

11th July 2016**Agenda Item:5****REPORT OF THE SERVICE DIRECTOR FOR MID NOTTINGHAMSHIRE****SELECTION PROCESS FOR SOCIAL CARE PROVIDERS TO JOIN THE MID-NOTTINGHAMSHIRE 'BETTER TOGETHER' ALLIANCE****Purpose of the Report**

1. The purpose of the report is to seek approval for the proposed process for selecting social care provider/s to join the Mid-Nottinghamshire 'Better Together' Alliance.

Information and Advice**Background**

2. Adult Social Care and Health (ASCH) Committee received a report in March 2016 about the development of the Mid-Nottinghamshire "Better Together" Alliance Agreement. This report outlined:
 - a) national policy and legislative landscape for the integration of health and social care
 - b) progress with the Mid-Nottinghamshire 'Better Together' programme and development of the Alliance agreement
 - c) key issues and implications of the Alliance Contract Agreement for the Council.
3. Committee approved Nottinghamshire County Council to join the Better Together Alliance as a Full Member.
4. Signing the Alliance Agreement contract means that the Council agrees to work within the Alliance partnership, committing to shaping and working to its purpose, objectives and behaviours. At this stage, it does not require the Council to change its existing arrangements for management of staff or services, or to delegate any areas of finance, strategy or performance. During the next twelve months the contract requires a number of transitional activities to be completed, including: the development of new payment mechanisms for health providers; a framework for managing risk and reward; and the identification of an initial cohort of social care providers to become members of the Alliance.
5. In addition to the Mansfield & Ashfield and Newark & Sherwood Clinical Commissioning Groups (CCGs), the other partners in the Alliance are currently all health providers who were selected following a 'Most Capable Provider' procurement process by the CCGs. These providers are: Circle Nottingham Ltd; East Midlands Ambulance Service; Nottinghamshire Healthcare NHS Foundation Trust; Nottingham University Hospitals

NHS Trust; Sherwood Forest Hospitals NHS Foundation Trust; and United Lincolnshire Hospitals NHS Trust. In addition, the voluntary sector Mid-Nottinghamshire special purpose vehicle 'Together Everyone Achieves More' (TEAM) is an associate member. TEAM was established to enable the value of the Third Sector to help shape service transformation and is not itself a provider of services. Central Nottinghamshire Clinical Services was initially a member but in April 2016 went into administration and is therefore no longer a member of the Alliance. Social care perspectives within the Alliance have therefore been represented by ASCH involvement to date.

6. In recognition of the fact that partners will have differing levels of involvement in the design, delivery and implementation of the transformation plans there are two levels of Alliance Membership: Full and Associate. A Full Member has a vote on the Leadership Board, an active and key strategic role in developing and delivering transformation plans and takes a share in the risks and rewards of delivering the partnership's objectives.
7. An Associate Member will be invited to participate and contribute to meetings of the Alliance Leadership Board, but will not be entitled to vote, or expected to take a share of any Alliance risk and reward agreements. It is recognised that there are also potentially other providers and organisations that may not meet the requirements to be an Alliance Member, but could have a role in providing local services and important contributions to make. They will be able to be engaged through design and delivery work-streams that will sit under the Alliance Leadership Board.
8. Alliance partners will be engaged in the process of identifying social care providers, however, the Council has absolute discretion over the final decision as to any social care provider(s) it selects to form part of the Alliance as Associate Members. Full Alliance Membership needs to be agreed by the other Full Alliance Members and this is required at any time that a new health or social care Alliance Member is proposed. In reaching their decision, Members are asked to consider whether having the proposed organisation in the Alliance will support achieving the Alliance objectives and to support them joining where this is the case. If, however, unanimous Alliance agreement cannot be reached on the initial selection of the proposed new social care provider(s), this risk is mitigated by the fact that the Council has the right to terminate its membership and participation in the Alliance or to become an Associate Member upon service of one month's notice in writing.
9. The current providers that receive funding from the Council to deliver social care outcomes relevant to the current Better Together objectives in Mid-Nottinghamshire are:
 - British Red Cross, Integrated Community Equipment Loan Service
 - Home Care providers:
 - a) "Core providers" are Mears UK (Mansfield & Ashfield) and Comfort Call (Newark and Sherwood). These are the providers that are the Council's current core providers for a new care home care package for managed Personal Budgets.
 - b) Spot contractors e.g. Hatzfeld, Bluebird, AMG, for occasions when the core providers do not have the capacity to respond to new requests.
 - Residential and nursing care homes

