



Report of the Director of Adults and Health

Report to Executive Board

Date: 24th July 2019

Subject: Integrated Market Position Statement

Are specific electoral wards affected? If yes, name(s) of ward(s):	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Has consultation been carried out?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Are there implications for equality and diversity and cohesion and integration?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Will the decision be open for call-in?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Does the report contain confidential or exempt information? If relevant, access to information procedure rule number: Appendix number:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Summary

1. Main issues

- Leeds has had a Market Position Statement (MPS) in relation to the adult social care market in place for a number of years now. The current iteration was first published in 2015 (and updated annually) but has now undergone a more comprehensive refresh. Since the current document was first published things have moved on significantly, with increased integration of commissioning across health and care and the development of the Leeds Health and Care Plan. As such, the new Integrated Market Position Statement reflects not just the adult social care market but the wider health, care and support market in Leeds, including children's services and public health.
- A final draft of the new document is attached at Appendix A. The document gives an overview of the strategic context for the city, the evidence base for commissioning (such as how predicted population changes will impact on demand), an overview of the financial picture across the health and care system, our approach to commissioning and quality management, current and future commissioning intentions, the health and care workforce in Leeds and finally, how providers can engage with us.
- To develop this new document an Advisory Group with representatives from a range of third and independent sector providers was set up to work with us to help shape its structure and content. The group was chaired by the Deputy Director for

Integrated Commissioning and included commissioning representatives from Adults Health, Children's and Families, Public Health and the Leeds CCG to ensure that the new document fully reflects the priorities across the different commissioning areas. The Advisory Group met monthly until early March 2019 working on the draft document, which then went out to wider consultation.

- In March 2019 a wider consultation event took place to give providers the opportunity to comment on the draft document, a questionnaire was also sent out giving further opportunity to feedback. The draft document was also taken to Adults and Health Directorate Leadership Team meeting, the Integrated Commissioning Executive and a specially convened joint scrutiny workshop for comment. An overview of the feedback received is in paragraph 3.3.
- The document has taken account of the feedback and provides: an overview of the strategic context for the city; the evidence base for commissioning; an overview of the financial picture across health and care; our approach to commissioning; current and future commissioning intentions; the health and care workforce; and how to engage with us. The main commissioning intentions section has been structured around five service areas which represent a continuum of care in the city: universal, prevention and early intervention; community support; support to live independently; primary and extended care services; and residential care. It is a three year document but the intention is that the section on finance and the commissioning intentions section will be updated annually to keep the document current for providers.

2. Best Council Plan Implications (click [here](#) for the latest version of the Best Council Plan)

- This document supports the ambition of the Leeds Health and Well-being Strategy that 'Leeds will be the best city for health and wellbeing', with a vision that 'Leeds will be a healthy and caring city for all ages, where people who are the poorest improve their health the fastest'. It also recognises the importance of the Inclusive Growth Strategy and delivering growth that is inclusive, draws on the talents of, and benefits, all of our citizens and communities. The IMPS sets out that all commissioned work will need to demonstrate its contribution to achieving these strategic aims.

3. Resource Implications

- There is no spending attached to the publication of the IMPS.
- The IMPS sets out the commissioning intention to achieve best value and use, sometimes pooled, resources to the best effect.

Recommendations

- a) To approve the Integrated Market Position Statement for publication.
- b) To note that the Director of Adults and Health is responsible for the publication of this document directly following approval.

1. Purpose of this report

- 1.1 To inform the Executive Board of the progress and the process of developing the Integrated Market Position Statement.
- 1.2 To seek approval for the Integrated Market Position Statement to be published.

2. Background information

- 2.1 Leeds has had a Market Position Statement (MPS) in relation to the adult social care market in place for a number of years now. The current iteration was first published in 2015 (and updated annually) but it is now due for a more comprehensive refresh. Since the current document was first published things have moved on significantly, with increased integration of commissioning across health and care and the development of the Leeds Health and Care Plan which sets out how we will deliver the ambitions set out in the Health and Wellbeing Strategy. As such, the aim for the new MPS is that it reflects not just the adult social care market but the wider health, care and support market in Leeds, including children's services and public health.
- 2.2 To develop the new document an Advisory Group, with representatives from a range of third and independent sector providers, was set up to work with us to help shape the new document. It is important that the document has the 'voice' of providers in Leeds, not just a commissioner view, as the purpose of the document is to help the market to plan. The group was chaired by the Deputy Director for Integrated Commissioning and included commissioning representatives from Adults Health, Children's and Families, Public Health and the Leeds CCG to ensure that the new document fully reflects the priorities across the different commissioning areas. The Advisory Group met monthly until early March 2019.

3. Main issues

- 3.1 The aim of a Market Position Statement is to summarise supply and demand in a local authority area, and signals business opportunities within the care and support market in that area. They were introduced as part of the Care Act (2014) market shaping duties for local authorities but are a starting, rather than the end point for market facilitation.
- 3.2 The final draft document is attached at Appendix A. The document gives an overview of the strategic context for the city, the evidence base for commissioning (such as how predicted population changes will impact on demand), an overview of the financial picture across the health and care system, our approach to commissioning and quality management, current and future commissioning intentions, the health and care workforce in Leeds and finally, how providers can engage with us.
- 3.3 The IMPS notes the significant numbers of Third Sector and Independent Sector organisations in Leeds and the key role they play in shaping, developing and delivering the vast range of health, care and support services. In accordance with the Inclusive Growth Strategy, the IMPS emphasises the value placed on providers that are good employers and who are committed to providing employment opportunities for people who are often excluded from employment.

