provider to helping others to provide services, and helping people to help themselves. We remain committed to a thriving Oxfordshire - thriving families, thriving communities and a thriving economy. We will continue to provide a safety net for the most vulnerable people in the county.

Our future service model is based on the following key themes; we want:

- to support people to stay safe, well and independent in their own homes;
- individuals to have access to good quality information and advice;
- people to be able to choose how they want to live their lives;
- business to thrive and for new entrants to come into the market;
- innovation in how care is provided;
- people to see social care as a positive job and career choice;
- there to be swift and effective support when it is needed;
- reablement and recovery to be a feature of all services;
- good quality support to be available.

Over the next few years we will:

- **Enable more people to choose and buy their own care directly.** We may buy less service directly from providers because we want to encourage and increase direct purchasing of services by individuals using their Personal Budget.

- **Have stronger relationships with fewer high quality providers** which means we may directly purchase from fewer providers. There will be a strategic shift to contract with fewer providers. This will allow us to develop strong partnerships to secure high quality sustainable specialist services with a core group of providers.

- **Secure services in key locations so we will use block purchasing to secure more specialist services.** There will be inbuilt incentives to deliver performance targets such as speedy pick up seven days a week, and secure the delivery of services in hard to reach areas for those most vulnerable and isolated.

- **Promote a personalised model of care;** we want to move away from a task based approach and join with providers to shape how this could work.

- **Encourage responsive services that operate seven days per week delivering improved and personalised home support.** This will include providers working in a personalised way, reducing the number of inappropriate short visits, managing people's personal accounts, providing night care and providing a fast safe pick up of packages.

- **Encourage home support providers to give information and advice about the care options available to individuals.** We also want them to offer 'low level' support services to people who are not eligible for our support. Typical services include: cleaning and handyman services, companionship, and signposting to social groups that allow people to remain at home. We also want to see providers considering how they can support people and broker arrangements that deliver flexible packages of support that meet an individual's needs.
• **Purchase from providers based in a neighbouring council areas** - we recognise that there may be occasions where it is easier for a service to be delivered by a provider that is located close to Oxfordshire but across our administrative border. We may also purchase service in partnership with other neighbouring councils where this delivers an improved outcome for service users.

Providers will need to respond to this and help us deliver a service model where an individual and their service provider work together to meet an individual’s needs.

Our service model will deliver arrangements whereby:

• people are able to assess their own care needs and identify the help they need to maintain their health, wellbeing and independence;
• there is good quality information and advice to enable the best possible decision making;
• there is good choice of high quality affordable service provision;
• potential service users will want and are able to buy directly from service providers;
• people will be able to do more things for themselves rather than approaching the council for help;
• people will be able to promptly access services that support them for a short period of time. These will have recovery and reablement as key outcomes; most people exiting the service should need no or less care;
• individuals will be able to make their own ongoing support arrangements whenever possible and appropriate;
• people will only need to approach the council for help with their support when they need specialist services, when they are most vulnerable or when there is a gap in supply;
• people will be able to buy other complementary services from home support providers, using their own money.

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**Key messages: Future service models**

• Improved advice and information will be available to service users.
• Service users will have the opportunity to assess their own care needs.
• More people will buy their care and support directly from providers.
• This will create a closer relationship between a service user and their provider.
• All services will promote recovery, reablement and independence.
• Services will need to be able to respond quickly across seven days a week.
• Providers will need to respond to this changed market.
• We may purchase some services in partnership with other councils.
The challenge for providers

Our future service model will see a change in the relationship between service users, providers and the council. Providers have an opportunity to help make this change happen.

When a service user is deciding how to arrange their support, Oxfordshire County Council wants to directly link those who want support to those who provide it.

- We want providers to position their services so that service users and potential service users approach them directly.
- Providers have an opportunity to help potential service users choose how they arrange their care and support through the provision of good clear information.
- Providers will need to consider how they advertise their services (including on the social care eMarket place which we are currently developing) and how the most vulnerable people in society can contact them directly.
- There is an opportunity for providers to use their expertise to help a service user assess the support options available to them, to help them decide what best meet their needs and delivers what they want to achieve.

Providers will need to offer a broad range of flexible services to ensure that the best possible choices are available.

