



## Details

<b>Title</b>	Market Position Statement
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## Context and background

**EIA carried out on** Review of policy or strategy

Under section 5 of The Care Act 2014, local authorities have a duty to shape and maintain an efficient and effective market of services for meeting care and support needs in the local area. Specifically, this means individuals:

- Have a variety of providers to choose from providing a variety of services
- A variety of high quality services
- Have sufficient information to make an informed decision on their care

The Market Position Statement (MPS) is a key document developed by local authorities aiming to:

- Advise of current supply, demand and demographics
- Describe our challenges and gaps in provision
- Showcase our ways of working and key policy changes - Indicate how we wish for care and support provision to work moving forward in the short, medium and long term
- Be a starting point for discussions with providers, with clear messaging to the market as to what we intend to develop or need.
- Shape the market in line with our Care Act requirements. Provide transparency in our approach to contracting and commissioning whilst noting our own offer of support to providers /

## Background

potential providers, showcasing the benefits of working with Coventry.

- Outline our expectations in respect of service requirements and conduct of providers. Specifically, we stipulate our requirements in respect of quality and affordability.
- Advise of upcoming business opportunities

Through this document we aim to strengthen and develop the local market, in turn improving the quality and choice of services experienced by individuals.

Overview of MPS principles:

Whilst the MPS contains a wealth of information for providers, there are three key commissioning priorities providers are asked to consider:

- Addressing our gaps: specifically, this includes developing provision for individuals with complex needs / complex nursing needs, community alternatives to regulated support and respite and carers breaks (amongst others). In addressing our gaps we aim to improve our overall offer, increase choice for individuals, and ensure we have an even spread of provision across the city.
- Quality: Ensuring all individuals in receipt of support receive high quality care which promotes independence, has a reablement approach and ensures dignity and respect is imperative. We outline both our support to the market to achieve this, our expectations on quality, and clarity on our approach should quality fall below expected standards.
- Developing alternatives to regulated support: We recognise that regulated, commissioned support is not appropriate for all individuals who may have care and support needs. Over the next 18 months, we aim to increase the availability of community-based support to individuals across the city, allowing people to access more tailored, localised support which gives increased choice and control whilst delivering support in a potentially cost-effective way.

Other key messages in our MPS include ensuring our services are able to support the diverse needs and requirements of the city; are accessible and support uptake from currently underrepresented communities; operate in line with the Councils One Coventry Plan and green agenda; represent good value and are cost effective.

**Stakeholders**

- Coventry City Council  
Adults Commissioning  
Adult Senior Management Team (ASCMT)  
Social workers, community case workers and occupational therapists  
Finance  
Housing  
Planning  
Childrens Services

- External partners  
Integrated Care Board

- External  
Providers of adult social care in Coventry / potential providers  
Community and third sector organisations  
Users of adult social care services  
(Unpaid) carers  
Staff of adult social care providers in Coventry

This MPS has been developed with contribution from our MPS Provider Network, comprising of commissioned providers who have volunteered to participate in its development.

**Responsibility**

Adults Commissioning (responsible officer tbc)

**Consideration of impact**

**Baseline data and  
information**

To produce our MPS, a wealth of data has been reviewed from the following sources:

- CCC ASC demand data
- Census 2021
- Joint Strategic Needs Assessment
- POPPI (Projecting Older Peoples Population Information)
- PANSI (Projecting Adult Needs and Service Information)
- Service user and carer feedback
- Provider feedback

We have also utilised information collected from quality assurance and contract monitoring visits

## Protected groups

**Age 0-18**

Positive impact - Whilst the services delivered by adult social care are targeted towards individuals aged 18+, there are occasions where this MPS may benefit individuals under 18. This includes: - Individuals transitioning from Children's Services, through the development of increased care and accommodation choices. - Young carers, who may benefit from increased support to carers through the expansion of respite and break provision and recommissioning of wider carers support services.

- Staff under the age of 18 currently working or considering a career in adult social care. Through increased clarity on both business opportunities and support to the market from the Council, in turn we aim for this to strengthen the local care market and in turn its workforce.

