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01

Executive Summary

Our Market Position Statement for Older People Care and Support Services

Our Market Position Statement for Older People Care and Support Services

The considerable challenges facing public services as a result of decreasing budgets, changing demographic demands and increasing expectations are well known.

This Market Position Statement sets out our regional approach to overcoming these challenges and delivering our shared vision of *improving the health and well-being of older people, no matter how complex their needs, so that they are supported to maintain their independence and live a fulfilling life.*

Over the next five years, we will focus on commissioning services and supporting the local care and support market to enable the following objectives and priorities to be achieved:



WHAT MATTERS TO ME: Listening and working with people in need of care and support to jointly find solutions to meet their needs

- Develop improved assessment, diagnosis and care planning practices which are built on genuine collaboration with older people and their families and carers, so that their plans reflect what is important to them and achieve the outcomes they seek.
- Point of Access services, further develop digital services along with easily accessible telephone, online and face-to-face access points for the region, for both professionals and the public.
- Robustly review and evaluate outcomes to constantly improve the quality of care and support services across the region.



HOME FIRST: Enabling people to live at home, or as close to home as possible, in accommodation appropriate to their needs and where they can live well, thrive and remain independent

- Help build resilient communities with local services, infrastructure and strong community networks to meet local needs where older people live.
- Develop Cardiff and Vale of Glamorgan as a dementia-friendly region.
- Work together in integrated locality services with delegated responsibility for providing multidisciplinary care and support for older people.
- Work together with partners to jointly plan and provide a range of future accommodation options to meet demand and enable people to remain at home for as long as possible.

Our Market Position Statement for Older People Care and Support Services

SUSTAINABLE AND PRUDENT USE OF RESOURCES:



Promoting prevention and early intervention, and developing quality outcomes and value for money solutions which meet care and support needs

- Safely reallocate some of our acute and long-term care budgets towards delivering more effective preventative and well-being care and support services in the community and the home, to prevent the need for more intensive and costly care and support later in life.
- Develop pooled budgets, and, through exploring joint commissioning, identify opportunities to use resources more effectively.



AVOIDING HARM, WASTE AND VARIATION:

To ensure high quality care across all services

- Only use hospitals to diagnose and treat older people.
- Build an integrated, multi-disciplinary workforce that is flexible and responsive to support older people and their families and carers in the community.
- Work across professional and organisational boundaries to provide sustainable services and enable older people to get the care and support which is right for them in the right place, at the right time.
- Outline a clear path that ensures lessons are learned from safeguarding failures, near misses, complaints and poor professional practices.

These five year priorities and the range of specific actions that sit beneath them cannot be achieved by any one organisation alone.

It will be the role of the Cardiff and Vale of Glamorgan Regional Partnership Board to monitor the progress of these five year priorities against our set vision of improving the health and well-being of our older population.



















Introduction

What is the Purpose of this Market Position Statement?

How was this Market Position Statement Developed and How Should it be Used?

What is Our Understanding of an 'Older Person'?

Our Challenges

What is the Purpose of this Market Position Statement?

Cardiff and Vale University Health Board, the City of Cardiff Council, Vale of Glamorgan Council and the third sector (the Partnership) are committed to improving the health and social well-being of older people over the age of 65 years living in Cardiff and the Vale of Glamorgan.

We acknowledge that this can only be achieved by stimulating and supporting a diverse, active care and support market, where innovation and high quality care is encouraged and rewarded, and poor practice is addressed.

This Market Position Statement aims to support these aspirations by bringing together key information about our priorities and upcoming opportunities for the care and support market for older people's services over the next five years. It contains information on:

- Our vision for how we wish to respond to the changing needs for care and support in the future
- Current and projected local demographics, expenditure and activity levels
- The types of services we will be investing/ disinvesting in



How was this Market Position Statement Developed and How Should it be Used?

Developing an effective care and support market for older people's services is not something we can do in isolation. For market shaping to be successful, it must be co-produced with local people, providers and partners.

In 2016, the process began by collecting information from a range of sources in order to understand the current and future projected demand for older people's services across the region, and the state of the care and support market. The purpose of this phase was to gather an evidence base and inform the development of a draft Market Position Statement.

The next fundamental step involved working jointly with local providers and other stakeholders. In July 2017, over 80 stakeholders from the public, private, housing and third sectors took part in a workshop to inform the development of this document and agree the best way forward.



This Market Position Statement is for both existing and potential providers, with the purpose of helping them to shape their business plans to support our vision for the future of our local care and support market. It will help providers to:

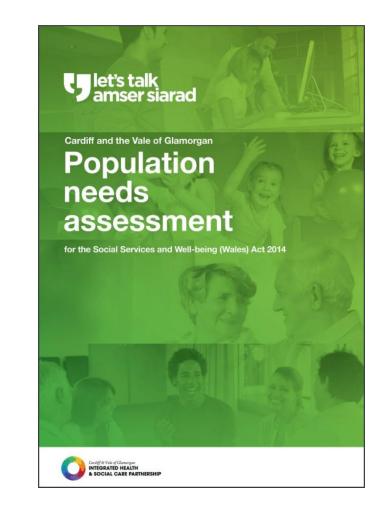


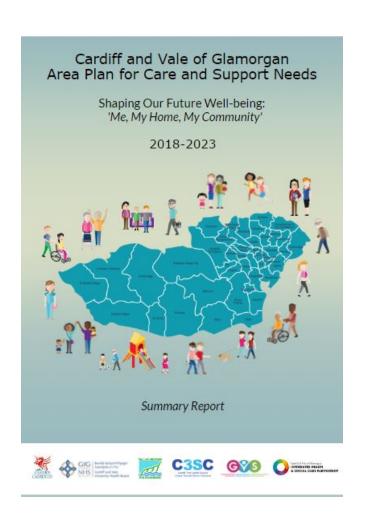
Identify tendering opportunities



Develop their services to meet local need and demand

This document should be read in conjunction with the Cardiff and Vale of Glamorgan Population Needs Assessment ¹ and the Area Plan for Care and Support Needs².





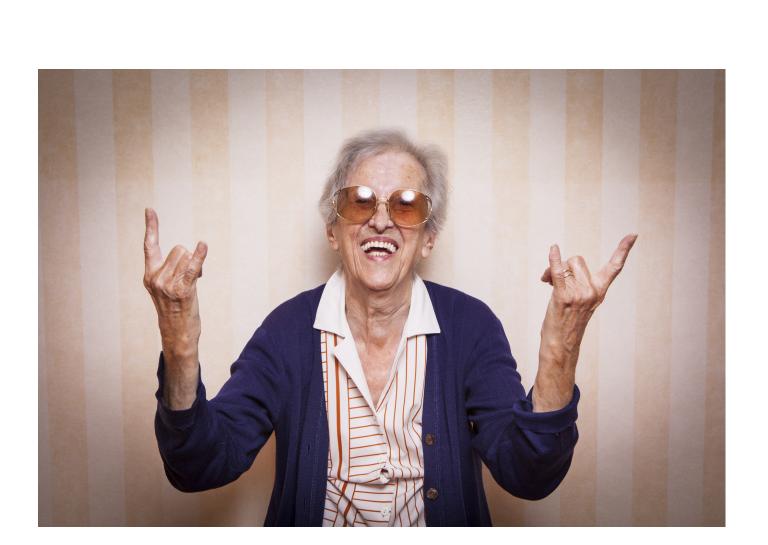
What is Our Understanding of an 'Older Person'?

We acknowledge that a person can be categorised as 'older' when they reach 50 years of age³.

For the purposes of this Market Position Statement, we adopt the age of 65 years and above as the definition of 'older person'. However, of particular interest are those over the age of 85, due to the growing numbers and greater average cost per head to deliver services to people in this cohort.

We do however, recognise that older people are not a homogeneous group that can be easily categorised. Like any other group within our society, every older person will have different interests, expectations and life experiences impacting on their care and support requirements.

The great diversity reflected in our older population will be mirrored in how we plan and commission services going forward.









02 Our Challenges

Cardiff and the Vale of Glamorgan are socially, economically and physically diverse areas.

Yet, they are facing similar challenges in delivering the types of health, housing and social care services needed and wanted by our older citizens:

- A growing older population
- Changing family structures and pressures on unpaid carers
- Rising public expectations
- Persistent issue of inequality within our communities
- Insufficient appropriate housing for older people
- Legislative changes
- Increasing social care costs and demand
- Increasing NHS costs and demand
- Limited integration of services
- Misalignment of current workforce structure to future needs
- Concerns about quality
- Older age people are more likely to have health conditions, many of which are preventable and most of which are manageable



In 2015, Cardiff and the Vale of Glamorgan were home to nearly 500,000 people⁴

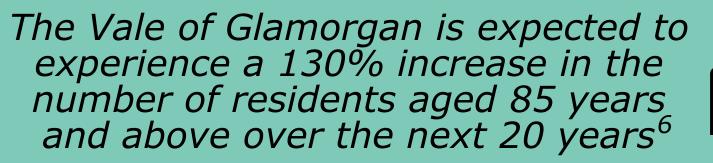
Since 2014, four major pieces of legislation impacting on the care and support market have been introduced



According to the Welsh Local Government Association, Councils across Wales face a £92m deficit in funding for social care in 2017/185



Over the next 20 years, the population of Cardiff is projected to grow faster than all other major British cities apart from London





Key Information About Our Older Population

Our Older Population in Cardiff and the Vale of Glamorgan

Our Older Population by:

Locality

Neighbourhood Cluster

Ward

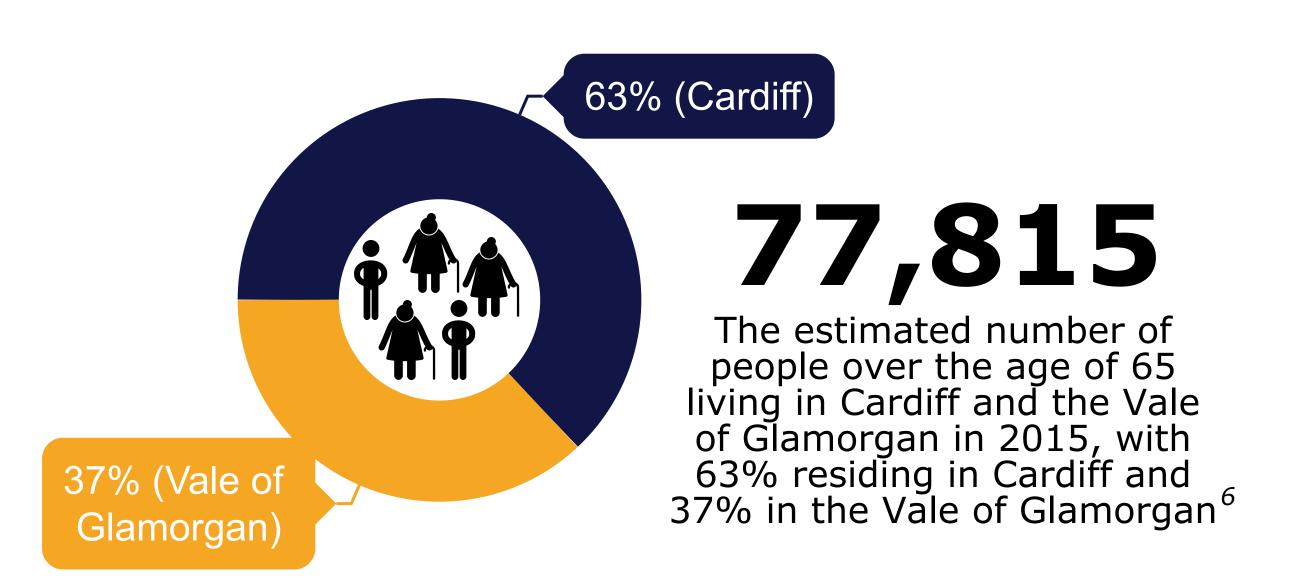
Our Older Population:

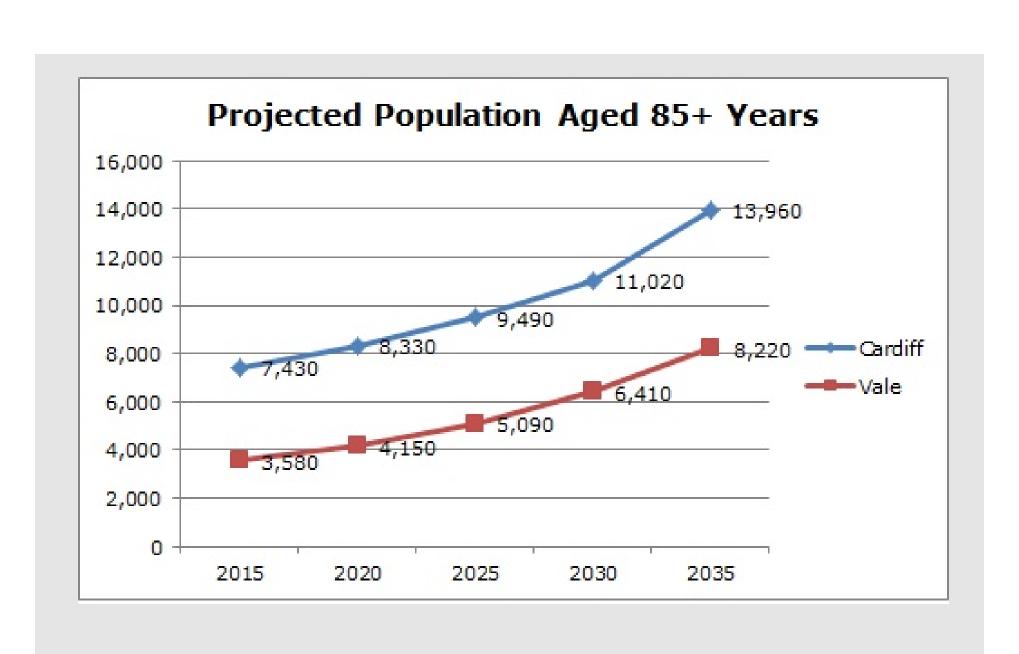
Frailty and Dementia

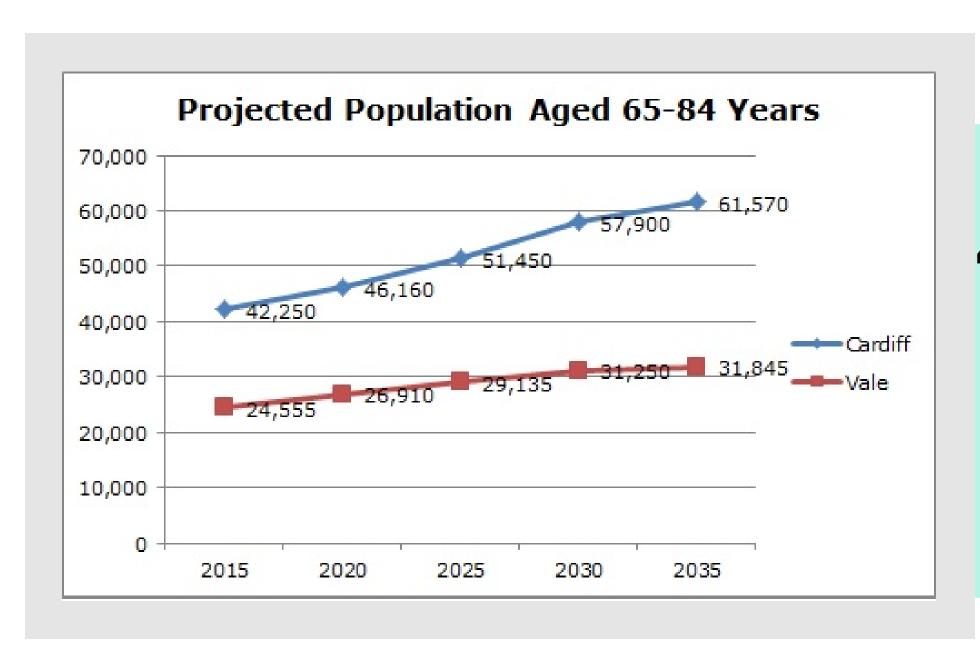
Unpaid Care

What's Important to the Older People Who Use Our Services?