- Service users will expect affordable good quality care that safeguards individuals. This will need to be at a cost that encourages direct purchasing.
- A flexible service will need to be available on a 24/7 basis. This should include options for 'long-sits', night care and respite arrangements.
- Prospective and existing users will want to receive high quality support that meets their needs without experiencing hand-offs between organisations. Providers should be able to offer a seamless single provider solution for crisis care, rapid response and ongoing home support.
- Providers will need to deliver extended seven day office hours (0800-2000) to align with complementary changes to the way statutory agencies will operate.
- An ability to support people with complex and multi-complex needs including those with Continuing Care Funding or Personal Health Budgets is required.
- A service user should feel that they are the focal point of care delivery. Services will need to be personalised and flexible; they will need to promote recovery and have an emphasis on reablement. They will need to be responsive to a person’s wishes. Services will need to be dignified and dementia-friendly and ensure that people have a positive experience of the care and support they receive.
- Risks will need to be recognised, assessed and responded to. Support will need to be delivered with full consideration of the health, wellbeing, safety and wishes of the individual.
Providers will need to deliver a swift response to avoid unnecessary admission to a care home or hospital. Where admission does occur a provider should be able to work with the hospital at an early stage as part of discharge planning. A swift response to hospital discharge with a fast restart of service will be required.

Providers will need to signpost and network with other services in the community; this will include clinical inputs, such as nursing and therapy. They will also be expected to employ assistive technologies and telehealth or telecare options to help meet the needs of an increasingly frail older population.

We want providers to deliver a service that recognises and explores alternative support structures and opportunities to help meet an individual's needs e.g. informal carers, non-statutory community based services.

Providers will be expected to contribute to the ongoing assessment and review process with regular feedback to Social Care and Health staff.

Providers will need to have a well trained high quality stable workforce with the staff capacity and capability to support more people at home for longer. Service delivery may range from practical support through to delegated health task levels. Provider staff will need to consider the staff working arrangements and skill-set needed to deliver the above.

We want providers to offer services to new client groups. We want providers to develop a range of improved options and choices for Children and Young People's services and for Adults of Working Age.

Providers will need to respond to new business requirements and initiatives. This includes changes to income streams and new payment options such as pre-paid payment cards.

**Key messages: A challenge for providers**

- We want service users to approach providers directly.
- Providers will need to offer a broader service offering.
- Service users will work independently with providers to agree their support.
- Providers will need to deliver a personalised service based on outcomes.
- Providers will need to move away from task and time arrangements.
- New service offerings such as night visits or longer sits will be required to support long-term conditions.
- Providers will need to consider an individual's full needs and the service options available in order to promote independence, reduce their input and free up staff resources.
- More payment options will need to be offered to service users.
Working together

We see home support providers as key partners in supporting vulnerable people of any age in Oxfordshire. We are constantly looking to share expertise, benchmark best practice and work with our partners to deliver high quality care.

At an individual **service user level** providers can expect good quality social work support, good information together with a proactive and appropriate response to address any issues of concern. Providers can also expect an open and transparent response to complaints and safeguarding together with a focus on learning from episodes that present. This approach is adopted to ensure the best possible outcome for the service users we support both now and in future years.

At a **provider level** you can expect an induction programme for new providers and ongoing support to achieve continuous service improvement. To help deliver this joint working each provider will have a named Supplier Relationship Officer and a Contract Officer from the council allocated to them.

At a **local level** we will continue with our Locality Supplier Liaison meetings; these are held quarterly. Representation includes providers working alongside council staff that have locality, placement, purchasing and contractual responsibilities. These meetings address issues such as:

- local service delivery and the service delivery challenges we face;
- opportunities to improve what we do;
- how we can work together to seek local resolutions to the same;
- how providers can share resources to ensure business continuity.

At a **strategic level** the council will work with providers on activities such as:

- service and workforce planning;
- the development of Apprenticeship Schemes;
- identification and signposting to local training opportunities;
- good Practice Forums to share expertise, knowledge and ideas;
- benchmarking service delivery and operational practice across service user groups, specialist services and geographical areas;
- discussion about new services and operational efficiency;
- the commissioning of services based on outcomes;
- implications of the Care Bill on their work.
We expect to have an eMarketplace system ready for launch in April 2015. In the run up to this date we will work with providers and potential users of services to help them to be ready to sell and purchase services directly, without having to work through us.

