



A summary of responses to Cheshire East Council's

Market Position Statement Consultation



Summary of results

The consultation response

In total, 26 survey responses were received, including from the following organisations:

- Alternative Futures Group
- Alzheimer's Society
- Enhance Social Care
- Liverpool University Hospitals NHS Foundation Trust
- National Care Group
- Promises of care
- Rowans
- Safe Sanctuary Living Ltd
- The Flamelily Healthcare.

Voluntary, Community, Faith and Social Enterprise (VCFSE) and Care Provider workshop events were also held with 13 organisations about the Market Position Statement – a summary of these workshops can be found in Appendix 1.

Headline results

Survey respondents were largely supportive of the Market Position Statement:

- 88% agreed with the key messages for providers.
- 81% agreed with the messages to the whole market.
- 81% agreed with the messages for providers of public health, early intervention, and community services.
- 81% agreed with messages for providers of care and support to adults.
- 76% agreed with the commissioning strategy and market opportunities.

Furthermore, all 13 organisations that attended the MPS workshops agreed with the key messages and agreed that this is the right approach.

A slightly lower proportion of survey respondents (57%) agreed with the messages to providers of children and young peoples services.

Written comments

Respondents commented on the different sections of the strategy, and these comments can be found presented verbatim throughout this report.

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Report produced 21 September 2021 by the Research and Consultation Team, Cheshire East Council. Email RandC@cheshireeast.gov.uk for further information.

Introduction

Purpose of the consultation

Between 20 July and 15 September 2021 Cheshire East Council consulted on a newly drafted joint Market Position Statement (MPS).

A Market Position Statement (MPS) is a document published by commissioning authorities which summarises the supply and demand in a local authority area. The MPS brings together local information and analysis relating to commercial opportunities within the public health, health, and social care market in that area.

The MPS had been developed as a joint document across health and social care to ensure consistent messages are provided for the market. The Cheshire East MPS has been developed to take an all-age approach.

Consultation promotion and responses

The consultation survey was widely promoted on the council's website, through partner organisations and on social media.

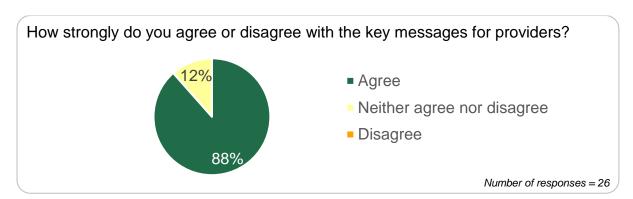
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Voluntary, Community, Faith and Social Enterprise (VCFSE) and Care Provider workshop events were also held with 13 organisations about the MPS – a summary of these workshops can be found in Appendix 1.

Key messages for providers

88% of survey respondents agree with the key messages for providers as set out in section 3 of the Market Position Statement.



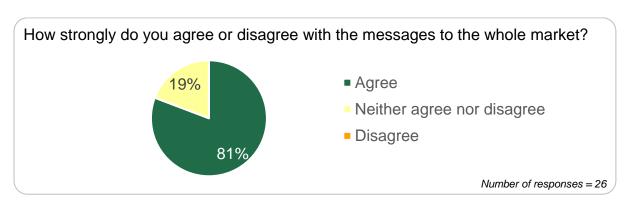
All comments received on the key messages for provers are printed verbatim below.

Comments on the key messages for providers:

This is fine on paper, in reality it will be near impossible to provide. how many admin, fat cats will be employed. health care is so fragmented, and non-existent, I do not think this will be improved any time soon.. There appears to be more hype than what the people will receive.

Messages to the whole market

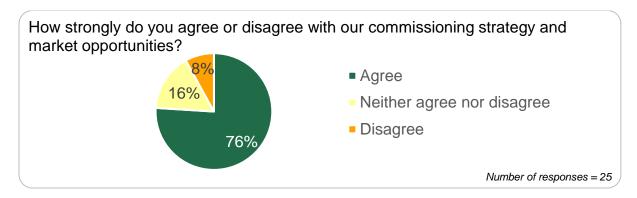
81% of survey respondents agree with the messages to the whole market as set out in section 5 of the Market Position Statement.