Our Older Population in Cardiff and the Vale of Glamorgan







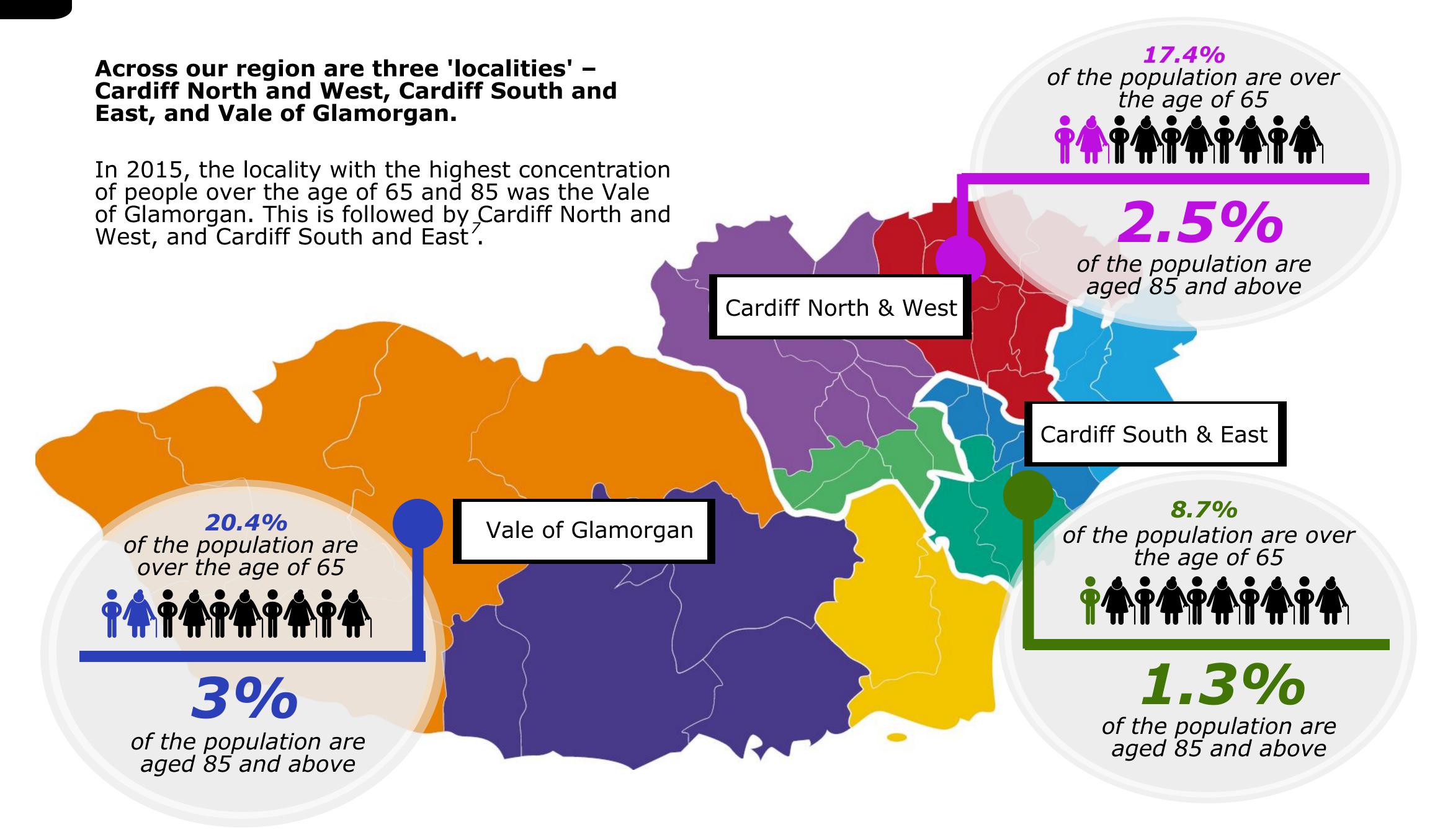
45% & 30%

The projected increase in the 65-84 year old population over the next 20 years in Cardiff and the Vale of Glamorgan, respectively⁶

88% & 130%

The projected increase in the 85+ year old population over the next 20 years in Cardiff and the Vale of Glamorgan, respectively⁶

03 Our Older Population by Locality

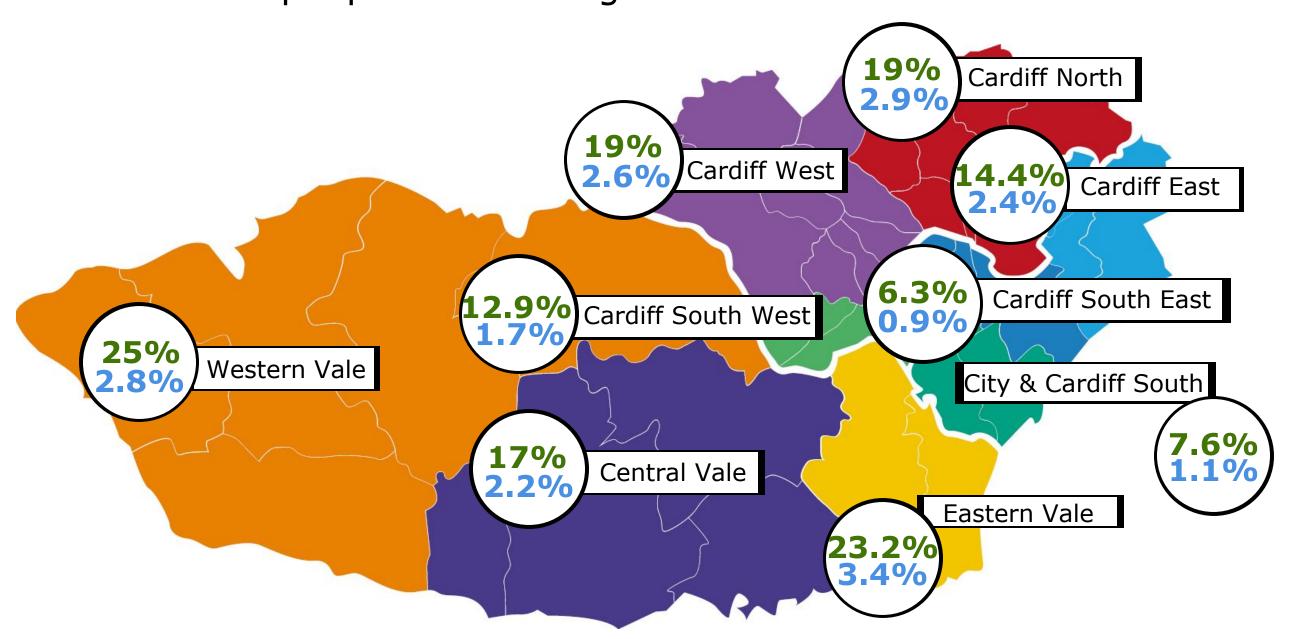


Our Older Population by Neighbourhood Cluster

Within each of our three localities are three 'neighbourhood clusters'.

- In Cardiff North and West are: Cardiff North, Cardiff West and Cardiff South West
- In Cardiff South and East are: Cardiff East, Cardiff South East and City and Cardiff South
- In the Vale of Glamorgan are: Eastern Vale, Central Vale and Western Vale

The figures in **green** represent the percentage of the total population living in that particular area over the age of 65, and the figures in blue are the percentage of the total people over the age of 85⁷.



In Cardiff, the North and West neighbourhood clusters have the greatest representation of people over the age of 65, at 19%. In comparison, only 6.3% of people living in Cardiff South East are aged 65 years and above.

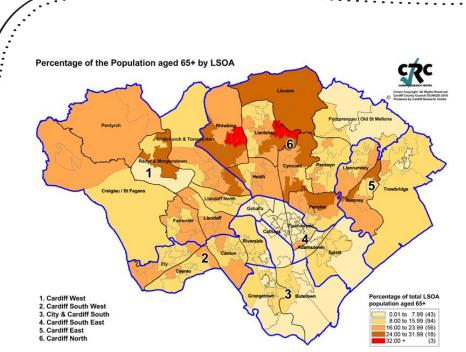
Similarly, Cardiff North has the largest percentage of people over the age of 85 (2.9%). Cardiff South East again has the lowest number of people in this age bracket, at 0.9%.

In the Vale of Glamorgan, the Western and Eastern neighbourhood clusters have the highest rate of people in the 65+ age category across the entire region, standing at 25% and 22.7%, respectively.

Equally, Eastern Vale has more people aged 85 and above than any other neighbourhood cluster across Cardiff and the Vale of Glamorgan, at 3.4%. This is again followed by Western Vale, with 2.8% of all people living within this area in the 85+ years age bracket.

03 Our Older Population by Ward

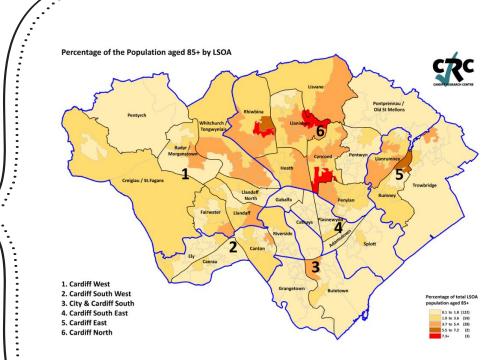
Within each neighbourhood cluster are a number of electoral 'wards', which further demonstrate the differences in demographics across the region. For example:



In Cardiff, parts of Llanishen and Rhiwbina have the greatest number of people over the age of 65 than any other ward, with at least 32% of people living in these areas aged 65 and above.

Figure: Percentage of the Cardiff Population aged 65+ by LSOA⁷

Cardiff



Similarly, parts of Llanishen and Rhiwbina and in this instance the southern area of Cyncoed have the highest rate of over 85s, with at least 7.3% of the population falling within this age bracket.

Figure: Percentage of the Cardiff Population aged 85+ by LSOA⁷

In the Vale of Glamorgan, the southern half of Cowbridge has the largest percentage of over 65s, with at least 31.5% of the population in the 65+ years bracket. Other wards with similar representations of people aged 65 and above include parts of Llanwit Major, Wenvoe and Plymouth.

Figure: Percentage of the 7 Vale of Glamorgan Population aged 65+ by LSOA

Vale of Glamorgan

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The ward in the Vale of Glamorgan with the most rate of people aged 85 and above is the northern part of Plymouth, with at least 8% of the the population identified within this age bracket.

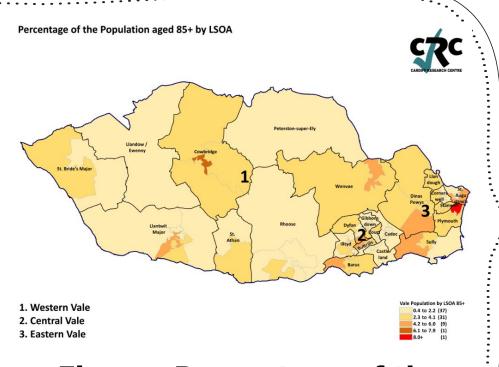


Figure: Percentage of the Vale of Glamorgan Population aged 85+ by LSOA

03 Our Older Population: Frailty and Dementia

Frailty is commonly associated with ageing. People who are frail experience physical weakness, often have complex medical conditions, have a lower ability for independent living and require assistance with every day tasks. Because of the rapid rate of growth in the population aged 65 and above, the number of frail older people is increasing every year.

The table below shows that the Vale of Glamorgan locality will experience the greatest need for additional services as a result of frailty, with a projected 31% increase in demand between 2014 and 2024, followed by Cardiff North and West (25%) and Cardiff South and East (18%).

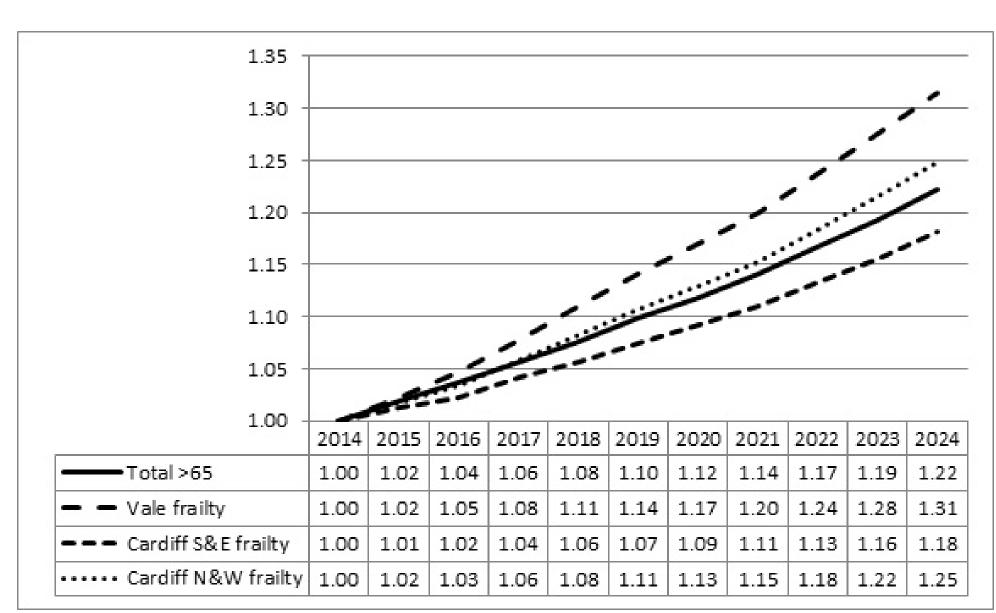


Figure: Increase in demand arising from estimates of frailty from 2014 to 20248

In 2014, there were an estimated 5,162 older people in Cardiff and the Vale of Glamorgan with dementia: 2,542 in Cardiff North and West, 1,709 in Cardiff South and East, and 1,709 in the Vale of Glamorgan.

Similar to rates of frailty, it has been projected that there will be a substantial increase in the level of demand for dementia services in the Vale of Glamorgan (35%) between 2014 and 2024, a 25% rise in Cardiff and North West, and a 16% increase in Cardiff and South East.

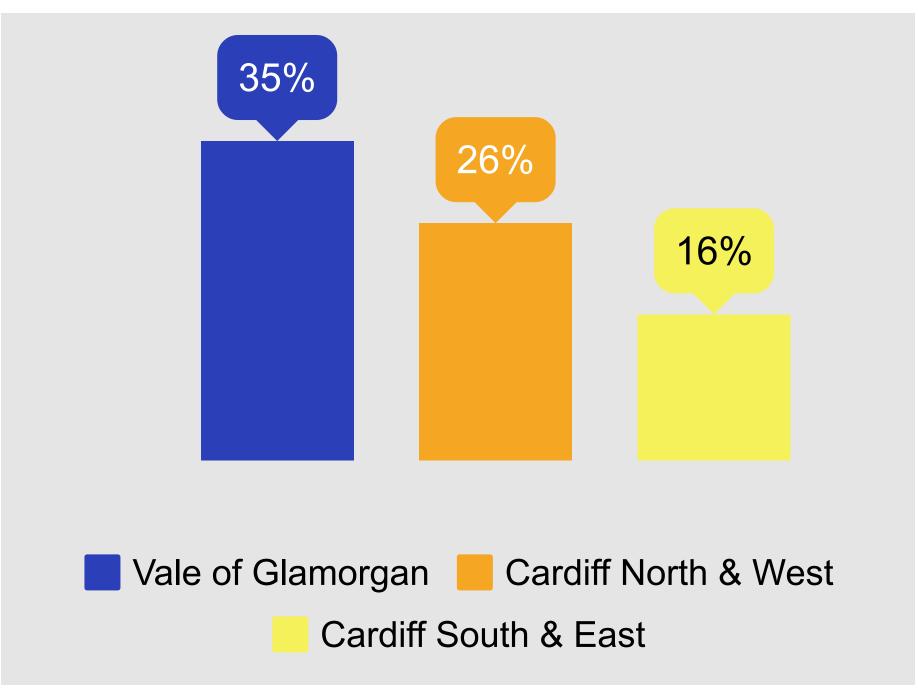


Figure: Increase in demand arising from estimates of dementia from 2014 to 20248

OB Our Older Population: Unpaid Care

In 2015, it was estimated that there were almost 12,000 people over the age of 65 providing unpaid care to a family member or friend in Cardiff and the Vale of Glamorgan. This represents 6.4% of the entire 65+ years population across the region. Over a third (4,399) were providing 50 or more unpaid hours of care every week.

A report by Carers UK^{10} calculated the total economic cost of carers' contributions across Cardiff and the Vale of Glamorgan during 2015 at over £1 billion:

£730m

The estimated economic value of the contributions made by carers in Cardiff in 2015

£309m

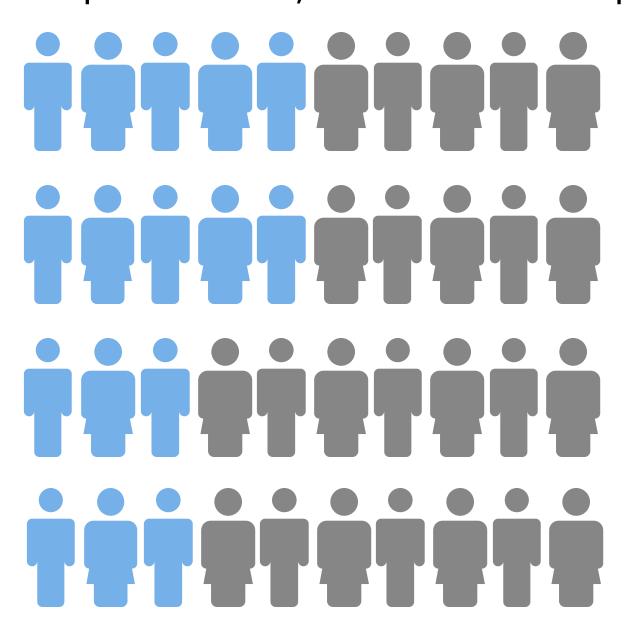
The estimated economic value of the contributions made by carers in the Vale of Glamorgan in 2015





Almost double its 2001 value (£545m)

Other research by Carers UK $(2016)^{11}$ suggests that older carers face multiple barriers as a result of their caring responsibilities, which in turn impact on their own health and wellbeing:



Almost half (49%) of older carers have said that their GP practice hasn't informed them about how to get practical support as a carer

46% have physically injured themselves as a result of their caring role

A third (33%) haven't received any training or information to help them keep well

A third have cancelled treatment or an operation for themselves because of their caring responsibilities

What's Important to the Older People who Use our Services?

Between February 2016 and January 2017, an assessment of the care and support needs of people living in Cardiff and the Vale of Glamorgan was carried out. This involved listening to residents and local professionals, and reviewing information on existing services and population data.

Below are the main care and support needs, prevention issues and key assets raised in our Population Needs Assessment in relation to our older residents.