Positive impact - In 2023/24, 32.4% of people in receipt of ASC support were of this age group. Likewise:

**Age 19-64**

- A total of 65% of the city's population are of working age (18-64), with Coventry seeing a particular growth in the population of younger adults due in part to the two local universities attracting both local and international students, as well as better paid jobs in the local economy.
- The 55-59 age group experienced the greatest growth of any age group in Coventry. This means there is a need to focus on preventative health amongst the working age population now to manage future demand on health and care services.
- Coventry continues to have a lower rate of new requests for support, per 100,000 population for this age group than our comparators.
- Coventry has seen a rise in the percentage of new requests from 4% in 2021/22 to 6% in 2022/23 which led to long term support.
- Coventry has a higher percentage of new requests (16%) of adults going on to receive short term care than our comparator averages (8% to 11%) for this age group. This has been an increasing trend over the last five years.
- Coventry continues to have a lower rate, 720 per 100,000 population of people receiving ongoing long-term support during the year for this age group, compared to our comparators (820 - 875).

Workforce: The average age of an individual working in social care in Coventry is 43, with 67% of its workforce aged between 25-54.

A significant proportion of Coventry's population either in receipt of or working in adult social care will therefore benefit from the aims of the MPS in that it will:

- > Work with the market to develop increased choice of provision, including community based alternatives to regulated care.
- > Increase the quality of provision available.
- > Support carers in accessing support for both themselves, and the individual they care for.
- > Increased career opportunities within the sector.

<p><b>Age 65+</b></p>	<p>Positive impact - This age group is the most prominent user group of adult social care support, with 66.5% of service users aged 65+. This user group therefore stands to benefit significantly from a refreshed MPS which considers:</p> <ul style="list-style-type: none"> <li>- The direction of older peoples residential and nursing provision in the city, including areas of the city where there is a paucity of supply.</li> <li>- Encouraging the development of nursing provision in the city- Engaging with providers to understand opportunities to refresh older accommodation based stock for older people with more modern, purpose built schemes in line with the expectations of the user group</li> </ul> <p>As a result, we aim to:</p> <ul style="list-style-type: none"> <li>&gt; Improve the quality of both care and the accommodation / environment experienced</li> <li>&gt; Improve the choice available to individuals</li> <li>&gt; Improve outcomes of individuals</li> </ul>
<p><b>Disability</b></p>	<p>Positive impact - Individuals with a physical or learning disability, and their families / carers, will benefit positively from the refreshed MPS through:</p> <ul style="list-style-type: none"> <li>&gt; Clarity on the care and support needs of individuals within this user group. We note a specific need to develop provision for people with multiple complex needs to prevent admission to hospital, or enable discharge, for example.</li> <li>&gt; Transparency on our quality assurance approach and expectations of providers.</li> </ul>
<p><b>Gender reassignment</b></p>	<p>No impact - Adult social care is delivered to people regardless of their gender and gender reassignment undertaken. A theme of our MPS is to work with the market to improve is inclusivity and accessibility, however no data is currently collected in relation to this protected characteristic.</p>
<p><b>Marriage and civil partnership</b></p>	<p>No impact - ASC is delivered regardless of an individuals marital status.</p>
<p><b>Pregnancy and maternity</b></p>	<p>No impact - ASC is delivered regardless of this status.</p>

Positive impact - Currently there is disparity in the demographics of people in receipt of Coventry adult social care services and the information reported in the Census 2021. Specifically, there is a marked difference in delivery to the following demographics:

- Asian / Asian British (Indian): 5.9% ASC, 9.5% Census 2021
- White, any other background: 1.9% ASC, 8.7% Census 2021
- Black, black British, black Caribbean or African: 1.4% ASC, 6.2% Census 2021

**Race** We make specific reference to addressing these disparities within the MPS, requesting providers to:

- work with local communities to communicate their service offer - ensure services are accessible, inclusive and meeting the diverse needs of Coventry residents
- make connections with currently underrepresented groups and understand potential cultural or societal barriers of access
- develop community alternatives to regulated support, recognising there may be financial barriers to accessing support or reticence to access support outside of their local community for some individuals or communities.

**Religion and belief**

Positive impact - Data collected on the religion and beliefs of individuals in receipt of ASC support closely aligns to the data reported in the Census 2021. We continue to promote this within the MPS and encourage providers to work closely with the local community, including community and religious leaders, to reduce potential religious or cultural barriers in accessing support. Likewise, we stipulate providers of ASC locally must meet the cultural needs of service users in their service delivery.

**Sex**

Positive impact - 82% of Coventry's ASC workforce are female (source, Skills for Care) therefore a significant proportion of females will benefit from increased career opportunities / pathways encouraged through the MPS. In addition, we aim to encourage wider recruitment practices to diversify those recruited to ASC to include more males. As a result, individuals in receipt of ASC should be better supported by staff whose demographics are representative of the city and therefore able to meet potential preferences of individuals requiring support e.g. females supporting females.