No comments were received on the messages to the whole market.

Commissioning strategy and market opportunities

76% of survey respondents agree with our commissioning strategy and market opportunities as set out in section 6 of the Market Position Statement.

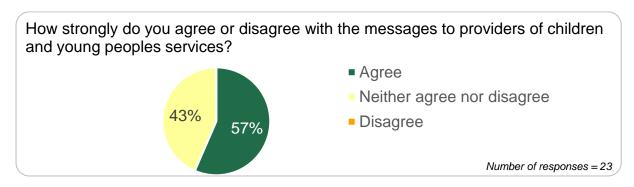


All comments received on our commissioning strategy and market opportunities are printed verbatim below.

Comments about our commissioning strategy and market opportunities: Idea does not match your realities.

Messages to providers of children and young people services

57% of survey respondents agree with the messages to providers of children and young peoples services as set out in section 7 of the Market Position Statement.



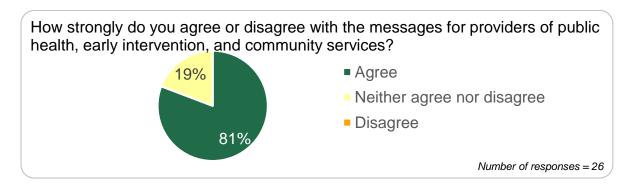
All comments received on the messages to providers of children and young peoples services are printed verbatim below.

Comments about the messages to providers of children and young peoples services:

Does not really directly apply to our area of expertise, but transport is a key link across all services.

Messages for providers of public health, early intervention, and community services

81% of survey respondents agree with the messages for providers of public health, early intervention, and community services as set out in section 8 of the Market Position Statement.



All comments received on the messages to providers of childre received on the messages to providers of childre received young peoples services are printed verbatim below.

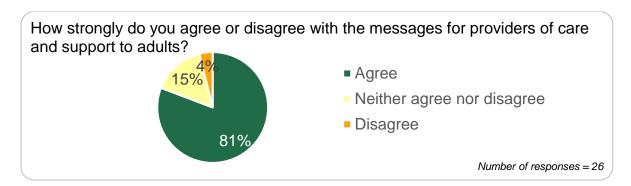
Comments about the messages for providers of public health, early intervention, and community services:

This would be good if was possible, was implemented, but this is very, very unlikely to happen, red tape and jobs for the boys

There is a need for greater collaboration between the health services and those in the community like the Churches which wish to help them with their work in their communities. While there is an emphasis of 'working with', there needs to be care that this does not revert to 'working/doing for' as in the past!

Messages for providers of care and support to adults

81% of survey respondents agree with messages for providers of care and support to adults as set out in section 9 of the Market Position Statement.



All comments received on the messages for providers of care and support to adults are printed verbatim below.

Comments about the messages to providers of children and young peoples services:

In regards to the mental health section in section 9, I regularly have clients tell me that the services listed in this section either not appropriate or not available to them and a lot of clients state they feel stranded or abandoned by services.

Commissioning for outcomes as opposed to purely an hourly rate has to be far more economically advantageous. If an hour is commissioned it can be an hour of task based support, but outcome commissioning can introduce innovation.

Using assistive technology for multiple services. Use it as an early intervention service to reduce impact on social care front door, include as part of reablement hospital discharge to reduce likelihood of re-admissions to hospital and longer term care. Referal from GPS to AT managed by LA provider to give system wide prevention data longitudinal evidence of AT when deployed earlier in later life to increase the likelihood of living at home.

Final survey comments on the MPS

Final comments received on the MPS are printed verbatim below.