Care and Support Needs

- Maintenance and sustainability of key services supporting older people
- Access to information and advice, not just online, e.g. 'one stop shop' model
- Integrated management of mental health and physical health issues
- Integration of health, housing and social care
- Social isolation and loneliness while maintaining independence
- Practical help with day-to-day tasks such as shopping and gardening
- Needs of those with dementia and their carers
- Suitable housing for life
- Accessible built environment, including good lighting and toilets
- Increased consistency and quality of care home places commissioned
- Improved transport
- Access to different types of advocacy
- Digital inclusion
- Intergenerational integration in communities

Prevention Issues

- Financial management
- Healthy environment and behaviours
- Falls prevention
- Outcomes-based commissioning for domiciliary care

Assets

- Social interactions
- Physical activity and green spaces
- Volunteering
- Community centres, lunch clubs, churches
- Dementia strategy
- Dementia-friendly communities
- Good relationships with third sector partners
- Intermediate care fund
- Unpaid carers ensure supported
- Private sector e.g. corporate social responsibility
- Social enterprises / alternative delivery models
- Independent living services
- Telecare

04

Our Vision and Strategic Intent

Our Vision

Our Service Model for Older People Services

Our Four Design Principles

04 Our Vision

In response to our understanding of the demography of Cardiff and the Vale of Glamorgan and the challenges facing our region, we have developed a new vision and service model.

Our vision is:

To improve the health and well-being of older people, no matter how complex their needs, so that they are supported to maintain their independence and live a fulfilling life.

As set out in the Social Services and Well-being (Wales) Act 2014, we will achieve this by:

- Improving care and support, ensuring people have more choice and control.
- Improving outcomes and health and wellbeing.
- Providing coordinated, person centred care and support.
- Making more effective use of resources, skills and expertise.

04 Our Vision

Achieving our vision will involve taking a 'whole systems approach' and utilising the combined skills, knowledge, experience and resources of all partners to deliver better outcomes for older people. All partners will be expected to:

- Promote citizen ownership and control over their own personal well-being, creating an independent rather than a dependent care culture.
- Reduce duplication and increase awareness of services delivered across all sectors to older people.
- Reduce the inappropriate use of longer term and more intensive or acute care.
- Provide good quality treatment, care and support when needed.
- Streamline services and care to better meet the individual needs of the older person.
- Maximise the benefits from the resources invested in caring for older people.
- Shift from a deficit-based approach when working and having conversations with older people requiring care and support, and instead consider and build upon their strengths and assets.
- Support older people to live independently and be connected to their home and community, with the aim of reducing the possibility of loneliness and isolation.
- Provide proactive as well as rapid reactive care, considering ways in which an individual's needs can be met through a variety of support within the community and irrespective of their eligibility criteria.





















04 Our Service Model for Older People Services

We will deliver our vision and shape our services under the following Integrated Service Model for Older People. Our service model is structured into five tiers, each delivering a different type of care and support and supporting a greater number of people than the one below:



04. Our Service Model for Older People Services

Tier 1

Independence and Well-being

Services promote prevention, health and well-being, independence and empowerment, recognising that a wide range of social and health needs may have an impact on a person's well-being.

Tier 2

First Point of Contact Stable Non-Complex Care Services provide a first point of contact. They screen and assess, providing early intervention and signposting. Where a person's needs are stable and not complex, services provide routine on-going support.

Tier 3

Intensive and/or Enhanced

Services provide a flexible and coordinated response to a person's rising, unstable need. They provide either an intensive reablement service, or an ambulatory care intervention. Both prevent inappropriate long-term care and avoid hospital admissions.

Tier 4

Long-Term, Stable Complex Care

Services provide for people whose needs are not necessarily low, but are stable. Additional support may be needed to meet daily living needs. Rising complexity can mean care planning by specialist multi-disciplinary teams to avoid unstable acute hospital admission.

Tier 5

Specialist

Services provide for people whose needs are highly unstable and/or for highly specialist assessment and care. Integrated discharge planning supports timely discharge.



A person's pathway through the service model or 'system' will not always be linear. They could move up and down the différent tiers, or jump some altogether, depending on their current needs and situation.

Our intention is to develop the whole pathway of advice, support, care and treatment for older people and their carers and families, to ensure that the right response is given, in the right place and at the right time.

04 Our Four Design Principles

Our future way of working will be underpinned by our four design principles of 'what matters to me', 'home first', 'sustainable resources' and 'avoiding harm, waste and variation'.

WHAT MATTERS TO ME



Listening and working with people in need of care and support to jointly find solutions to meet their needs



SUSTAINABLE AND PRUDENT **USE OF RESOURCES**

Promoting prevention and early intervention, and developing quality outcomes and value for money solutions which meet care and support needs

HOME FIRST



Enabling people to live at home, or as close to home as possible, in accommodation appropriate to their needs and where they can live well, thrive and remain independent



AVOIDING HARM, WASTE AND VARIATION

To ensure high quality care across all services.



Any service developments within these four areas will give due regard to the five United Nations Principles for Older Persons: 'independence', 'participation', 'care', 'self-fulfilment' and 'dignity'



The Current Care and Support Market

Key Regional Statistics:

Health, Housing and Social Care Services

Expenditure

Service Providers

Service Activity

Key Neighbourhood Cluster Statistics:

Demographics

Market Supply

Service Activity

Key Assets



Key Regional Statistics: Health, Housing and Social Care Services

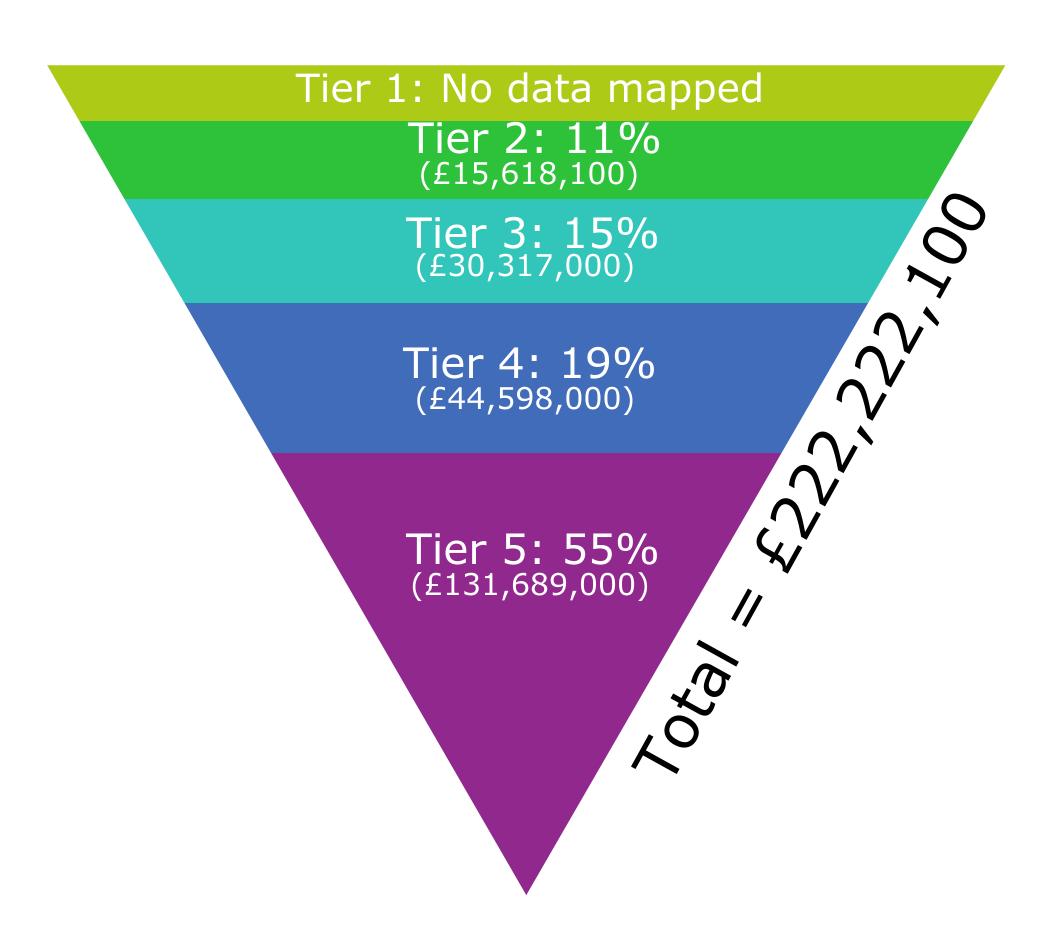
In March 2017, a mapping exercise on a range of health, housing and social care services available to older people across Cardiff and the Vale of Glamorgan was undertaken¹². The expenditure and everyday activity of 40 different services/areas of work were included in the review, the majority of which can be seen below.



05 Key Regional Statistics: Expenditure

In 2015/16, it was estimated that the Partnership spent in excess of £220m* in the local market to deliver health, social care and housing support services to older people.

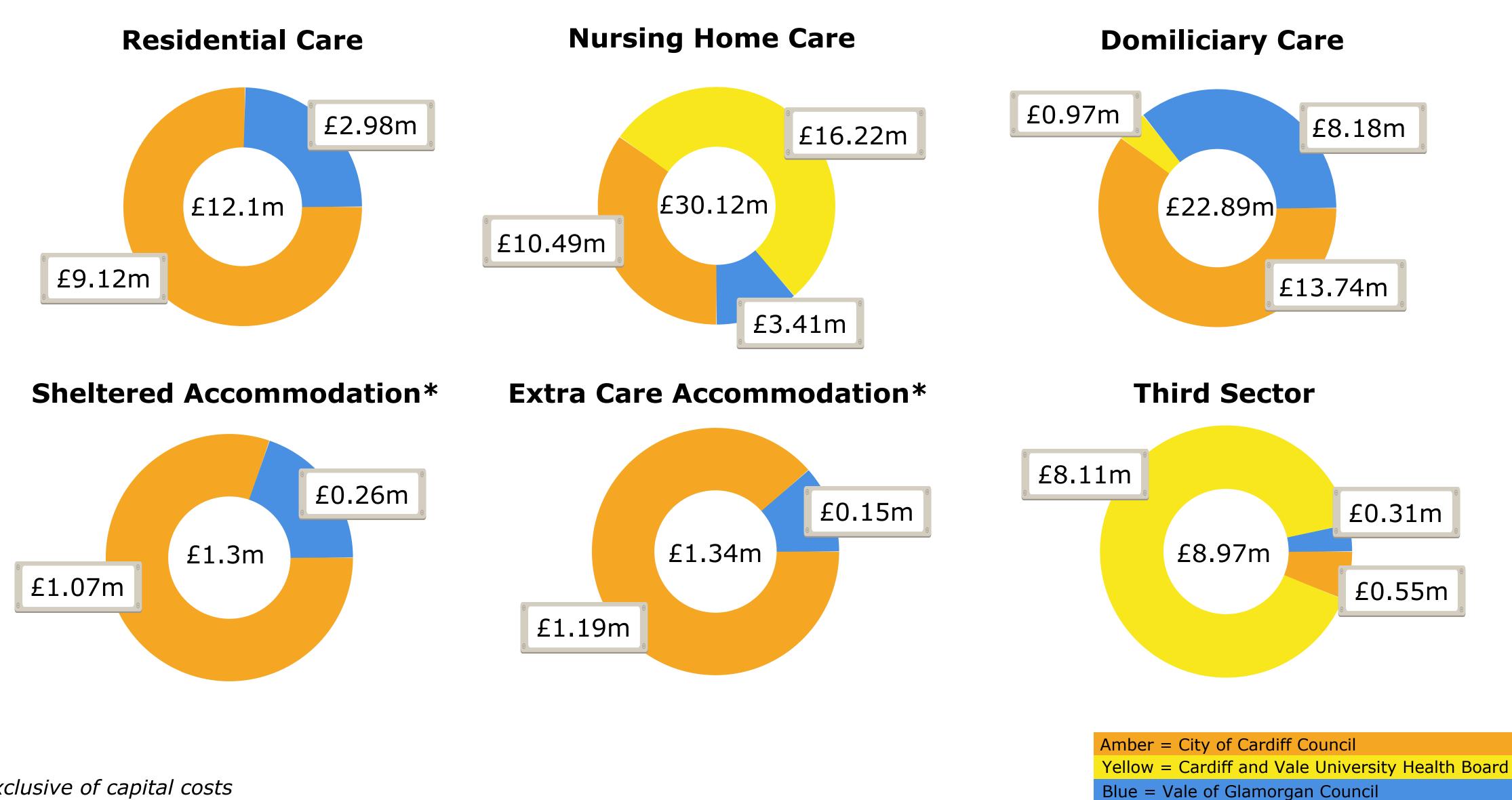
When considered under our proposed Service Model for Older People, it can be seen that over half of all expenditure mapped was spent under the 'specialist' tier, and the least amount recorded under tier two: 'first point of contact/stable non-complex care'.



^{*} The expenditure figure quoted does not include capital housing costs or spend for several services totalling an additional £22m, due to being unable to determine the amount of resources used to provide services to people aged 65 and above only. In addition, no expenditure figures were available for a number of services at the time of publication.

05 Key Regional Statistics: Expenditure

The 2015/16 expenditure for a number of services/sectors considered as key to this Market Position Statement can be seen as follows:



05 Key Regional Statistics: Service Providers

During the mapping exercise, it was found that numerous organisations were providing a range of services to older people across the region, including:

> domiciliary care providers on the Councils' Approved Provider List (68 in Cardiff and 54 in Vale of Glamorgan*)

residential and nursing care homes (38 in Cardiff and 22 in Vale of Glamorgan)



organisations funded through Supporting People to deliver emergency alarm services to older people (9 in Cardiff and 3 in Vale of Glamorgan*)

nurse agencies (14 in Cardiff and 1 in Vale of Glamorgan)



organisations funded through Supporting People to deliver housing related 'floating' support to older people (3 in Cardiff and 2 in Vale of Glamorgan*)

social landlords providing sheltered and extra care accommodation to older people (8 in Cardiff and 3 in Vale of Glamorgan*)



private landlords providing sheltered and extra care accommodation to older people (4 in Cardiff and 0 in Vale of Glamorgan)

* The breakdown does not add up to the total specified, due to some providers operating across both geographical areas

05 Key Regional Statistics: Service Activity

The mapping report also highlighted a number of key findings about service activity in terms of volume and demand*:



The numbers of people accessing home care services in Cardiff and the Vale of Glamorgan had fallen between 2013/14 and 2015/16, but expenditure had risen sharply by £3.5m. This illustrates a trend towards fewer but larger packages of support.



Care homes in Cardiff and the Vale of Glamorgan provided a total of 2,700 places, roughly evenly split between residential and nursing places. Around 950 places (36%) were self-funded and another 50 or so funded by outside authorities.



The data suggests there is an over provision of residential care places in Cardiff and the Vale of Glamorgan and an under provision of nursing home places. There needs to be a further shift of provision from one to the other.



Across Cardiff and the Vale of Glamorgan, it is estimated that an additional 260 nursing home places will be needed by 2025 to meet demand as services are currently configured.



The housing related support offered via the Supporting People Programme Grant played an important role in enabling older people to continue living safely in their current accommodation. Nearly 200 people aged 65 years and above were in receipt of 'floating support'; 122 in Cardiff and 77 in the Vale of Glamorgan.



In 2015/16, there were nearly 1,300 people in Cardiff and the Vale of Glamorgan on the waiting list for sheltered accommodation. Once older people are allocated a tenancy, they stay on average for 7-8 years.



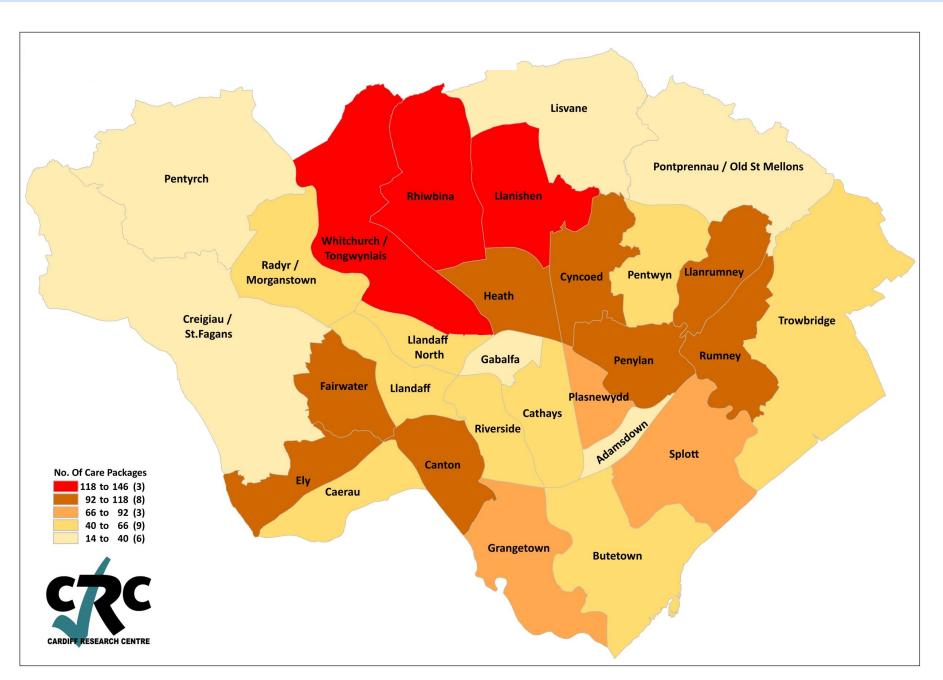
There was a shortage of housing options for older people who need adapted properties.