- Prevention and Early Intervention providers e.g. Framework, Age UK
 - Care Support and Enablement providers
 - Direct Payment providers and Personal Assistants
 - Day Service providers – accredited and non-accredited
 - Micro-providers.
10. The Council already represents all its directly provided services, for example START reablement, through being a member of the Alliance. The majority of the objectives and discussions of Better Together Phase 1 correlate to the Council's services for older adults and therefore the initial selection is likely to have this focus.
 11. The benefits of having more social care providers in the Alliance are:
 - a) strengthening the breadth and range of the social care voice within the Alliance, which is currently predominantly health commissioners and providers
 - b) bringing a greater range of creative and flexible social care solutions to the table to inform improvements, new ways of working, as well as forge new relationships and cultures.
 12. Providers will have some flexibility for making improvements and culture change within their existing contract arrangements with the Council. Any significant contract variations considered would need to ensure that they complied with the Council's financial procedures and procurement law.
 13. Membership of the Alliance itself would not bring any additional procurement advantage or opportunities for the providers concerned, as this would violate current procurement regulations for social care. Legal advice from Weightmans on this development has determined that:
 - a) once selected, any new provider joining the Alliance will start to have exposure to new ideas on service redesign. All providers must acknowledge that their involvement in this Alliance cannot be used as an opportunity to influence and shape the market in their own self interests. Any provider involvement is advisory only and the Alliance will need to ensure that it does not distort competition. Any suggestions or recommendations made by providers need to be reasonable, objectively justifiable and in the interests of service users.
 - b) meetings where commissioners and providers come together are not undertaken in a competitive environment but are designed to work in collaboration to achieve better outcomes for service users.
 - c) accurate notes will be taken and maintained from relevant meetings. In case of challenge these will be required to support the Council's position and will likely need to be disclosed to other bidders during any procurement process.
 - d) the Alliance meetings are not to be used as a forum for any anti-competitive discussions or undertakings. Providers are reminded that in compliance with the Alliance agreement, should a service redesign require a competitive procurement process to be undertaken, then the Alliance commissioners will make the appropriate

arrangements to take the service requirements to the market. Providers must keep separate their alliance activities from their bidding teams.

14. In February 2016, all social care providers who operate in Mid-Nottinghamshire were invited to a briefing event run jointly by Nottinghamshire County Council Corporate Procurement and the Better Together Programme Director. Providers received information about the development of the Alliance, its aims and objectives. A question and answer session provided an opportunity for them to explore the options and implications for their organisation. Providers were asked to complete a questionnaire following the event and indicate if they were interested in further exploration of being a social care member of the Alliance.
15. An application process to identify the most capable and suitable social care provider(s) to join the Alliance has now been designed for these and future interested providers. The process will ask providers to set out their position in relation to the following questions:
 - a) service range: what services are currently provided, to whom and to deliver what outcomes?
 - b) capacity to engage with the Alliance:
 - does the provider have the management and data capacity to be able to attend meetings and take on any additional work that may arise, related to transformation?
 - does the provider have data about service usage that can be shared (anonymised)
 - is the provider already involved in strategic/partnership discussions of this nature elsewhere, or in the past?
 - c) integration:
 - does the provider have, or are they likely to have, a key role to play in delivering integrated services that will be of benefit for the target population?
 - is the provider already involved in joint working with other organisations to find new creative solutions that streamline services and support people more effectively?
 - what does the provider think it can contribute to the Alliance?
 - willingness to sign up to the Alliance principles and behaviours.
16. Using the responses to these questions, it is proposed that officers from the Adult Social Care, Health and Public Protection department and Corporate Procurement will select the most capable and suitable social care provider/s to join the Alliance. The process will involve scoring of responses and an interview. It will be up to successful providers to determine if they wish to join as an Associate or Full Member, since there are different implications for the organisation depending on the level of membership.
17. Social care and health providers joining the Alliance may be subject to change as care providers are selected to deliver services by the Council and CCGs through competitive tender processes. As the Better Together programme develops it may also be necessary to bring in other provider members as required.

18. Committee is requested to consider the proposed process and give approval for it to be implemented.

Reason/s for Recommendation/s

19. A transparent selection process is needed to identify the most capable and suitable social care provider to join the Better Together Alliance. This report sets out the proposed process.

Statutory and Policy Implications

20. This report has been compiled after consideration of implications in respect of crime and disorder, finance, human resources, human rights, the NHS Constitution (Public Health only), the public sector equality duty, safeguarding of children and vulnerable adults, service users, sustainability and the environment and ways of working and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Financial Implications

21. There are no financial implications arising from this report.

Implications for Service Users

22. The overall aim of the Better Together programme is to deliver improved health and social care outcomes for service users. Having additional social care providers on the Alliance will ensure that social care objectives, skills and priorities will be presented appropriately in all relevant discussions.

RECOMMENDATION/S:

- 1) That the application process referred to in paragraphs 15 to 17 (inclusive) of this report be undertaken for the purposes of selecting the most capable and suitable social care provider/s to join the Mid-Nottinghamshire 'Better Together' Alliance.

Sue Batty
Service Director, Mid Nottinghamshire

For any enquiries about this report please contact:

Sue Batty
Service Director, Central Nottinghamshire
Adult Social Care, Health and Public Protection
T: 0115 9774632
E: sue.batty@nottscc.gov.uk

Constitutional Comments (SMG 27/06/16)

23. The proposals set out in this report fall within the remit of the Committee.

Financial Comments (KAS 21/06/16)

24. There are no financial implications contained within the report.

Background Papers and Published Documents

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

The Mid-Nottinghamshire 'Better Together' Alliance Agreement contract – report to the Adult Social Care & Health Committee on 7 March 2016.

Electoral Division(s) and Member(s) Affected

All.

ASCH410