Any other comments on the Market Position Statement:

Am just wondering whether the issue of lack of services in North of East Cheshire is due to pressure from local residents and whether there is a way of directly discussing and addressing this with local communities, given it can mean that people are then forced to live away from their families. Greater engagement definitely feels to be the way forward but it would be good to have some tangible plans as to how that will happen. Lastly, MPS references wanting to open dialogue with providers around areas of support; it would be good to know how and when this will happen or whether it is down to providers to approach on an informal basis. Great to have the opportunity to feed into the process,

It is a very thorough and robust documentation, the use of digital technology needs to feature alongside all care models. There are a good few innovators in the digital world that can or should be able to really influence how we think about and deliver care

These are fine on paper ,the reality of giving care is another thing .we have no joined up care ,people are waiting for years for care .I do not see much changing for people .there needs to be action ,seen to be ,not just words ..If these policies and aims are met I shall be gobsmacked.

This is an impressive analysis which will act as a good source of reference. I look forward to its successful and transparent implementation!

Very pleasing to see themes such as Coproduction, early intervention, holistic whole system approach and so on. It is crucial to ensure the inter-connectedness of issues and how to resolve them. This is very clearly demonstrated in Social Value and Social Impact modelling, and the creation of independence in thought and action allows individuals to do more themselves, rather than becoming reliant on having services provided to them.

Whilst it is admirable to see such a comprehensive strategy, and we welcome the transparency, the key messages are really the same as they have been for years. What is missing is how is the council is going to support the provider sector? Impossible recruitment and poor hourly rates means that all the strategies in the world will just not work until this is addressed.

Appendix 1 – MPS workshop feedback

Alongside the survey conducted to gather feedback on the Market Position Statement, some Voluntary, Community, Faith and Social Enterprise (VCFSE) and Care Provider workshops were also held to discuss the MPS.

In total 13 organisations attended these workshops, and in general:

- All 13 organisations agreed with the key messages.
- All 13 organisations agreed that this is the right approach.

Feedback received as part of the workshops is summarised below.

Workshop feedback on the key messages:

I like the focus on flexible commissioning models and early intervention and prevention.

The 7 day working approach is ambitious and a big ask, especially for wider services such as the VCFSE sector.

The concept of a focus on early intervention and prevention is positive, but 'how' will you achieve the shift?

Need a focus on localism.

Workshop feedback on the MPS as a whole:

Need to reflect and understand the differences between sectors, you can't shape the VCFSE to be replicas of the Council or Health. You need to reflect the unique positive role of the VCFSE sector

Need to reflect the need for longer more sustainable contracts

We like to market engagement and coproduction sections, true engagement and coproduction should ensure that commissioners 'listen' to the market and shape/design services together, rather than being too prescriptive.

Commissioners need to work with the VCFSE sector to understand local need and demand, its not just about the data

We need mechanisms to enable local organisations to communicate local insight to commissioners

How will you communicate MPS developments to local suppliers?

The VCFSE Leaders Group / Cheshire Social Action Partnership will be a good mechanism for ongoing engagement with regards to the MPS with the VCFSE sector

How will you collaborate with Care Providers to develop hourly care rates?

Appendix 2 – Email feedback

Email feedback received on the MPS is printed verbatim below.

Email received 17/09/2021:

Thanks for the meeting and presentation.

I spent many hours reading the MPS and importantly the detailed references (a real and interesting learning curve).

I found the report to be well written with some interesting models for delivery and community engagement. Might suggest a summary of the key recommendations up front would be useful. So from a Veterans perspective I thought you might find the following comments to be of interest:

One theme is how East Cheshire identifies a patchwork of services and aims to bring them together - collaboration rather than consolidation (page 28). The next page describes connected communities place infrastructure. Where do Veterans organisations fit - presumably through the VCFSE, but given the number and range of Veterans organisations could they not be highlighted in their own right? Looking at the Dementia page 53 - column, 3rd bullet – is this a possible invitation for the Veteran voluntary sector to work closely with Cheshire East/ NHS? An overarching comment - there is mention of the impact of COVID on finances - but did not see comment on how COVID has affected death rates and life expectancy. I saw an article in Guardian online today which highlights PHE figures of decrease in men by 1.3 years to 78.7 years, and 0.9 years decrease to 82.7 years for women.

Finally, what is the potential impact of the Central Government developments upon the MPS. Happy to add some 'flesh' to the comments above and other areas. I am a great believer in 'demand driven' solution architecture (informed by intelligence 'fusion'), agile delivery, effective communication and accountability.