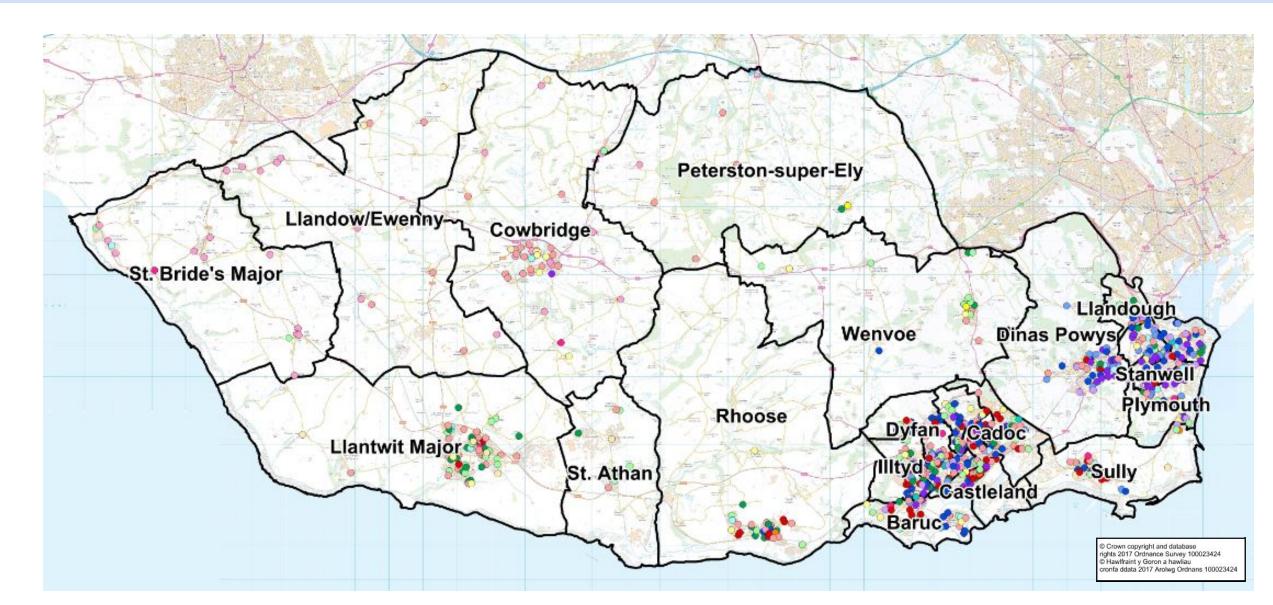


Cardiff had the highest level of direct payments recipients in Wales as a proportion of all those receiving social care services (12%). The Vale of Glamorgan had just over 6% and was much nearer the all-Wales average.

05 Key Regional Statistics: Service Activity

Number of Active Domiciliary Care Packages





For all ages in the Vale of Glamorgan as at 30th November 2017

Dinas Powys (Eastern Vale) - 18 applicants

For people aged 65+ years in Cardiff as at 1st August 2017

Morganstown (Cardiff West) - 167 applicants

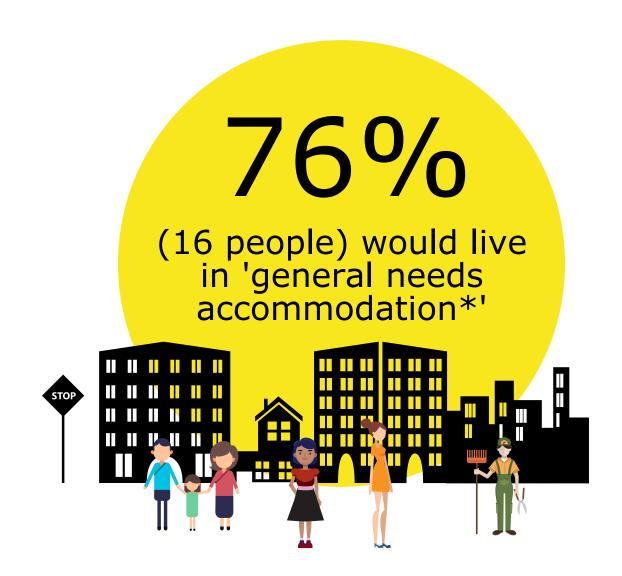
Top 5 Preferred Areas for Sheltered Accommodation Expressed by 65+ Years Applicants on Council Waiting List

5

05 Key Regional Statistics: Service Activity

In May 2017, Cardiff Council undertook a small study with 21 people aged 50 years and above on their waiting list for accommodation about their preferred future housing arrangements¹⁵. Mainly representing the 50-59 year old age bracket, some of the key findings to emerge from the conversations were:







"We don't feel old enough for 'old' people accommodation. We want housing that is for 'young' old people!"

"I want to maintain my independence...I don't mind if there is also a communal area, but don't want to end up somewhere with a room full of wing back chairs and bingo!"

"I want to find a secure, long-term home and something mobility friendly"

^{*} Designated accommodation: Housing open to 'older' people only, typically aged 50 years and above. General needs accommodation: Housing open to the whole community, regardless of age. Sheltered accommodation: Housing with communal facilities, typically open to people aged 60 years and above.



Key Neighbourhood Cluster Statistics: Demographics

The next three graphics show each of the 9 neighbourhood clusters that sit within our 3 localities. Drawing on our preferred neighbourhood cluster approach, further analysis on a number of key features of the care and support market deemed as essential for the future commissioning of older people's services has been conducted.

Calculating a regional average has enabled us to identify the provision in each neighbourhood cluster that requires prioritisation.

This graphic presents some key statistics about the demography of our older population, which can have implications on how services are designed and delivered:



% total 18+ population aged 85+ in $2035^{6,7}$



Number of 85+ years population with dementia in 2035 6,7



% lone person households for 65+ years population ¹⁶



% people aged 65+ years providing 50 or more hours of unpaid care a week 17



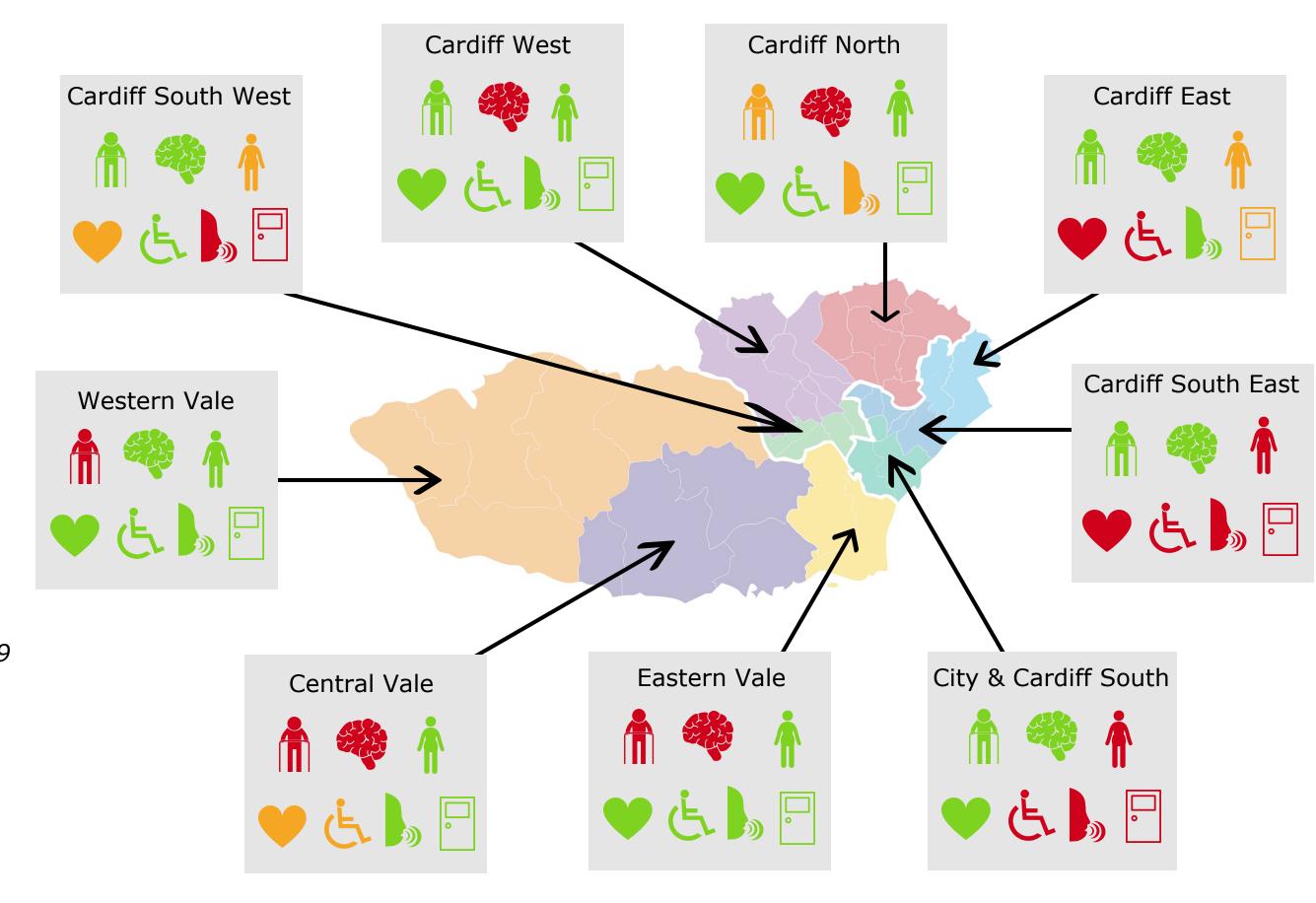
% people aged 65+ years whose day-to-day activities are limited a little or a lot 18



% people aged 65+ who do not report English or Welsh as their main language 19



% homes that are not owner occupied for 65+ years population ²⁰





Key Neighbourhood Cluster Statistics: Demographics



3 of the 9 neighbourhood clusters (which together make up the entire Vale of Glamorgan region) showed above average regional rates in the projected size of the 85+ years population in 2035, ranging from 7.4% to 4.7%. The highest rate noted for Cardiff was in Cardiff North, at 4.3%.



4 of the 9 neighbourhood clusters reported an above average projected rate of people aged 85 and above with dementia in 2035, which includes the highest two rates of 1,212 people in Cardiff North and 760 people in Central Vale.



2 of the 9 neighbourhood clusters reported higher than average levels of lone person households occupied by the 65+ years population, with the highest being 72% in Cardiff South East. In comparison, the lowest rate reported was 46% in Western Vale.



2 of the 9 neighbourhood clusters had higher than average levels of the 65+ years population providing more than 50 hours of unpaid care per week. These were Cardiff East at 8.2% and Western Vale at 5.5%.



3 of the 9 neighbourhood clusters showed an above regional rate of people aged 65+ years whose daily activities were limited a little or a lot, all of which were clustered in the south east region of Cardiff. City and Cardiff South showed the highest rate at 69%, and Cardiff South West the lowest at 28%.



3 of the 9 neighbourhood clusters reported higher than the average rate of the 65+ years population who do not report English or Welsh as being their main language, with City and Cardiff South showing the highest at 14.7%. This is compared to 0.4% in Western Vale and 0.5% in Cardiff East.



3 of the 9 neighbourhood clusters had an above average non-owner occupancy rate for the 65+ years population, with the highest ranging from 39% in City and Cardiff South and 34% in Cardiff South East, and the lowest of 11% in Cardiff North and 12% in Western Vale.

05

Key Neighbourhood Cluster Statistics: Market Supply

This graphic presents some key statistics about market supply, which can impact on our ability to effectively commission and deliver care and support services to older people:



General residential and nursing care home beds per 1000 65+ years population²¹



Residential elderly mental illess (EMI) care home beds per 1000 65+ years population ²¹



Nursing EMI care home beds per 1000 years 65+ population²¹



% of care home placements made by local authorities/health²¹



Vacant EMI care home beds per 1000 65+ years population²¹



Designated council and RSL units per 1000 65+ years population ²²



Sheltered council, RSL and private units per 1000 65+ years population ¹²



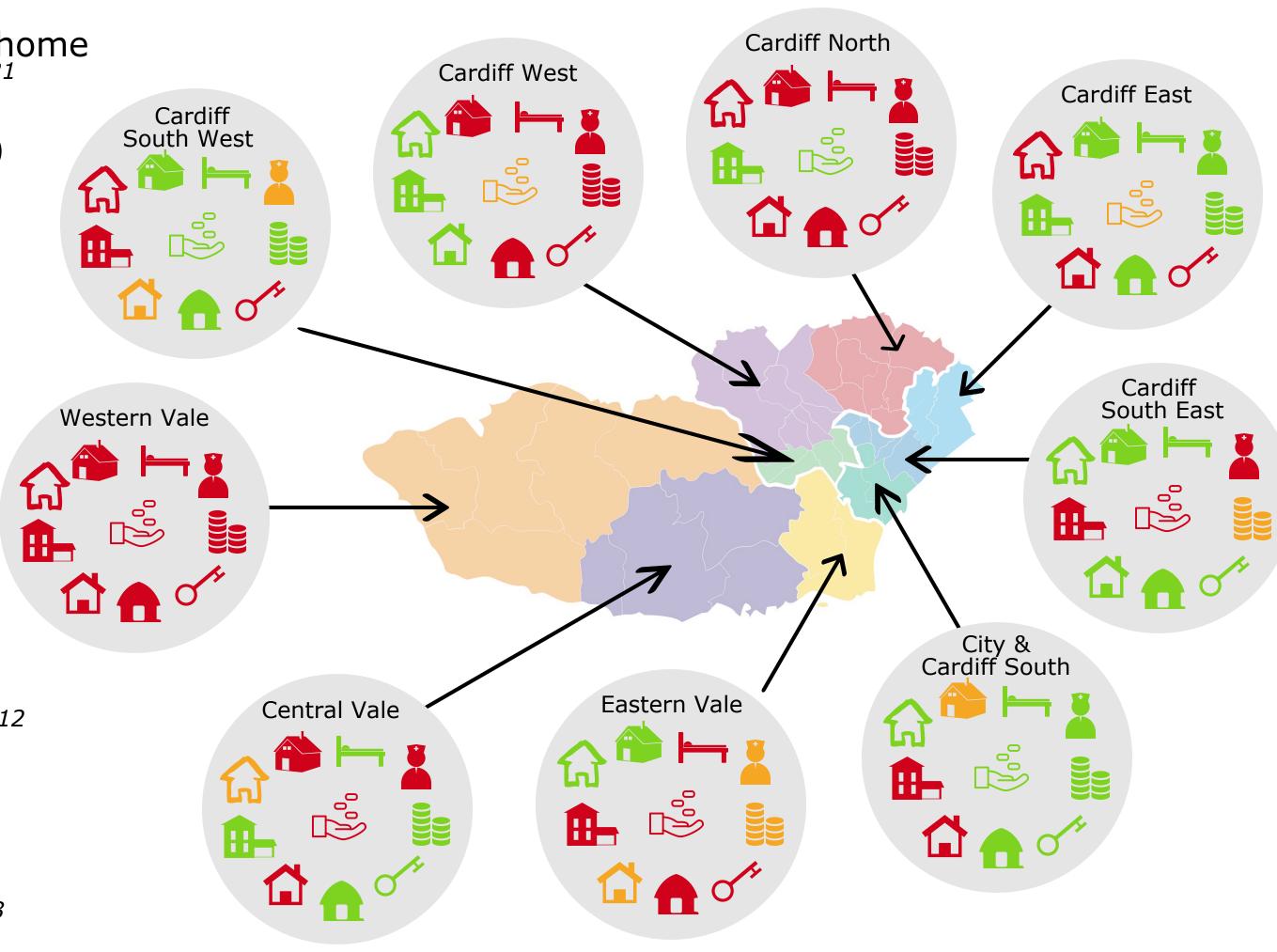
Extra care RSL and private units per 1000 65+ years population ¹²



Number of step up/step down units ²³



% direct payment holders per 65+ years population ²⁴



Green = Average or above Amber = Up to 9.9% below average Red = More than 10% below average

Key Neighbourhood Cluster Statistics: Market Supply



4 of the 9 neighbourhood clusters showed lower than average regional rates of general residential and nursing care home beds per 1000 65+ years population, with Western Vale reporting the lowest at 13 beds. This is compared to the highest rate of 51 beds in Cardiff South East.



4 of the 9 neighbourhood clusters had fewer than average residential EMI beds per 1000 65+ years population, with Cardiff West showing the lowest at 4 beds and Western Vale at 6. In comparison, Cardiff South East reported the highest at 18.



2 of the 9 neighbourhood clusters had no nursing EMI provision (Cardiff South East and Western Vale), and Central Vale only had 0.4 beds per 1000 65+ years population. Conversely, there were 20 beds per 1000 65+ years population in City and Cardiff South.



The number of care home placements made by local authorities and local health boards varied across the region, ranging from purchasing 74% of the total available beds in Cardiff East, and 36% in Cardiff North and 37% in Western Vale.



6 of the 9 neighbourhood clusters had less than 1 vacant EMI bed per 1000 65+ years population. In comparison, Cardiff South East reported the highest at 4.6 vacant EMI beds.



4 of the 9 neighbourhood clusters had a lower than average rate of designated accommodation per 1000 65+ years population. The lowest rates across the region were 12 in Cardiff North and 20 in Western Vale. The highest reported in Cardiff was 94 in Cardiff East, and 50 in Central Vale within the Vale of Glamorgan.



6 of the 9 neighbourhood clusters had less than the average number of sheltered units per 1000 65+ years population, with the lowest noted as 7 in Western Vale and 24 in Cardiff East. The highest reported was 103 units per 1000 65+ years population in Cardiff South East.



5 of the 9 neighbourhood clusters had no extra care accommodation, meaning there is no extra care provision available within these areas: Cardiff South East, City and Cardiff South, Cardiff South West, Eastern Vale and Western Vale.



4 of the 9 neighbourhood clusters had no step up/step down accommodation, with the remaining areas having a maximum of 2 accommodation units per area.



3 of the 9 neighbourhood clusters had an above average rate of direct payment holders per 1000 65+ years population, all of which were located in Cardiff: City and Cardiff South, Cardiff North and Cardiff South West.