We will need strong links to individual providers, their representative Care Associations and the Oxfordshire Clinical Commissioning Group.

We are promoting the creation of a single Care Association for Oxfordshire to help coordinate and improve service quality, and to develop our relationship with suppliers and meet the challenges that all sectors face.

Organisations can expect us to continue to provide information and advice that reflects best industry practice and legislative requirements.

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**Key messages: Working together**

- We recognise home support providers as key partners in the delivery of support to vulnerable people in Oxfordshire.
- We are seeking a robust working relationship with providers at all levels to ensure the delivery of high quality care services.
- Providers will have opportunities to work with us to model and test innovative and cost effective approaches to service delivery.
- We will be working with partners at an individual provider level, with the relevant Care Association and with the Oxfordshire Clinical Commissioning Group.
Summary of key messages

Our vision for Oxfordshire

- We want people of all ages to lead healthy and safe lives.
- We want people to achieve their full potential and to be independent.
- We want to ensure that the right services are available at the right time in the right place.
- We want services users to tell us about their experience of the services they receive.
- We want home support providers to consider how they can best support these objectives.

The demand for home support services

- There are more older people and their life expectancy is increasing.
- People with a disability are living longer, often with more complex needs.
- There is a low level of demand for Home Support services for adults of working age (particularly those with a learning disability and mental health issues) and in Children’s Services; there are opportunities for development in these areas.
- We want to hear from providers about the services they can offer to best support and meet the needs of Adults and Children who require services in their own home.

The current market

- A Reablement service is provided at the start of the Social Care pathway.
- We work with c.70 Home Support providers.
- We purchase about 900,000 hours of service.
- In Older Persons services ten providers deliver 50% of our council’s purchased service.
- We predict a 40% turnover of home support cases per year.
- The time between referral and service commencing is too long.
- Providers experience recruitment and retention challenges.
- Some providers struggle to meet demand in the more rural areas.
- Preferred provider status and incentive payments are being piloted in some areas.

Quality

- The quality of service delivered in Oxfordshire is good.
- 90% of service users are either satisfied or very satisfied with the service they receive.
- We want satisfaction levels to improve.
- Our Customer Standards will be the benchmark for good quality services.
- We will work with providers who can demonstrate continuous improvement.
- We will work with providers who actively ask for feedback from service users and use this to improve their services.
Funding

- We will continue to meet our statutory responsibilities.
- The council and its Health Partners have a strong joint working arrangement.
- We have pooled budgets across all client groups; this funding relationship increases our purchasing power.
- The council and its partners make a significant investment in Home Support in Oxfordshire.
- We expect funding levels will continue to come under pressure in future years.

Future service models

- Improved advice and information will be available to service users.
- Service users will have the opportunity to assess their own care needs.
- More people will buy their care and support directly from providers.
- This will create a closer relationship between a service user and their provider.
- All services will promote recovery, reablement and independence.
- Services will need to be able to respond quickly across seven days a week.
- Providers will need to respond to this changed market.
- We may purchase some services in partnership with other councils.

A challenge for providers

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- Providers will need to offer a broader service offering.
- Service users will work independently with providers to agree their support.
- Providers will need to deliver a personalised service based on outcomes.
- Providers will need to move away from task and time arrangements.
- New service offerings such as night visits or longer sits will be required to support long-term conditions.
- Providers will need to consider an individual’s full needs and the service options available in order to promote independence, reduce their input and free up staff resources.
- More payment options will need to be offered to service users.
Working together

- We recognise home support providers as key partners in the delivery of support to vulnerable people in Oxfordshire.
- We are seeking a robust working relationship with providers at all levels to ensure the delivery of high quality care services.
- Providers will have opportunities to work with us to model and test innovative and cost effective approaches to service delivery.
- We will be working with partners at an individual provider level, with the relevant Care Association and with the Oxfordshire Clinical Commissioning Group.

If you have any questions, please write to:
JointCommissioning@oxfordshire.gov.uk

For further information about our work visit:
www.oxfordshire.gov.uk and
www.sourceoxfordshire.org.uk