3.4 The Council is a signatory to the Ethical Care Charter and has over the last few years demonstrated its commitment to implementing the Leeds Living Wage¹ for home care by increasing the fees paid to commissioned providers and working with them to improve the terms and conditions of employment and pay rates of home care workers.

3.5 Feedback from providers has been sought on the working draft of the new document through a provider consultation event held on 1st March 2019 and a questionnaire circulated in early March. The draft document has also been taken to Third Sector Partnership for their feedback Overall the draft document was really well received, with providers telling us that it gives them a good understanding of the landscape in Leeds and it is a real positive that it is an integrated document. Providers also commented that they felt that the structure of the document works well and that the ethos around working together and taking an asset based approach comes through. The draft document has also been taken to Adults and Health Directorate Leadership Team meeting, the Integrated Commissioning Executive and a specially convened joint scrutiny workshop for comment. Overall the main points of feedback were:

- Clearer articulation of our ways of working, i.e. Think Family; Strength Based/Asset Based; left shift.
- Some case study examples of our commissioning approach in practice.
- Strengthen the evidence base to reflect equality and diversity issues and particularly the State of Women's Health in Leeds report and the State of Men's Health in Leeds report.
- Reference to all pertinent strategies including Drug and Alcohol, Homelessness, and Child Friendly Leeds.
- More emphasis on the use of the Social Value Act.
- Reference to where we may commission regionally.

3.6 The points of feedback have been addressed in this final document, with particular emphasis on our ways of working in 'The Strategic Context', 'Our Approach to Commissioning' and 'Commissioning Intentions'. Case study examples have now been included and identified gaps have been addressed.

4. Corporate considerations

4.1 Consultation and engagement

4.1.1 To ensure that the 'voice' of providers in Leeds was an integral part of this document, an Advisory Group with representatives from a range of third and independent sector providers was set up. The Advisory Group met monthly for several months to help shape the new document.

4.1.2 A wider consultation with Leeds health, care and support providers was held in March 2019; the event was attended by circa sixty people and gave attendees the opportunity to feedback on the draft IMPS. In addition a questionnaire was sent out to providers to offer further opportunity to feedback.

¹ Minimum pay rate agreed with Leeds Homecare Framework providers.

4.2 **Equality and diversity / cohesion and integration**

- 4.2.1 Equality is an integral part of the IMPS, with consideration to how the commissioning process will ensure services and support will meet the needs of people from within protective characteristic groups.
- 4.2.2 An Equality Impact Assessment Screening is attached.

4.3 **Council policies and the Best Council Plan**

- 4.3.1 This document supports the ambition of the Leeds Health and Well-being Strategy that 'Leeds will be the best city for health and wellbeing', with a vision that 'Leeds will be a healthy and caring city for all ages, where people who are the poorest improve their health the fastest'.
- 4.3.2 The IMPS recognises the importance of the Inclusive Growth Strategy and delivering growth that is inclusive, draws on the talents of, and benefits, all of our citizens and communities. The IMPS sets out that all commissioned work will need to demonstrate its contribution to achieving these strategic aims.
- 4.3.3 Climate Emergency

When commissioning services and support we will strengthen the council's requirement in its specifications to minimise the environmental impact and make use of the Social Value Act to ensure this. We commission a wide range of services and support, but in all circumstances we will look to reduce carbon emissions through, for example, greater reliance on electric vehicles, looking for ways to reduce mileage reducing waste, increasing biodiversity, using renewable energy and making buildings energy efficient.

4.4 **Resources, procurement and value for money**

- 4.4.1 There is no spending attached to the publication of the IMPS.
- 4.4.2 The IMPS sets out the commissioning intention to achieve best value and use, sometimes pooled, resources to the best effect.

4.5 **Legal implications, access to information, and call-in**

- 4.5.1 The Care Act 2014 sets out the law around market development in adult social care. It enshrines in legislation duties and responsibilities for market-related issues for the Department of Health, CQC and for local authorities. The Act sets out duties on local authorities to facilitate a diverse, sustainable high quality market for their whole local population, including those who pay for their own care and to promote efficient and effective operation of the adult care and support market as a whole. The IMPS is an important part of this market development requirement.
- 4.5.2 As the IMPS requires Executive Board sign off it is subject to call in.

4.6 Risk management

- 4.6.1 The risk of not having an Integrated Market Position Statement is that we are not fulfilling part of our market shaping responsibilities as outlined in the Care Act.

5. Conclusions

- 5.1 This is the first time that Leeds City Council's Adults and Health Directorate, Children and Families Directorate and NHS Leeds Clinical Commissioning Group have jointly stated our commissioning intentions and vision for care and support services in the coming years. Our Integrated Market Position Statement reflects our commitment to work in partnership across organisations and, where relevant, to jointly commission services to enable us to deliver our shared vision that 'Leeds will be a healthy and caring city for all ages, where people who are the poorest improve their health the fastest'.
- 5.2 There has been thorough involvement and consultation to put together this document, including a steering group and a wider consultation event. Beyond that there has been a questionnaire and the draft document has been presented at various meetings, including the Third Sector Partnership.
- 5.3 This document provides a useful overview and statement of commissioning intentions for providers of social care services including those regulated by the Care Quality Commission (CQC) such as residential and nursing care providers, homecare providers, supported living services, wider services which support well-being of local populations including the third sector, micro and social enterprises, personal assistants, housing, leisure, transport, and information and advice services a range of potential investors in the social care market.
- 5.4 If approved the document will be published electronically and updated annually

6. Recommendations

- 6.1 To approve the Integrated Market Position Statement for publication.
- 6.2 To note that the Director of Adults and Health is responsible for the publication of this document directly following approval.

7. Background documents²

- 7.1 None

² The background documents listed in this section are available to download from the council's website, unless they contain confidential or exempt information. The list of background documents does not include published works.