Key Neighbourhood Cluster Statistics: Service Activity

This graphic presents some key statistics about service activity, which can help us understand levels of demand:



% 65+ years applicants on council sheltered accommodation waiting list indicating a preference to leave current neighbourhood cluster ^{13,14}



% total available care home beds occupied by self-funders ²¹



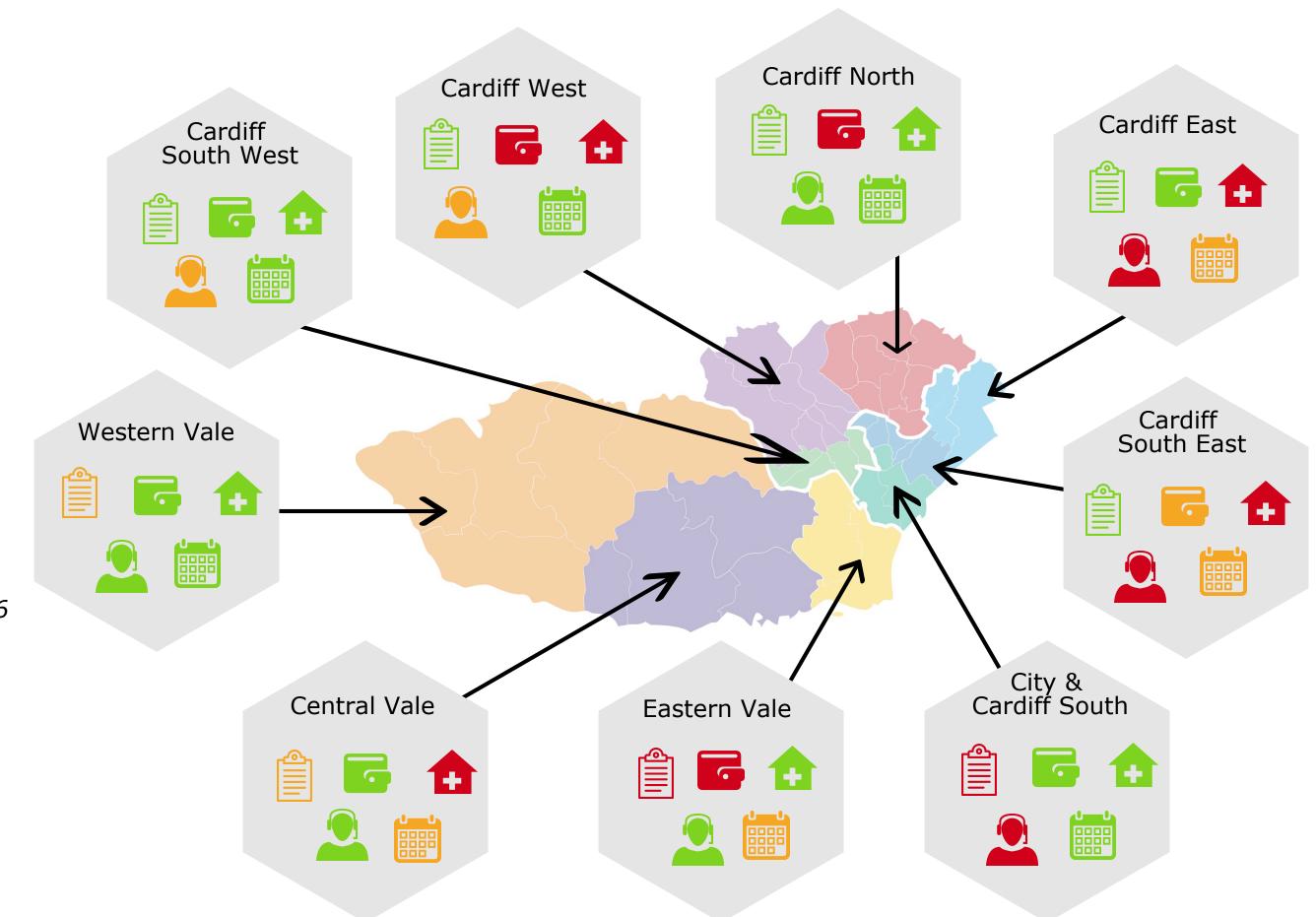
Delayed Transfers of Care per 1000 65+ years population ²⁵



Telecare users aged 65 years and above per 1000 65+ years population ²⁶



People on care home waiting list per 1000 65+ years population²¹



Green = Average or below Amber = Up to 9.9% above average Red = More than 10% above average



Key Neighbourhood Cluster Statistics: Service Activity



2 of the 9 neighbourhood clusters reported higher than average levels of 65+ years applicants on the councils' waiting list for sheltered accommodation wanting to move out of their current neighbourhood cluster. The highest was 33% in City & Cardiff South, and the lowest was 1% in Cardiff East.



3 of the 9 neighbourhood clusters had higher than average levels of care home self-funders, ranging from 51% in Cardiff North to 38% in Eastern Vale. In comparison, Central Vale had the lowest rate at 22%.



4 of the 9 neighbourhood clusters showed above regional average rates of Delayed Transfers of Care, with the highest noted in Central Vale at 34.3 cases per 1000 65+ years population and Cardiff East and Cardiff West at 19.6 cases. This is compared to 7.3 cases in Cardiff North and 7.9 in Western Vale.



4 of the 9 neighbourhood clusters had above average regional levels of people waiting for a care home placement per 65+ years population, with the highest noted at 7.3 and 7.2 in Central and Eastern Vale, respectively, and the lowest of 1.8 in Western Vale and Cardiff West.



3 of the 9 neighbourhood clusters had an above regional rate of telecare users, with the highest reported for Cardiff South East at 129 per 1000 65+ population. The lowest was in Western Vale, at a rate of 50.

Overview of Key Neighbourhood Cluster Statistics: Demographics

These next three tables provide an overview of the key priorities by neighbourhood cluster.

Demographics.	% aged 85+ in 2035	# aged 85+ with dementia in 2025	% lone person households 65+ years	% 65+ years providing 50+ hours unpaid care	% 65+ years with limited day-to-activity	% 65+ years with Welsh or English as second language	% 65+ years who do not occupy own home
CN	- 4.3%	1,212	52%	5.6%	52%	3.6%	11%
CE	3.6%	376	62%	8.2%	<u>^</u> 68%	0.5%	<u>^</u> 29%
CSE	2 1.4%	2 67	72%	7.4%	67%	6.7%	1 34%
CCS	1.6%	181	70%	5. 5%	6 9%	14.7%	<u> 39%</u>
CSW	2.5%	399	- 65%	6.9%	28%	4.4%	1 31%
CW	3.9%	655	58%	6.3%	6 56%	21.1%	② 18%
EV	7.4%	<u>^</u> 665	S 55%	6.1%	53%	0.7%	② 15%
CV	4.7%	760	56%	7.1%	59%	0.7%	22%
WV	6 %	⊘ 358	46 %	5.5%	47%	0.4%	2%
Reg. Ave	4%	545	58%	6.5%	55%	3.6%	23%

Overview of Key Neighbourhood Cluster Statistics: Market Supply

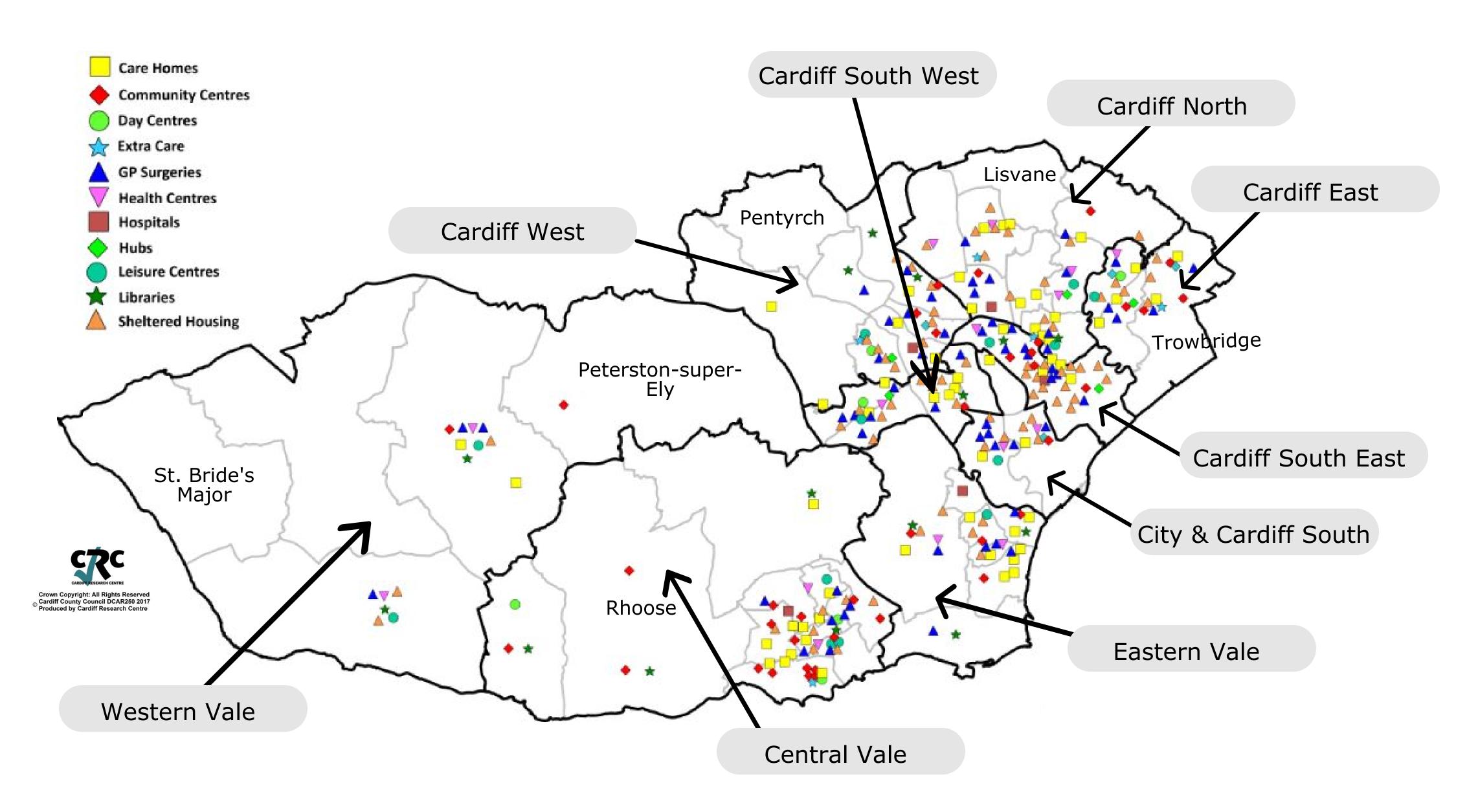
Name of the state	General care home beds per 1000 65+ years	Residential EMI beds per 1000 65+ years	Nursing EMI beds per 1000 65+ years	% care home placements made by LA/LHB	Vacant EMI beds per 1000 65+ years	Designated council and RSL units per 1000 65+ years	Sheltered council, RSL and private units per 1000 65+ years	Extra care RSL and private units per 1000 65+ years	# step up/ step down units	% direct payment holders per 1000 65+ years
CN	18	7	4	<u>36</u> %	0.7	12	<u>2</u> 7	6	0	6.7
CE	② 26	13	② 14	74%	<u> </u>	94	<u>^</u> 24	⊘ 3	<u>0</u>	<u>-</u> 6.2
CSE	§ 51	18	0	54%	4.6	⊘ 75	② 103	0	2	4.3
ccs	<u>-</u> 25	14	2 0	69%	2	5 4	<u>25</u>	0	2	16.8
CSW	⊘ 32	12	<u>-</u> 5	69%	0.6	6 56	- 34	<u>0</u>	0	6.5
CW	14	4	2	41%	0.5	<u>29</u>	4 6	⊘ 4	2	<u>-</u> 5.7
EV	34	7	<u>-</u> 5	- 54%	0.5	17	- 33	<u>0</u>	② 2	3.2
CV	19	11	0.4	58%	1.4	5 0	25	⊘ 4	<u>-</u> 1	3.5
WV	13	6	<u>0</u>	1 37%	0.2	<u>20</u>	7	0	0	4.6
Reg. Ave	26	10	6	55%	1.2	45	36	1.8	1	6.4

Overview of Key Neighbourhood Cluster Statistics: Service Activity

A CRIVICA	% 65+ years waiting for sheltered unit wanting to leave current area	% available care home beds occupied by self-funders	Delayed Transfers of Care per 1000 65+ years	Telecare users aged 65+ per 1000 65+ years	People on care home waiting list per 1000 65+ years
CN	13%	<u>\$\ldots\$</u> 51%	7.3	92	2.5
CE	1%	26%	11.9	119	5.3
CSE	9%	34%	18.5	<u>127</u>	4.9
CCS	33%	27%	16.7	107	3.7
CSW	12%	25%	19.6	99	3.3
CW	6%	42%	19.6	96	1.8
EV	19%	38%	15.6	2 70	7.2
CV	- 15%	22%	34.3	81	7.3
WV	<u>-</u> 15%	33%	7.9	50	1.8
Reg. Ave	14%	33%	16.8	94	94

05 Key Assets

This map and the following table provides an overview of the key assets by neighbourhood cluster.



05 Key Assets

	CN	CE	CSE	C&CS	CSW	CW	C Total	EV	CV	WV	V Total	C&V Total
Care homes (LA)	-	-	-	-	-	-	-	1	9	1	11	11
Care homes (third sector)	-	-	-	-	-	-	-	3	-	-	3	3
Care homes (private)	12	5	5	4	7	5	38	5	2	1	8	46
Care home beds (LA)	-	-	1	1	-	-	-	33	64	24	121	121
Care home beds (third sector)	-	-	-	-	-	-	-	120	-	-	120	120
Care home beds (private)	539	285	298	176	355	213	1,866	238	339	30	607	2,473
Community centres	3	4	4	1	3	3	18	4	16	3	23	41
Extra care schemes (RSL)	1	1	-	-	-	1	3	-	1	-	1	4
Extra care schemes (private)	1	-	-	-	-	-	1	-	-	-	-	1
Extra care beds (RSL)	102	15	-	-	1	40	157	1	42	-	42	199
Extra care beds (private)	58	-	-	-	1	-	58	ı	-	ı	-	58
GP surgeries	9	5	10	6	11	8	48	6	7	3	16	68
Health centres	4	1	2	2	2	0	11	2	2	2	6	18

05 Key Assets

	CN	CE	CSE	C&CS	CSW	CW	C Total	EV	CV	WV	V Total	C&V Total
Hospitals	1	0	1	0	0	1	3	1	1	0	2	5
Hubs (including libraries)	1	3	1	1	1	2	9	-	-	-	-	9
Leisure centres	3	1	1	1	1	1	8	1	3	2	6	14
Local authority day centres	0	1	0	0	1	1	3	0	3	0	3	6
Sheltered housing schemes (LA)	1	1	1	2	2	2	9	2	1	2	5	14
Sheltered housing schemes (RSL)	12	5	14	6	10	8	55	3	6	1	10	65
Sheltered housing schemes (private)	8	2	2	-	3	8	23	-	-	-	-	23
Sheltered housing units (LA)	35	33	30	107	75	52	332	187	86	62	335	667
Sheltered housing units (RSL)	363	110	407	140	297	198	1,515	92	192	6	290	1,805
Sheltered housing units (private)	273	70	83	_	107	363	896	_	-	-	-	896
Standalone libraries	1	0	1	0	1	3	6	3	4	2	9	15

Quality

Our Approach to the Quality of Care and Support

The Quality of Our Care and Support Services:

Domiciliary Care in Cardiff

Care Homes in Cardiff

Domiciliary Care and Care Homes in the Vale of Glamorgan

CSSIW Reviews and Inspections

Social Housing in Cardiff and the Vale of Glamorgan

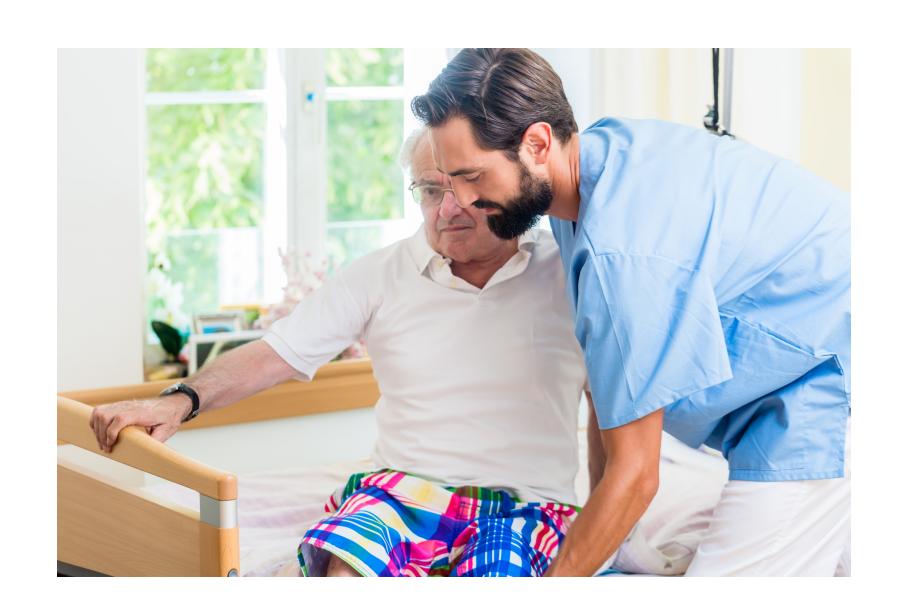


Our Approach to the Quality of Care and Support

In recent years, several new pieces of legislation focused on improving the health and social well-being of (older) people have been introduced, including:

- Social Services and Well-being (Wales) Act 2014
 Well-being and Future Generations (Wales) Act 2015
 Regulation and Inspection of Social Care (Wales) Act 2016
- Public Health (Wales) Act 2017

The also recently published 'A Place to Call Home?'²⁷ report specifically considered four key areas related to the quality of life of older péople living in care homes across Wales.