**Sexual orientation**

No impact - Support is given to individuals regardless of their sexual orientation. We do however stipulate to the market of the requirement for services to be inclusive, accessible and meet the diverse needs of individuals in the city.



## Health inequalities

**Reduce health inequalities**

Enabling all people to maximise their capabilities and have control over their lives  
Ensuring a healthy standard of living for all  
Creating fair employment and good work for all  
Creating and developing healthy and sustainable places and communities.

**Information**

As noted within the JSNA there remain significant health inequalities prevalent in the city. Adult social care has a specific role to play in reducing inequalities through coordinating support across health and social care and in preventing the development of need. To directly combat health inequalities, the MPS gives specific direction to the market to:

- work in a promoting independence, reablement manner
- focus on prevention
- work with local communities to identify individuals who are at risk of preventable poor health e.g. loneliness and work with the community and third sector to remedy
- ensure quality of service delivery, supporting people to meet their outcomes
- healthy work environments which provide career opportunities

Generally, a strengthened care market with increased choice, diversity and equality of access will actively improve the quality of life experienced by individuals.

**Groups of people**

- Individuals from under-represented groups
- Unpaid carers

## Improvements

### - Individuals from under-represented groups

Individuals from this group are potentially at greater risk of health inequalities due to the delays in accessing support and exacerbation of need experienced during this delay. Work is ongoing to improve our support offer to individuals from underrepresented groups to better understand potential reasons for lack of engagement with adult social care and removing potential barriers to access. Our MPS outlines the need for improved, proactive information on services, linking with communities (including creating links with community and faith leaders) to improve perception and understanding of services and ensuring that services cater for the diverse needs of Coventry residents. We will also actively work to engage with underrepresented groups through the development and design of services to ensure these are in line with the needs and preferences of individuals.

### - Unpaid carers

The MPS outlines our intentions for commissioning support for unpaid carers moving forward. Specifically, this will include: > Utilising Accelerating Reform Funding to fund carer support specific projects e.g. carers online support tool, alternative carers breaks > Recommissioning current carers support services to ensure these are meeting demand and requirements of Coventry carers as noted within feedback following engagement with local carers undertaken in 2023. Who/which groups of people might face the biggest health inequalities for your work and why: What can be done to improve health equity for the groups of people you have identified?

Carers of people with life-long medical condition may face the biggest health inequalities in respect of this work. We know from published data that the overall health and wellbeing of a carer can be negatively impacted through the caring role, with this further exacerbated during intense or prolonged periods of caring responsibility. Individuals caring for someone with a life-long medical condition may be especially prone to this.

We also note from both the Lets Talk Carers Survey and from national data in respect carers from diverse ethnic communities are not accessing health and social care support as regularly as individuals of a White-British ethnicity. Delays in accessing support may further exacerbate an individuals poor mental and physical wellbeing, cause unnecessary deterioration of condition to both the carer and cared for and overall lead to poorer outcomes for both individuals. Risk of carer burnout and breakdown is also increased.

## Digital inequalities

<b>Impact</b>	The refreshed MPS aims to improve the impact of digital inequalities for both individuals in receipt of support, unpaid carers and social care staff in Coventry.
<b>Opportunities</b>	<ul style="list-style-type: none"> <li>- Ensuring a wide range of digital / technological support is available across the city. This includes the diversity of provision to ensure face to face, community and digital support is available in line with demand and population requirements.</li> <li>- Providing training and potential funding for providers and provider staff to upskill in respect of digital technologies and skills. This includes use of Digital Care Records (DCR) and completion of the Data Security and Protection Toolkit (DSPT), with supporting funding available through the WM Adaptive Fund and Digital Transformation Fund.</li> </ul>

## Next steps

Inequality	Action	Owner	Timescale
<b>Monitor and evaluation</b>	<p>Feedback from service users and carers (statutory surveys, ongoing feedback and Adult Social Care Real Time Survey).</p> <p>Annual survey of commissioned providers to understand effectiveness of Adults Strategic Commissioning's support offer.</p> <p>Ongoing monitoring of demographic uptake of ASC services.</p>		

## Impact on Council staff

**Will there be an  
impact?**

No

## Completion statement

**Potential equality  
impact**

Positive impact has been identified for one or more protected groups