

10 December 2018

Agenda Item: 12

REPORT OF THE SERVICE DIRECTOR, STRATEGIC COMMISSIONING, SAFEGUARDING AND ACCESS

UPDATE ON THE IMPLEMENTATION OF THE NEW HOME BASED CARE AND SUPPORT SERVICES

Purpose of the Report

1. This report provides an update on the implementation of the new model for home based care services including notification of any further awards of new contracts and the use of the Dynamic Purchasing System (DPS).
2. The report gives an update on the progress of the Home First Response Service (HFRS) and seeks approval for implementing the 'Contributions towards a Personal Budget Guidance' to this service in-line with the recent amendment to the START (Short Term Assessment and Reablement) service.

Information

Background

3. A number of reports have been presented to this Committee over the past few years about the tender for home based care and support services and the new model of service delivery. Previous reports highlighted the considerable work that had been undertaken to understand the complexities and challenges of the home care market both at a local and national level. They also referred to the new model of services which was developed to address some of these issues by offering fair financial remuneration and greater security to providers, whilst in return expecting better quality services that provide person-centred care to service users and their carers.
4. The service will deliver home based care and support services for a period of five years with the option to extend up to a maximum of 10 years in total. It is part of a system of services to keep people living at home including reablement, rapid response, hospital discharge, carers support, assistive technology and housing with care.

Update on the implementation of the new Home Based Care Services

5. The previous report to Committee in July announced the outcomes of the two tenders which were to procure a 'Lead Provider' for each of the six areas or 'lots' plus 'Additional Providers', also for each lot. The lot areas are:

- Bassetlaw
- Broxtowe
- Gedling
- Mansfield and Ashfield
- Newark and Sherwood
- Rushcliffe.

The Lead Providers are also required to provide care and support services to all nominated service users in the Housing with Care schemes within their lot area.

6. After the initial procurement exercise not all areas had sufficient providers so a second phase of tenders was held for a Lead Provider in Rushcliffe and more Additional Providers in Bassetlaw, Newark & Sherwood and Rushcliffe. These were concluded in October and as at week commencing 5 November the overall list of providers is detailed in **Appendix A**.
7. The first phase of the new contracts commenced on 1 July followed by an implementation and transition phase until October 2018. This was successfully completed with little disruption to service users and services have been commissioned with an outcome focus and a payment system that moves away from 'time and task'.
8. New commissioning arrangements for home based care mean all new care packages are sent to the appointed Lead Provider for the Lot who is required to accept a minimum of 75% of these. Packages not picked up by the Lead Provider are sent to the Additional Providers in the Lot. Additional Providers are required to offer on a minimum of 25% of these packages. Any packages not picked up by either Lead or Additional Providers are advertised to a wider pool of providers via the Dynamic Purchasing System (DPS).
9. Over 700 packages of care were recommissioned and transferred to one of the new providers through the new arrangements, the majority in Mansfield/Ashfield and Newark & Sherwood areas. Providers also picked up care packages from the existing waiting list in place on 1 July in addition to requests for new referrals and overall there has been a reduction of the number of people awaiting a long term package from over 250 in July to less than 30 by the end of November.
10. Bassetlaw, a previously difficult to serve area, is working well with both Lead and Additional Providers responding to the majority of referrals for that area. In other areas acceptance rates are generally lower than contractually required for both Lead and Additional Providers. However it is still early in the implementation of the new model and contracts and the measures that have been put in place to rectify this position are starting to be effective with improved pick-up by providers. The measures are described later in this report.

Home First Response Service Overview

11. The HFRS is a short term rapid response service for up to a target maximum of 14 days to facilitate discharge from hospital or to prevent unnecessary admission to short term care or hospital due to a temporary crisis at home. The service is a county-wide service and delivered by one provider, Carers Trust East Midlands, to ensure consistency and

flexibility. The service commenced in December 2017 so has been in operation for almost 12 months.

12. From mid-December 2017 to the end of October 2018 1,169 people have been referred into HFRS. Of these 1,082 had received the service and been discharged and the remaining were ongoing.
13. The service, which is accessible seven days a week, is recognised by staff and service users as an excellent service. In recognition of this and in preparation for winter pressures extra capacity has been commissioned to ensure that people being discharged from hospital are returned home as quickly and as smoothly as possible.
14. As this is a short term reablement type service which is offered pre the Care and Support Assessment (CASA) there is currently no assessed contribution for the service. This report is seeking approval to apply the 'Contributions towards a Personal Budget Guidance' once service users have received a CASA and are identified as being eligible for on-going social care services. This is in-line with the recent change to the Council's START service.

Dynamic Purchasing System

15. The DPS process is now fully operational and provides a further opportunity to place packages that have not been accepted by Lead or Additional Providers. Care packages have been advertised through the DPS process with no significant increase in hourly rates.

Actions to build market resilience and capacity

16. Availability of home care services is a national, as well as local, issue and the recruitment and retention of sufficient workforce remains a challenge. The Council is actively trying to address these difficulties with this different model of home based care which is designed to build and support capacity in the local market over a 10 year period.
17. The Council has invested significant energy and resources into designing this new model and it will take some time to embed the change in culture that is required to realise the vision. The new model of service delivery will provide an opportunity for improved terms and conditions to provider staff as well as greater job satisfaction for care staff. This will encourage a more reliable and consistent workforce which in turn will improve the quality of services being delivered.
18. So whilst there are still challenges in terms of provider capacity there are also opportunities to deliver greater efficiencies in systems and processes as well as supporting providers to collaborate and create a more motivated and vibrant workforce.
19. In order to monitor that staff terms and conditions are improving the new contract requires the provider to evidence year on year increase in the number of staff offered a salaried contract. An example of good practice is that since the introduction of the new contracts one of the main Lead Providers is promoting and encouraging guaranteed contracted hours and is advertising posts at hourly rates up to £10.00 for care staff.
20. More immediately though, and in the context of winter pressures planning, the following activities have been initiated to help provide market capacity over the coming months:

- weekly monitoring of providers' performance and target setting on pick-up of new referrals and recruitment of staff
- strict application of contract requirements which, for those providers who do not meet the standards required, may result in sanctions being applied including termination of contracts
- retendering to increase the overall pool of providers particularly in areas where there are insufficient providers
- support to providers to work together and build capacity through sharing good practice around recruitment and retention or by focusing on particular localities in the area to problem solve issues
- the DPS is fully embedded within the model
- two temporary Community Partnership Officers have been funded from the additional national funding for adult social care¹ to act as link workers with the hospital discharge teams and operational staff to ensure homecare requests for hospital discharge, HFRS and START progress through the system in a timely manner.
- funding for additional capacity in HFRS has also been made available in recognition of the increased demand.

Communications, Engagement and Co-production

21. The Council continues to work with the 'Experts by Experience' engagement group, who were involved in the evaluation of the tenders and have also offered advice to officers on producing appropriate communications for service users and carers. The group is now considering how its members can be involved in the on-going quality monitoring of services and how to attract new members.
22. The Council will continue to inform and involve service users, carers, providers, staff, health partners, stakeholders and the public in the ongoing work and implementation of the new services.

Other Options Considered

23. To not proceed with the proposed amendments to apply the Council's existing home care charging policy to people who continue to receive the HFRS once they have been assessed for on-going social care services and are awaiting a care provider. As already stated, as the proposals are in line with the Council's current charging policy, any recommendation not to proceed would be inconsistent and inequitable.

Reasons for Recommendations

24. The Council is required to procure services in line with its statutory obligations and to oversee and create a diverse and vibrant market on behalf of the population of Nottinghamshire as required under The Care Act 2014.
25. The Council is also required to seek a contribution for services once a service user has been assessed as being eligible for care services, this includes self-funders where the

¹Approved in the 'Proposals for allocation of additional national funding for Adult Social Care Addendum' report to Adult Social Care and Health Committee on 12 November 2018

individual chooses to have their services arranged through the Council. The amendments described in **paragraph 14** of this report are recommended to ensure a consistent and equitable approach to adult social care charging.

Statutory and Policy Implications

26. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment 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

27. The current spend on home based care and support services is within the expected budget and the cost of the homecare service is monitored monthly with the forecast costs contained within the monthly budget monitoring. Financially assessing service users who remain in HFRS will also bring this service in line with the START reablement service and other care packages provided by the Council. Any income generated will be included with future budget monitoring reports.

Public Sector Equality Duty Implications

28. The nature of the services being commissioned mean they will affect older adults and people with disabilities, including people who have multiple and complex health and social care needs. The Council completed an Equality Impact Assessment to consider the implications of the tender process on people with protected characteristics.

Implications for Service Users

29. The Council has a statutory duty to ensure there is sufficient provision of a diverse range of services to meet people's social care and support needs. The re-modelling of home based care services has been to enable the Council to commission sufficient volumes of home care services and to ensure these services are flexible, sustainable and able to meet current and future needs.
30. It is expected that the providers of the new services will be able to offer staff improved terms and conditions which will encourage a more reliable and consistent workforce which in turn will improve the quality of services being delivered.

Implications for Sustainability and the Environment

31. The payment rates and method will provide a more realistic rate to independent sector providers who will be able to invest in their workforce.

RECOMMENDATIONS

That the Committee:

- 1) considers whether there are any further actions it requires arising from the information on the progress of the procurement and implementation of the home based care and support services.
- 2) approves the implementation of the 'Contributions towards a Personal Budget Guidance' to the Home First Response Service in-line with the Council's current charging policy and recent changes to the Short Term Assessment and Reablement service.

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Constitutional Comments (LM 27/11/18)

32. The Adult Social Care and Public Health Committee is the appropriate body to consider the contents of the report.

Financial Comments (DG 27/11/18)

33. The financial implications are contained within paragraph 27 of this 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.

Tender for Home Based Care and Support Services – report to Full Council on 26 September 2013

The Social Care Market: Provider Cost Pressures and Sustainability – report to Adult Social Care and Health Committee on 30 November 2015

Annual Budget 2016-17 – report to Full Council on 25 February 2016

Tender for older people's home based care and support services – report to Adult Social Care and Health Committee on 18 April 2016

Tender for older people's home based care and support services – report to Adult Social Care and Health Committee on 11 July 2016

Tender for older people's home based care and support services - report to Adult Social Care and Public Health Committee on 12 June 2017

Tender for older people's home based care and support services - report to Adult Social Care and Public Health Committee on 13 November 2017

Equality Impact Assessment

New ways of working for Home Based Care Services – review of case studies: February 2018

Tender for older people's home based care and support services - report to Adult Social Care and Public Health Committee on 12 March 2018

Revision to the Adult Social Care Charging Policy - report to Policy Committee on 28 March 2018

Update on Tender for Home Based Care and Support Services - report to Adult Social Care and Public Health Committee on 9 July 2018

Proposals for allocation of additional national funding for Adult Social Care – report to Adult Social Care and Public Health Committee on 12 November 2018

Proposals for allocation of additional national funding for Adult Social Care Addendum - report to Adult Social Care and Public Health Committee on 12 November 2018

Home based care & support services project – presentation - report to Finance and Major Contracts Management Committee on 19 November 2018

Electoral Division(s) and Member(s) Affected

All.

ASCPH603 final