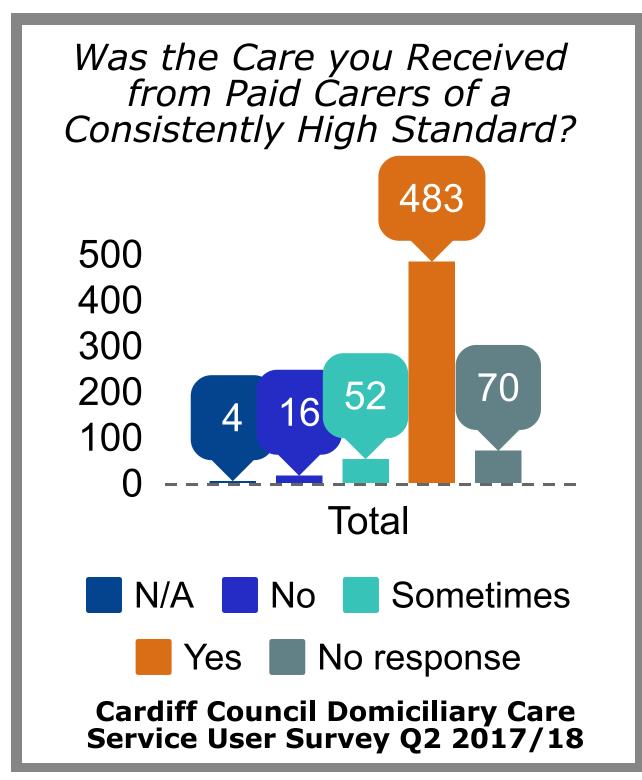


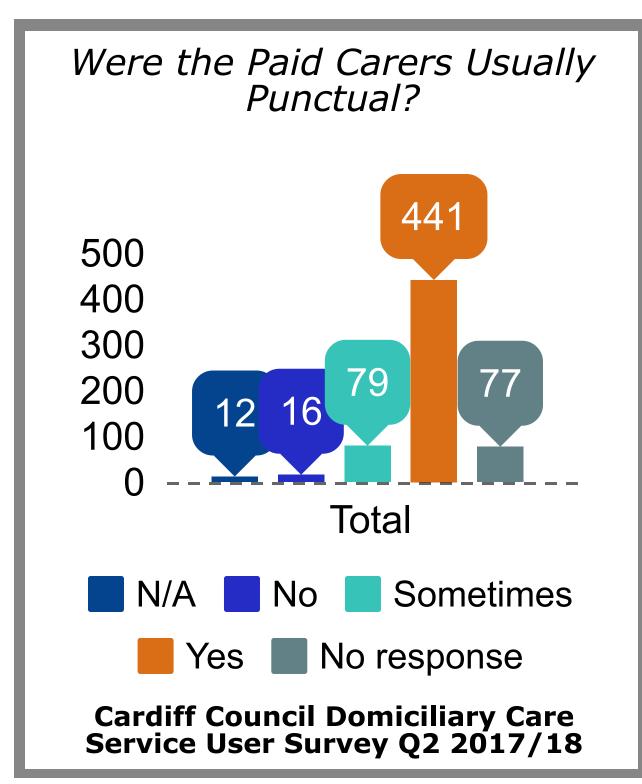


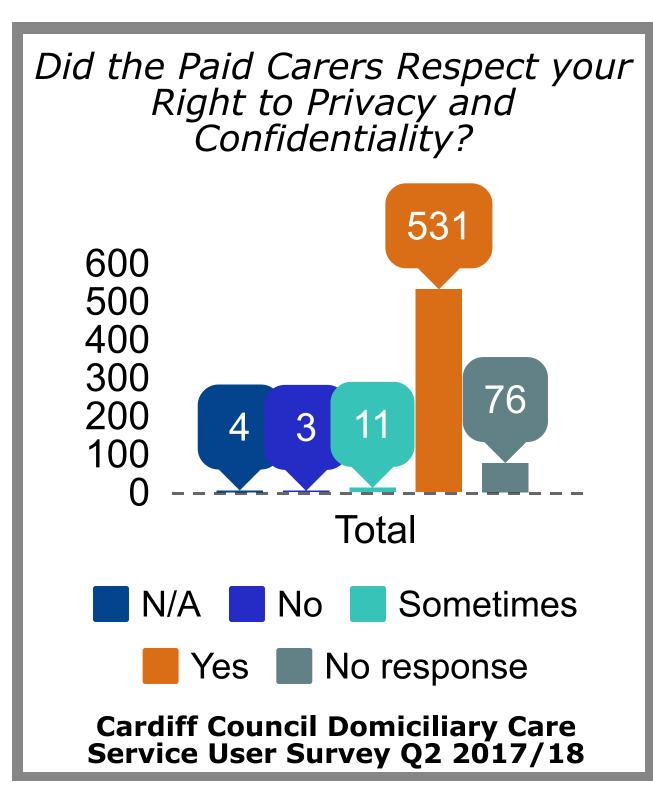
The Partnership is fully committed to fulfilling their legislative responsibilities under the above Acts. To date, this has involved piloting outcomes based commissioning in domiciliary care services in the Vale of Glamorgan, the development of a common contract for care homes across the region, also to be underpinned by outcomes, and the establishment of a joint regional 'whole system' performance dashboard.

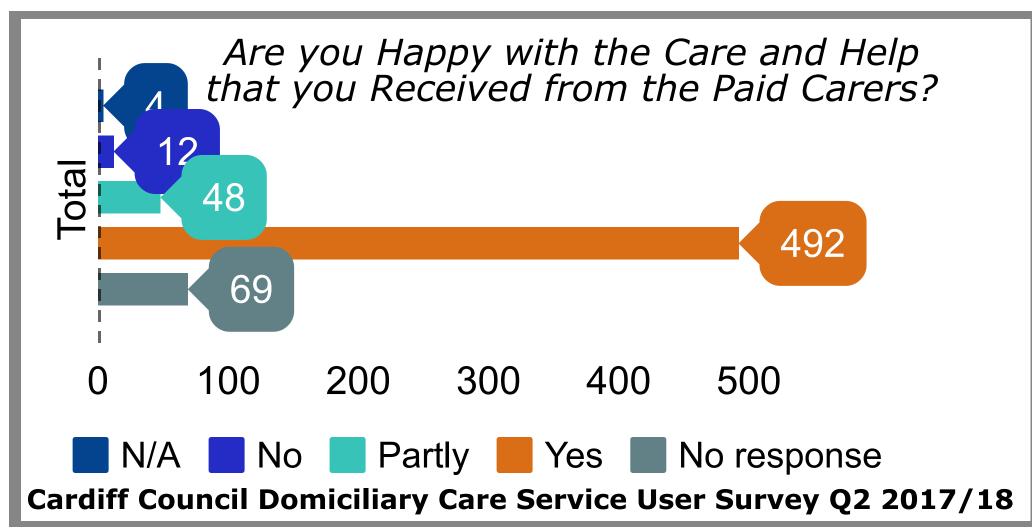
Whilst there is currently no shared approach to quality across the three commissioning organisations, this change is imminent with the pooled budget and shared quality assurance processes for care home accommodation functions required under the Social Services and Well-being (Wales) Act 2014.

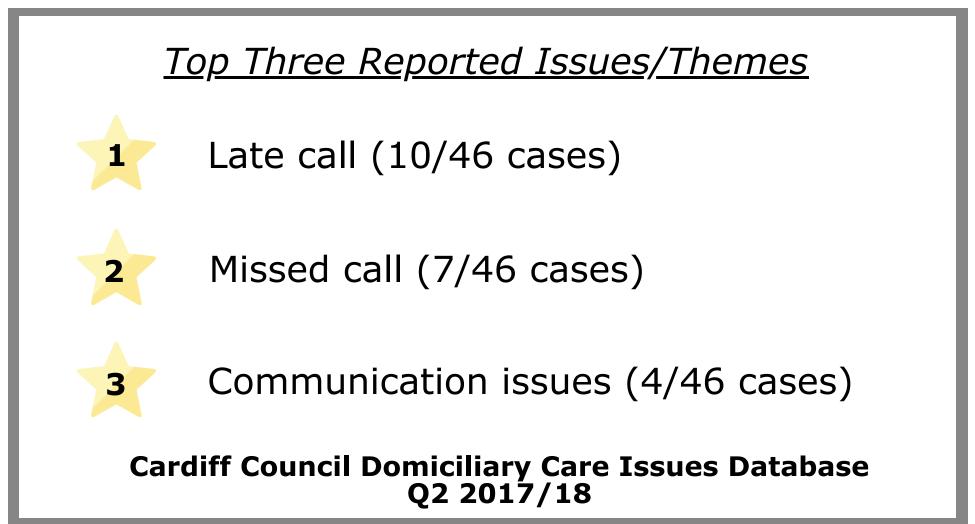
The Quality of Our Care and Support Services: Domiciliary Care in Cardiff



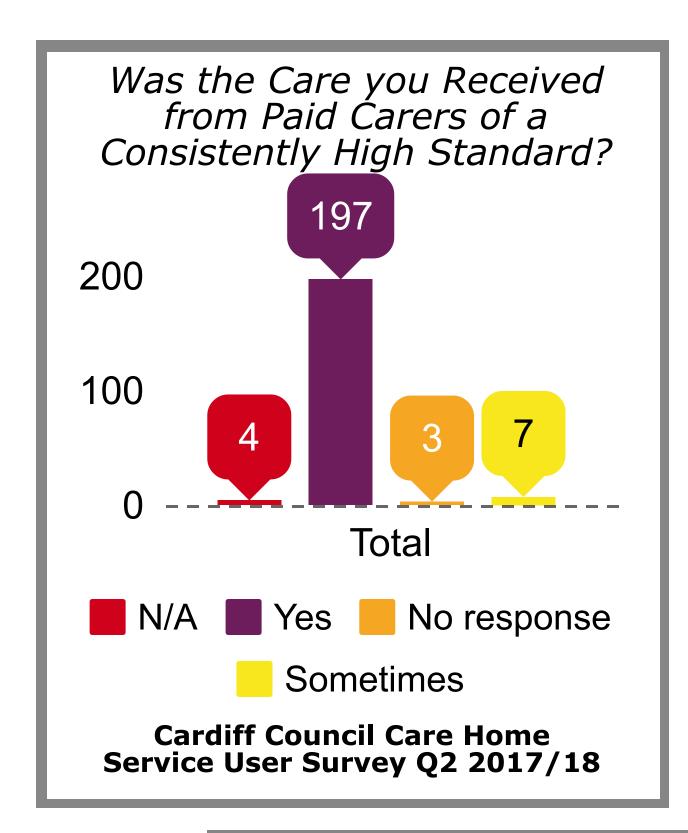


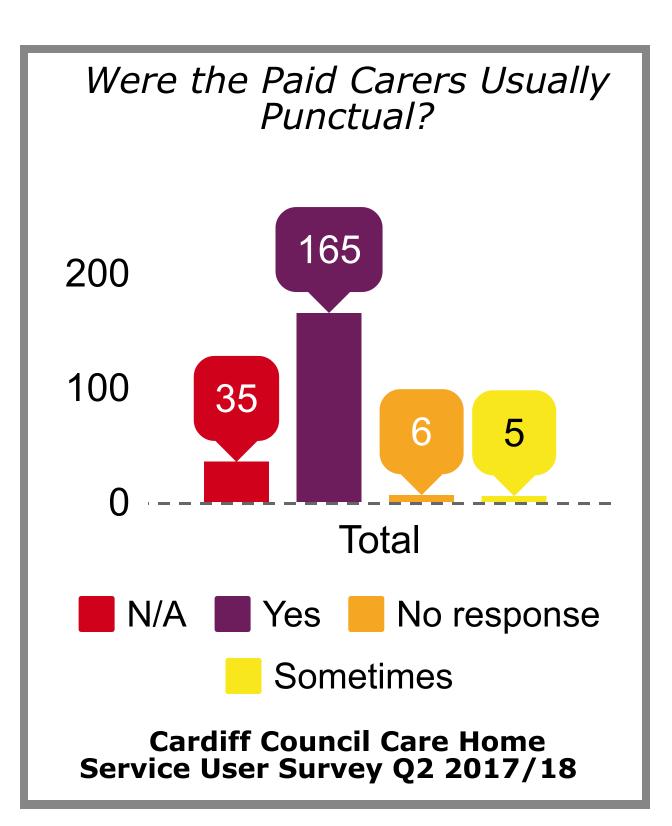


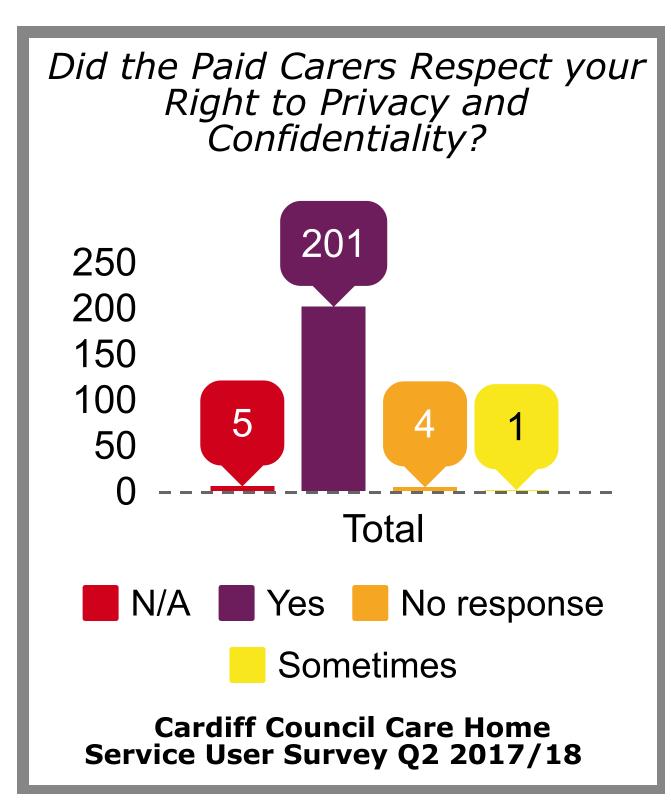


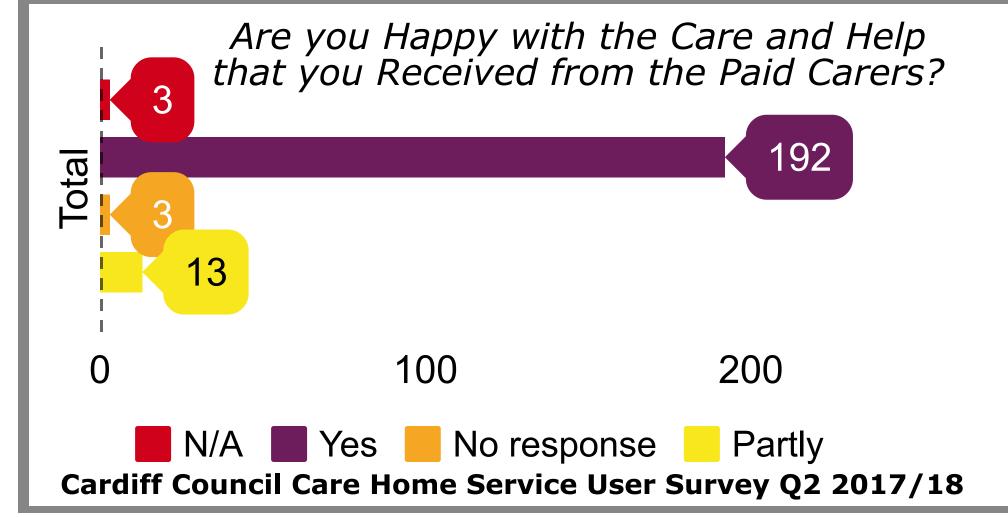


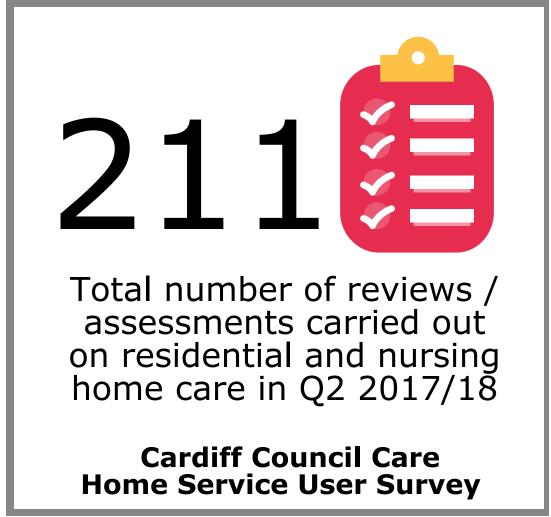
The Quality of Our Care and Support Services: Care Homes in Cardiff







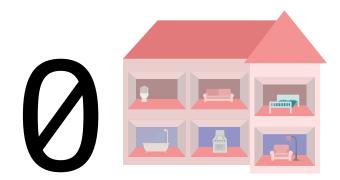




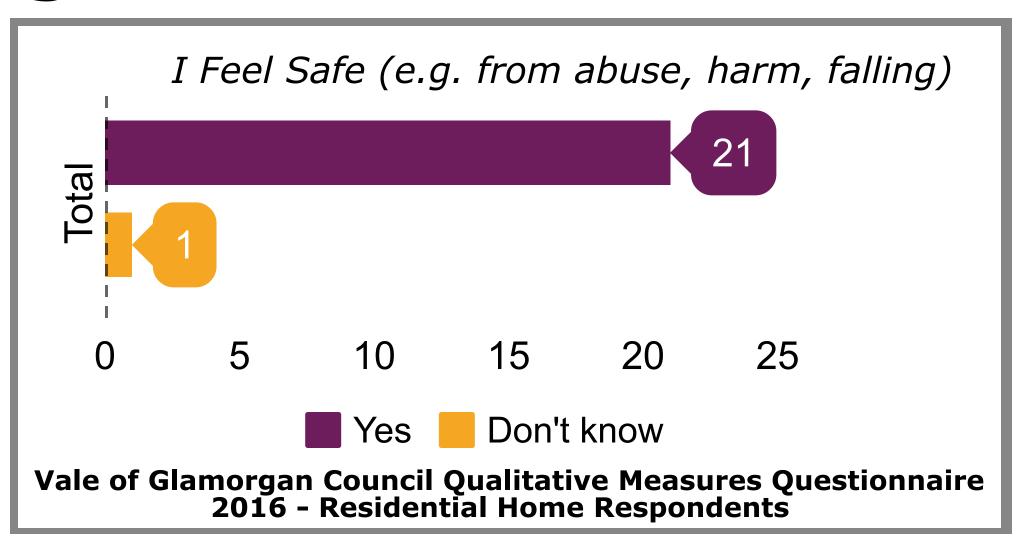
The Quality of Our Care and Support Services: Domiciliary Care and Care Homes in the Vale of Glamorgan

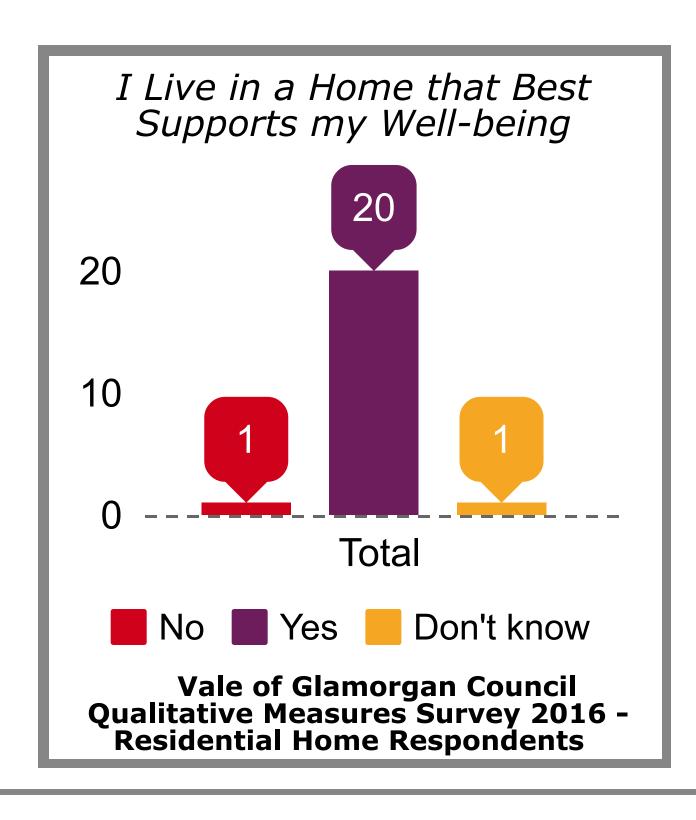


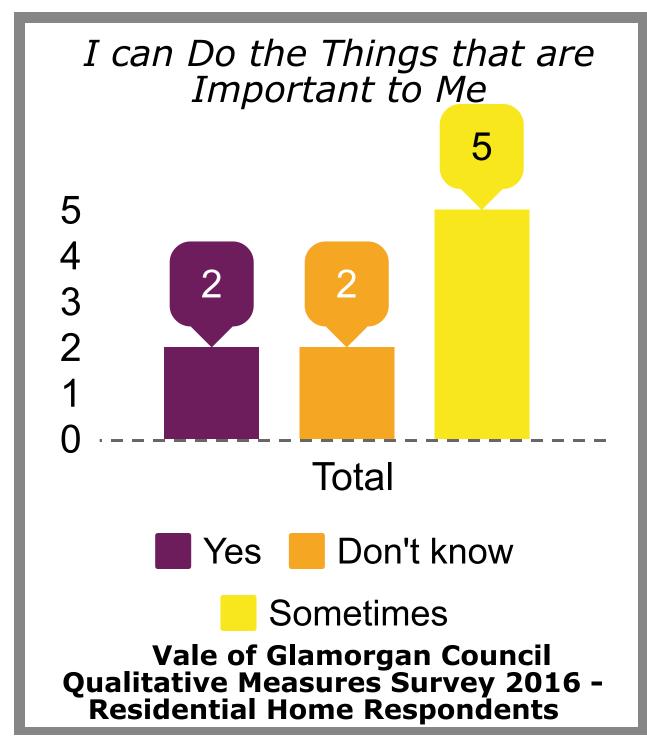
The number of domiciliary care providers subject to Vale of Glamorgan Council's Provider Performance Protocol during Q1 2017/18²⁸

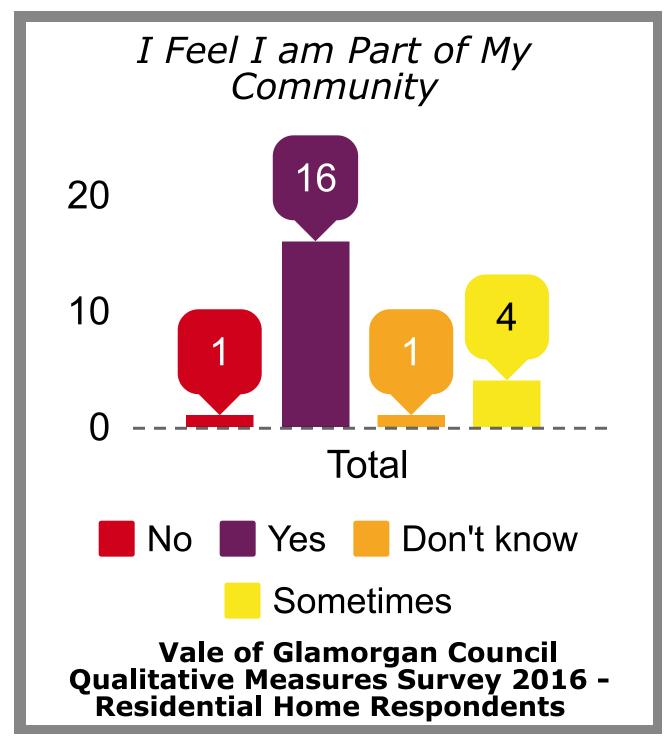


The number of residential and nursing care homes subject to Vale of Glamorgan Council's Provider Performance Protocol during Q1 2017/18²⁸



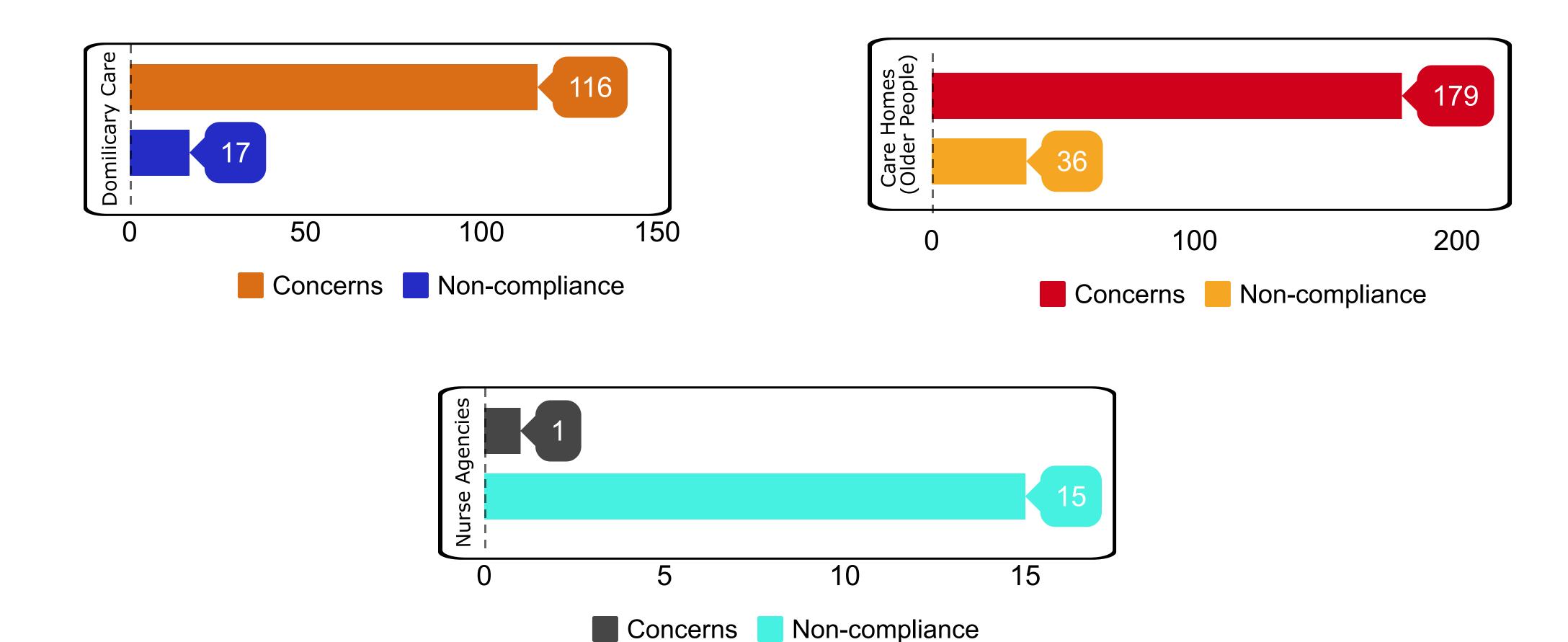






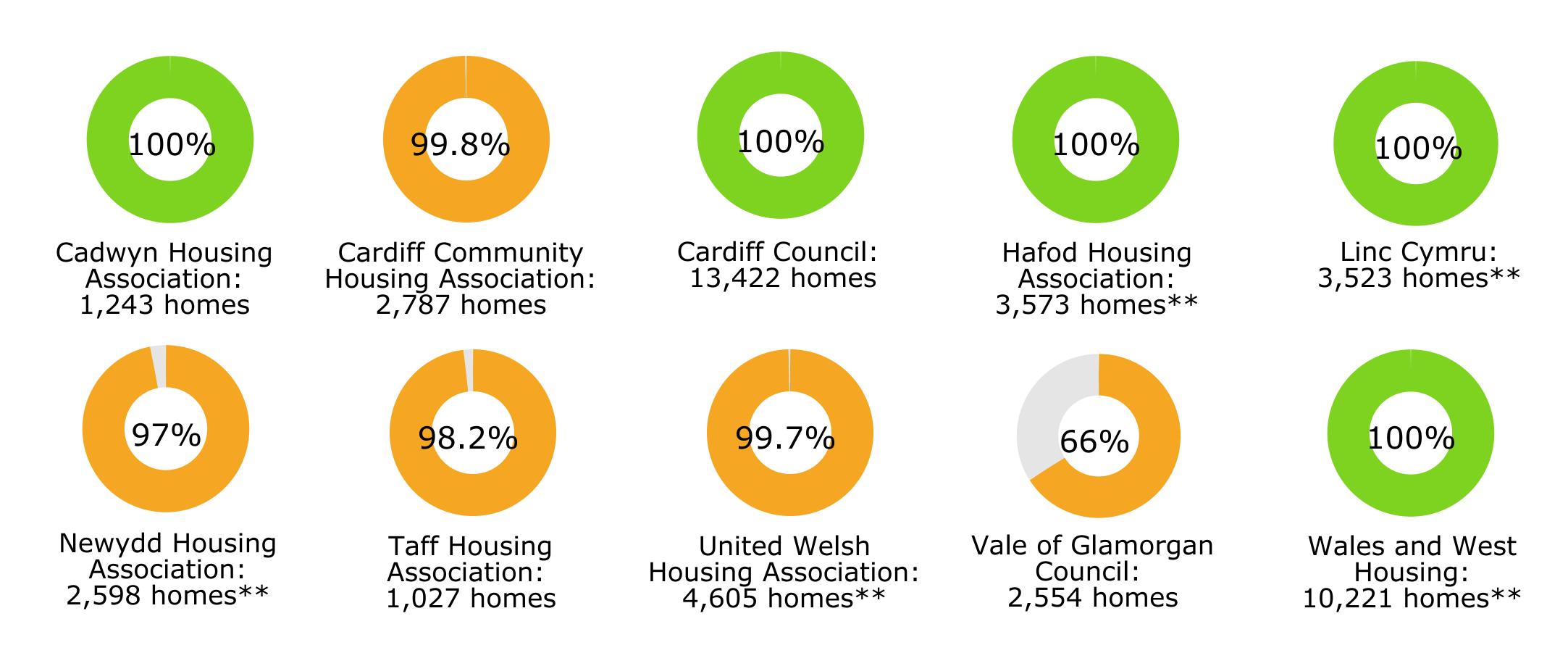
The Quality of Our Care and Support Services: CSSIW Reviews and Inspections

Number of Concerns and Non-Compliance Notices Recorded in Cardiff and Vale of Glamorgan by CSSIW in 2016/17²⁹



The Quality of Our Care and Support Services: Social Housing in Cardiff and the Vale of Glamorgan

Percentage of Self-Contained Social Housing Stock Compliant with the Welsh Housing Quality Standard in 2016/17* 30



^{*} Figures for all landlords with self-contained social housing in Cardiff and the Vale of Glamorgan. Includes all compliant stock subject to acceptable fails as at 31st March 2017, not just those occupied by older people.

^{**} Includes all compliant stock subject to acceptable fails as at 31st March 2017, not just those located in Cardiff and the Vale of Glamorgan.

Care and Support for the Future: Key Messages for Providers

Our 5 Year Commissioning Priorities

Our Commissioning Intentions

Drawing on our four design principles and all of the key findings presented above, we are committed to working with our partners and wider stakeholders to deliver the following priorities and specific actions over the next five years:



WHAT MATTERS TO ME

- Develop improved assessment, diagnosis and care planning practices which are built on genuine collaboration with older people and their families and carers, so that their plans reflect what is important to them and achieve the outcomes they seek.
- Building on the First Point of Contact and Single Point of Access services, further develop digital services along with easily accessible telephone, online and face-to-face access points for the region, for both professionals and the public.
- Robustly review and evaluate outcomes to constantly improve the quality of care and support services across the région.



SUSTAINABLE AND PRUDENT **USE OF RESOURCES**

- Safely reallocate some of our acute and long-term care budgets towards delivering more effective preventative and well-being care and support services in the community and the home, to prevent the need for more intensive and costly care and support later in life.
- Develop pooled budgets, and, through exploring joint commissioning, identify opportunities to use resources more effectively.



HOME FIRST

- Help build resilient communities with local services, infrastructure and strong community networks to meet local needs where older people live.
- Develop Cardiff and Vale of Glamorgan as a dementia-friendly region.
- Work together in integrated locality services with delegated responsibility for providing multi-disciplinary care and support for older people.
- Work together with partners to jointly plan and provide a range of future accommodation options to meet demand and enable people to remain at home for as long as possible.



AVOIDING HARM, WASTE AND

- Only use hospitals to diagnose and treat older people.
- Build an integrated, multi-disciplinary workforce that is flexible and responsive to support older people and their families and carers in the community.
- Work across professional and organisational boundaries to provide sustainable services and enable older people to get the care and support which is right for them in the right place, at the right time.
- Outline a clear path that ensures lessons are learned from safeguarding failures, near misses, complaints and poor professional practices.



WHAT MATTERS TO ME



Develop improved assessment, diagnosis and care planning practices which are built on genuine collaboration with older people and their families and carers, so that their plans reflect what is important to them and achieve the outcomes they seek

By 2022, we will:



Enable ongoing, systematic engagement as a way of understanding what matters to older people

Some things we need to consider:

• Engaging older people who are typically harder to reach, including home owners



Rationalise, refine and unify assessment, diagnosis and planning pathways

Some things we need to consider:

- The application of a strength- and not deficit-based approach
- Outcomes based commissioning
- Issues negotiating the crossover points in the transition process
- Undertaking integrated assessments in partnership with older people and their families and carers, and that the options available – including the potential financial consequences of those options – are taken into account
- The proportionate level of assessment required i.e. what is the least we need to do to meet an individual's needs is undertaken in the most appropriate location, and clarity that such assessments apply to all ages, not just older people
- The application of practices that mirror the successful 'family conference' model
- Mechanisms that enable providers to respond to sudden changes in circumstances and the different outcomes required



Arrange provision of independent professional advocacy and ensure access to other forms of advocacy for everyone who requires it (in line with Part 10 Code of Practice)



WHAT MATTERS TO ME



Building on the First Point of Contact and Single Point of Access services, further develop digital services along with easily accessible telephone, online and face-to-face access points for the region, for both professionals and the public

By 2022, we will:



Clarify and map existing provision, and ensure information is comprehensive, up-to-date and accessible Some things we need to consider:

The inclusion of housing advice for older people



Enable the ongoing development of Dewis Cymru's content and functionality of an online care and support



Build greater public and workforce awareness of information and advice services, particularly for those who are not currently accessing services and are experiencing life changing events



Develop intelligence to understand the potential unmet demand for assessment and services

Some things we need to consider:

- Where demand is currently being generated and/or diverted
- Development of an evidence base to measure the impact of preventive services
- Understanding the cost-benefits of investment in intermediate care and other services that help people return earlier to a better state of health and independence



WHAT MATTERS TO ME



Robustly review and evaluate outcomes to constantly improve the quality of care and support services across the region

By 2022, we will:



Develop a joint regional approach to the performance management of older persons services

Some things we need to consider:

- IT systems
- A joint regional dashboard based on the Regional Partnership Board and Strategic Leadership Group's current and future priorities



Undertake a cost benefit analysis for different models of care and identify current and future projected cohorts of people best suited to that model

Some things we need to consider:

- Having an agreed patient/citizen specification for each model of care, including the expected outcomes to be achieved
- The cost of providing each model of care, including any shared costs across health, housing and social care



HOME FIRST



Help build resilient communities with local services, infrastructure and strong community networks to meet local needs where older people live

By 2022, we will:



Develop a strategy for preventative services to support their long-term sustainability, in response to the current financial pressures and increase in demand on independence and well-being services

Some things we need to consider:

- Sustainable funding
- Tackling social isolation and loneliness
- Day opportunities
- Assistive technology
- Rapid response adaptations
- The use of community assets to promote resilience

- Healthy lifestyles
- Promoting community engagement
- Access to public transport
- Dentists
- Housing related support
- Occupational health



Further develop the social value sector, including social enterprises, through greater delivery of localised services



HOME FIRST



Develop Cardiff and the Vale of Glamorgan as a dementia-friendly region

By 2022, we will:



Further promote the development of 'dementia-friendly' communities and achieve 'dementia-friendly' status on a regional level

Some things we need to consider:

- Increasing the number of dementia friends
- Workforce development
- Awareness raising with children and young people

Work together in integrated locality services with delegated responsibility for providing multi-disciplinary care and support for older people



By 2022, we will:

Agree a locality working model

Some things we need to consider:

- Clarification on the definition and scope
- Mapping of existing locality resources in each neighbourhood cluster
- Development of future multi-disciplinary locality teams
- The active use of well-being and community hubs to tackle social isolation
- The use of 'Community Navigator/Connector' roles



HOME FIRST



Work together with partners to jointly plan and provide a range of future accommodation options to meet demand and enable people to remain at home for as long as possible

By 2022, we will:



Review local housing strategies in light of current provision and develop a joint regional accommodation strategy

Some things we need to consider:

- Evaluation of the level of accommodation with care provision required now and in the future
- Conducting a pilot on intergenerational housing
- A joint agreement on the eligibility criteria for social housing
- A greater understanding of Local Development Plans and how to influence what housing gets built on development sites
- New building developments are fit for a growing older population, including accessibility and dementia requirements
- Impact of potential changes to Supporting People Programme Grant



SUSTAINABLE AND PRUDENT USE OF RESOURCES



Safely reallocate some of our acute and long-term care budgets towards delivering more effective preventative and well-being care and support services in the community and the home, to prevent the need for more intensive and costly care and support in later life

By 2022, we will:



Develop a regional strategy for domiciliary care and residential and nursing home care, with the aim of stabilising the market

Some things we need to consider:

- How to improve quality and achieve consistency across the sector
- How to influence the growth (and decline) of the three markets
- The use of care homes to tackle social isolation and loneliness
- How to converge costs
- Demands placed on sectors by regulatory bodies
- Self-funders



Develop effective tools to enable older people to engage in the self-assessment and self-monitoring of their own care and support requirements and health conditions

Some things we need to consider:

- IT systems
- The availability of health 'CVs' for every older person across the region



Continue development of the Joint Equipment Store to provide an improved and enhanced service, and explore commercial opportunities



SUSTAINABLE AND PRUDENT USE OF RESOURCES



Develop pooled budgets, and, through exploring joint commissioning, identify opportunities to use resources more effectively

By 2022, we will:



Create a pooled budget and jointly commission residential and nursing care home provision

Some things we need to consider:

- Consider impact on core and wider services
- Develop a joint understanding of outcomes



AVOIDING HARM, WASTE AND VARIATION



Only use hospitals to diagnose and treat older people, and undertake assessments closer to home in community settings



By 2022, we will:

Reduce the number of assessments undertaken in hospital and increase the amount carried out in community settings



Further establish the 'Discharge to Assess' model of care

Some things we need to consider:

• Use of sheltered accommodation/extra care beds as an enabler

Build an integrated, multi-disciplinary workforce that is flexible and responsive to support older people and their families and carers in the community

By 2022, we will:



Undertake collective workforce planning across health, housing and social care sectors to support integration

Some things we need to consider:

- Supply, including nurses and physiotherapists
- Quality of staff
- Continuity, including social workers
- Language differences
- Domiciliary care registration

- Terms and conditions
- Ageing workforce
- Raising the professionalism and reputation of certain sectors
- Joint posts/joint recruitment

• Training in commissioning, procurement and performance management to support the development of effective services



AVOIDING HARM, WASTE AND VARIATION



Work across professional and organisational boundaries to provide sustainable services and enable older people to get the care and support which is right for them in the right place, at the right time

By 2022, we will:



Further develop cross-partnership working and communication between services in relation to the requirements of the Social Services and Well-being (Wales) Act

Some things we need to consider:

- Greater involvement of: Registered Social Landlords, housing related support, GPs, private providers, CSSIW, Social Care Wales, academia, banks
- Strategic (business) and operational (care and support) conversations
- Greater transparency and dialogue

- Shared learning and training
- Implement locality/placed based pooled budgets
- Champions to drive forward the partnership agenda
- How to foster and encourage innovation
- Develop shared positions on the current and future services required

Outline a clear path that ensures lessons are learnt from safeguarding failures, near misses complaints and poor practices

By 2022, we will:



Strengthen escalating concerns process and information sharing/lessons learnt on a regional footprint

Some things we need to consider:

- Develop a regional approach to quality
- Disincentives for poor practice

Oz Our Commissioning Intentions

The Partnership has a clear vision for changing the emphasis away from a reliance on traditional long-term services, towards more preventative and reablement community based services and assistive technologies that promote well-being and independence.

This vision mirrors a change in the approach of many local authorities and health boards and is in line with many people's needs and wishes. This also gives the Partnership the best chance of dealing with the increasing demographic and financial pressures facing each of three organisations.

Fulfilling this vision requires the Partnership to work with a range of partners to:

- Deliver new services Those which have not previously been needed, but are now at the heart of delivering this new vision
- End some service provision There will be services that are no longer needed, or appropriate, and will no longer be commissioned
- Change how some services are delivered These services will still be needed, but must be commissioned, arranged and delivered differently

The process of reviewing services and starting, changing or ending some services is not new and is an ongoing process that commissioners and providers have always engaged in.

The Partnership will work with partners to shape the service provision required to deliver our vision. This will result in a set of diverse, innovative and sustainable services that demonstrably meet people's outcomes.

Providers will need to be able to respond to the increasing Direct Payments market, offering flexible service provision and clear pricing structures. We acknowledge that this present both new opportunities and challenges for the sector.

Working with Providers

Engagement, Information Sharing and Co-ProductionCapacity Management

Engagement, Information Sharing and Co-Production

There are a number of existing formal and informal mechanisms already in place across the region to enable ongoing, informative and constructive dialogue with providers. These include various 'Provider Forums', some of which have a specific focus in terms of content (e.g. workforce issues) or attendance (e.g. Manager's Forum). This engagement sees to create a partnership approach to designing and delivering services now and in the future.

It is the intent of the Partnership to build upon the success of our existing approaches to engagement. This will include establishing regional care home and domiciliary care forums alongside the current local arrangements, and increasing both the level of engagement with providers and the different ways in which this happens.





The Partnership will continue to work together with stakeholders to develop market position statements that meet the priorities the Regional Partnership Board. This will include facilitating market position statement events, to jointly shape the document and identify solutions to priorities.

We are interested in improving information about providers, to help suppliers to advertise the services they offer. Equally, this will enable both direct payment holders and those who have their care arranged by the three statutory partners to access greater information on the different types of services available to them.

18 Capacity Management

We recognise that quality care and support is dependent on the skills and commitment of the people providing the service.

The Cardiff and Vale Care and Support Regional Workforce Partnership is committed to ensuring the recruitment and retention of excellent professionals and a working environment which allows staff to develop and give their best. The current priorities of the Workforce Partnership are:

- To continue to develop the workforce's knowledge and understanding in order to implement the Social Services and Well-being (Wales) Act and expand E-learning portfolio working in partnership with the Learning Pool
- To ensure that Regional Managers are invited to attend the quarterly Manager Forum
- To continue to promote the use of the Social Care Wales Induction Framework and access to the Level 2 Award in Social Care Induction (Wales)
- To ensure that all managers are aware of the resources available through the Social Care Wales Hub on the Social Services and Well-being (Wales) Act
- To establish a methodology that will enable us to find out information around resources used for training in the wider sector

Any person working in social care within Cardiff or the Vale of Glamorgan is entitled to free training to help develop their skillset and knowledge base.

Workforce

Our Workforce within Cardiff and the Vale of Glamorgan:

Health

Council Social Services

Commissioned Care Providers



Our Workforce within Cardiff and the Vale of Glamorgan: Health

During 2016/17, some of the key characteristics of the NHS and private health workforce were:







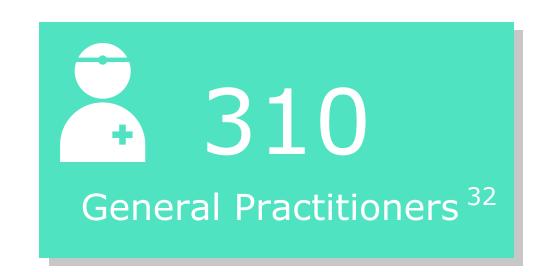




















Our Workforce within Cardiff and the Vale of Glamorgan: Council Social Services³⁶

In 2015/16, some of the key characteristics of the council social services workforce were:



283

People providing social work services for adults (190 in Cardiff and 93 in Vale of Glamorgan)



40

Social services staff in a hospital or clinic setting (22 in Cardiff and 18 in Vale of Glamorgan)



People providing domiciliary services for adults (168 in Cardiff and 52 in Vale of Glamorgan)



People providing day/community services for older people (50 in Cardiff and 24 in Vale of Glamorgan)



176

People providing residential services for older people (0 in Cardiff and 176 in Vale of Glamorgan)



93%

Of social workers with the recommended qualifications for their role



62%

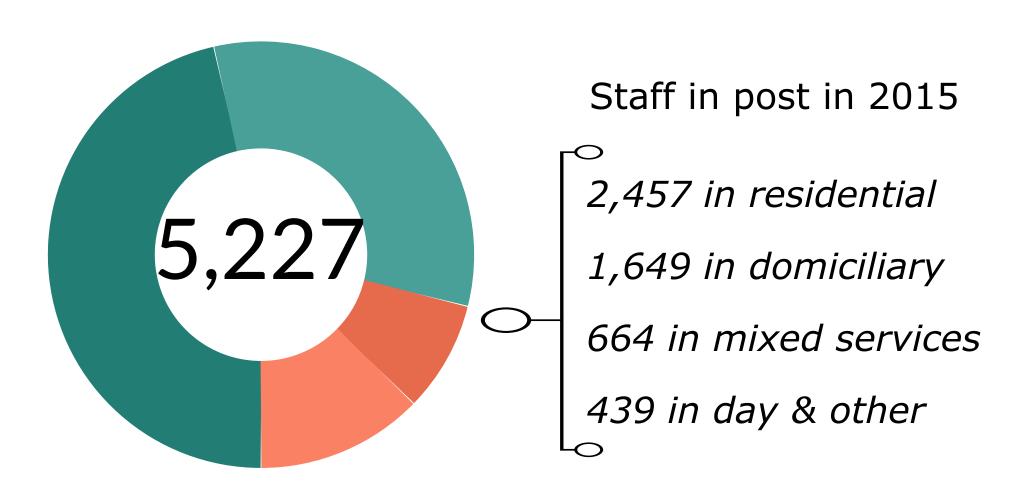
Of staff in residential services with the recommended qualifications for their role

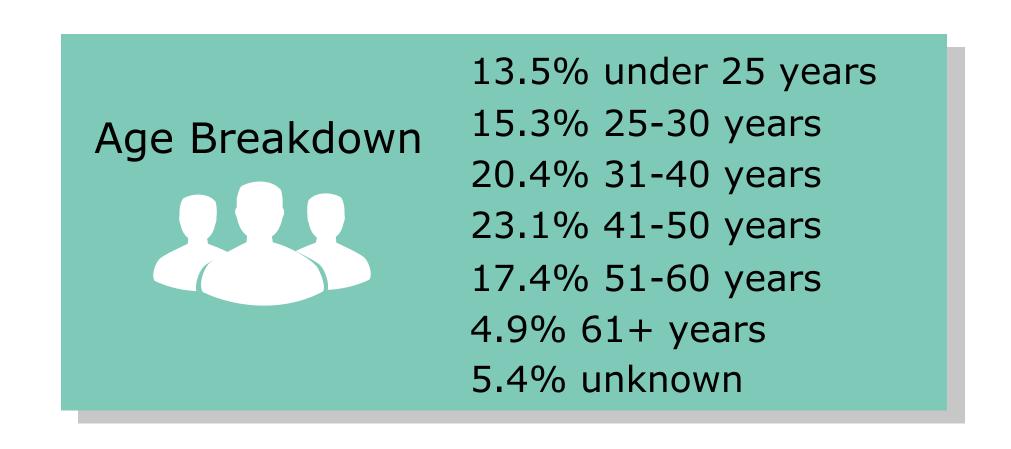


59%

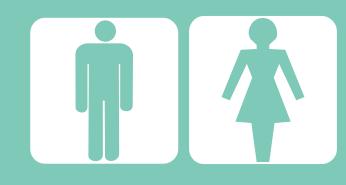
Of staff working in domiciliary or day services with the recommended qualifications for their role

Our Workforce within Cardiff and the Vale of Glamorgan: Commissioned Care Providers³⁷

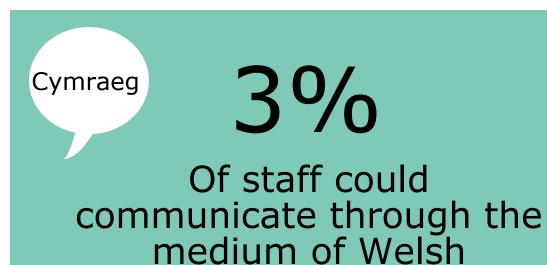




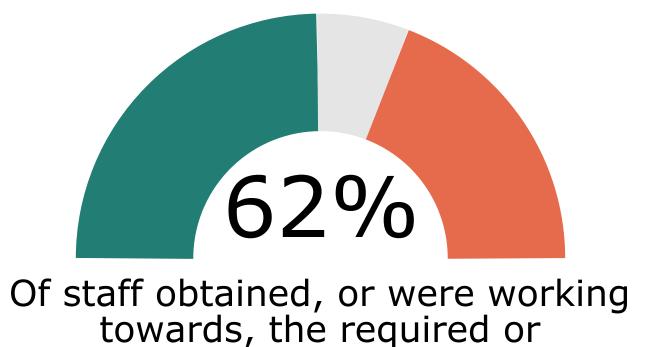
Gender Breakdown



78% female 19% male 3% unknown







recommended qualifications

1,573 Staff left their posts in 2015 (509 of whom left the sector)

58% Turnover of all domiciliary care staff in 2015

19% Turnover of all residential care staff in 2015

Monitoring and Reporting

Our Governance and Monitoring Arrangements

How Will We Know When We Get There?

Our Governance and Monitoring Arrangements

The Cardiff and Vale of Glamorgan Regional Partnership Board is made up of representatives from the City of Cardiff Council, Vale of Glamorgan Council, Cardiff and Vale University Health Board, Welsh Ambulance Service NHS Trust, Cardiff Third Sector Council, Glamorgan Voluntary Services, Llamau, Age Alliance Wales, YMCA Cardiff, Care Forum Wales and a carer representative.

With support from a Strategic Leadership Group, the Regional Partnership Board provides the governance arrangements for ensuring delivery arrangements are in place to enable effective implementation of the Social Services and Well-being (Wales) Act 2014 on a regional basis.

The Regional Partnership Board will hold partners to account for delivery of the five year priorities included in this Market Position Statement.

The content of this report will remain open to review annually by the Regional Partnership Board, in particular, service demand, the quality of provision and the impact of the priorities on the health and well-being of our older population.



10 How Will we Know when we get There?

We want our future services to be citizen focused, which requires placing the wellbeing outcomes that our older citizens want to achieve, and their rights and their responsibilities, at the heart of what we do. To enable this work, the Partnership have agreed a number of population outcomes which will guide the work we do across the region. Our success in supporting older people to achieve these outcomes will be measured against national well-being indicators and local performance measures.

Inequalities that may prevent people in Cardiff and Vale of Glamorgan from leading a healthy life are reduced

Care and support in Cardiff and the Vale of Glamorgan is delivered at, or as close to, home as possible

People in Cardiff and Vale of Glamorgan are healthy and active and do things to keep themselves healthy

People in Cardiff and Vale of Glamorgan know and understand what care, support and opportunities are available and use them to achieve their health and well-being

People's voices in Cardiff and Vale of Glamorgan are heard and listened to





Sources of Information

Useful Links

References

Get in Touch

III Useful Links



Care and Social Services Inspectorate Wales (CSSIW)

CSSIW regulate and inspect to improve adult care, childcare and social services for people in Wales.



Social Care Wales (SCW)

Social Care Wales work with people who use care and support services and organisations to lead improvement in social care.



Community Housing Cymru (CHC)

CHC is the membership body for housing associations in Wales.

Directories of Services for Older People



DEWIS Cymru: Local information and advice on maintaining and improving personal well-being.

Glamorgan Voluntary Service: A list of services for older people in the Vale of Glamorgan and Cardiff.

Cardiff Third Sector Council: A directory of Cardiff Third Sector Council members and the services they offer.

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