

# ADULT SOCIAL CARE SCRUTINY COMMISSION REPORT

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Update on Domiciliary Support

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Cllr Sarah Russell – Deputy City Mayor – Lead for Adult  
Social Care

Martin Samuels – Strategic Director – Social Care &  
Education

Date 26 August 2021

Wards Affected: All

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## **1. Purpose**

- 1.1 To provide the Adult Social Care Scrutiny Commission with an update on key aspects of domiciliary support delivered in Leicester.

## **2. Summary**

- 2.1 Adult Social Care commissions domiciliary support for the City Council and on behalf of Leicester City CCG through a framework contract of 39 providers. Prior to award of this contract, an extensive commissioning review took place to finalise the service design including robust engagement with people who use services and other stakeholders including the Adult Social Care Scrutiny Commission.
- 2.2 This contract was awarded in 2017 for a period of five years with the option to extend the contract for up to 2 years.
- 2.3 At present, around 2064 people receive commissioned care at any one time, with around 300 individuals starting packages each month, though the demand is seasonal. The total number of hours of care delivered is about 1.3m (about 25k per week).
- 2.4 The total net expenditure in 2020/21 was approximately £20m. This represents a significant increase compared to previous years, with expenditure in 2019/20 having been only £15m.

## **3. Recommendations**

- 3.1 The Adult Social Care Scrutiny Commission is recommended to:
  - a) note the content of the report and to provide comment/feedback.

## **4. Report**

### **Summary of activity**

- 4.1 Adult Social Care commissions domiciliary support for the City Council and on behalf of Leicester City CCG through a framework contract of 39 providers. Prior to award of the current contract, an extensive commissioning review took place to finalise the service design including robust engagement with people accessing

services, care management staff and other professionals, especially health colleagues, Unison, benchmarking and research with other councils and best practice, national and local policy, and learning from what worked well and not so well in previous models. The members of the Adult Social Care Scrutiny Commission were engaged in the discussions, and this is further detailed in paragraph 5 of this report.

- 4.2 This contract was awarded in Summer 2017 for a period of five years from October 2017, with the option to extend the contract for up to 2 years. During the life of the contract, the framework has been reopened twice to admit new providers. Built into the contract model is the ability to pilot work where a need arises. This has been used to pilot a hospital bridging service which seeks to support people to be discharged from hospital in a timely way.
- 4.3 At present, around 2064 people receive commissioned care at any one time, with around 300 individuals starting packages each month, though the demand is seasonal. The total number of hours of care delivered is about 1.3m (about 25k per week).
- 4.4 In the last reporting quarter, 2064 people were in receipt of a commissioned package of care. A total of 3279 hours of support were commissioned.
- 4.5 The table below shows the total number of persons accessing domiciliary care services, split by those accessing via directly commissioned care and those accessing through a direct payment for the 4 quarters of 2020/21. Additionally, those receiving directly commissioned care, have been split out into LCC funded, NHS funded and Non-Weight Bearing (NWB) pathway cases. The Non-Weight Bearing Pathway is a funding stream provided by the NHS for individuals who have no other medical needs, but who cannot stand/bear weight on their limbs. As a result of the Covid-19 pandemic, “Off Framework Domiciliary Care” has been added to denote packages of care commissioned with providers supporting with extra capacity during the Covid-19 pandemic.

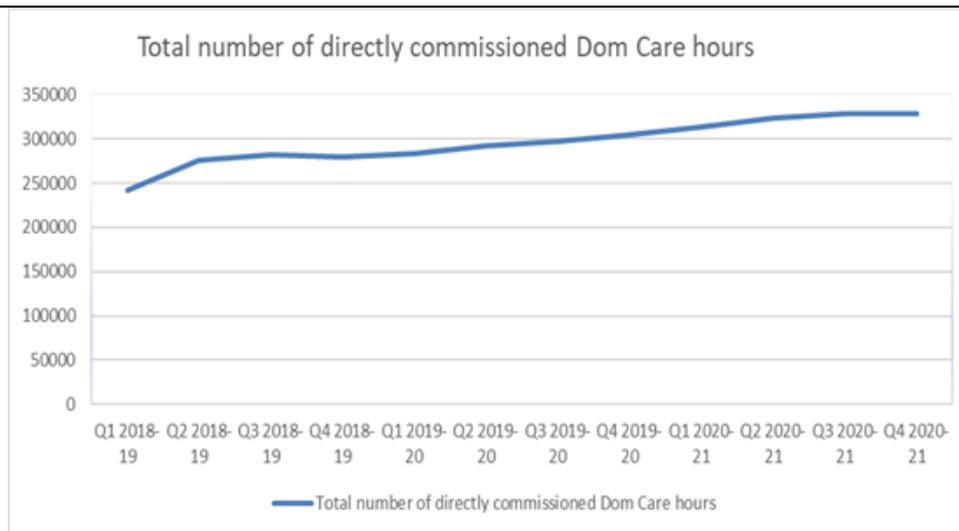
What is being measured ?	Key Performance Indicator	2017-18 average	2018-19 average	2019-20 average	Q1 2020 -21	Q2 2020 -21	Q3 2020 -21	Q4 2020 -21
Levels of service activity - Domiciliary Care	Total number of individuals in receipt of a directly commissioned Domiciliary Care package	1818	1840	1875	1792	1699	1950	2087
	<i>LCC funded</i>		1754	1792	1685	1577	1776	1889

	<i>NHS funded</i>	This was not split prior to 2018-19	75	73	80	67	73	82
	<i>NWB pathway</i>		11	10	4	0	0	3
	<i>Off Framework Domiciliary Care</i>	New Service Level from 2020-22	n/a	n/a	23	55	101	113

4.6 The table below shows the total number of hours of directly commissioned domiciliary care services per quarter for 2020/21, again split by funding arrangements. There has been an increase from the figures reported in Q4 2020-21, to illustrate, we have seen a 0.4% increase in commissioned hours in Q4 (compared to Q3) and 11.9% more compared to the average number for 2019-20 yearly average.

What is being measured?	Key Performance Indicator	2017 – 18 quarterly average	2018 – 19 quarterly average	2019 – 20 quarterly average	Q1 2020 - 21	Q2 2020 - 21	Q3 2020 – 21	Q4 2020 - 21
Levels of service activity - Domiciliary Care	Total number of hours of directly commissioned Domiciliary Care delivered within the period	225,708	269,817	294,302	313,736,	323,797,	327,935,	329,179
	LCC funded	This was not split prior to 2018-19	231,185	254,374	244,937	224,159	255,668	280,681
	NHS funded		38,632	39,928	42,512	40,206	37,094	39,784
	NWB pathway		0	0	0	0	0	0
	Covid-19 pathway		New pathway from 2020-22	n/a	n/a	26,287	59,432	35,173

4.7 The figure below further highlights the wider trend in terms of commissioned hours which are increasing over time. Recent increases in demand reflect the pressures being experienced from hospital discharges and community referrals. Many hospital discharge packages are significantly higher than usually experienced but may get reassessed after a short period of time once a thorough assessment of the person's needs is undertaken. Paragraph 4.30 has more detail.



### **Monitoring Service Activity Through Electronic Care monitoring**

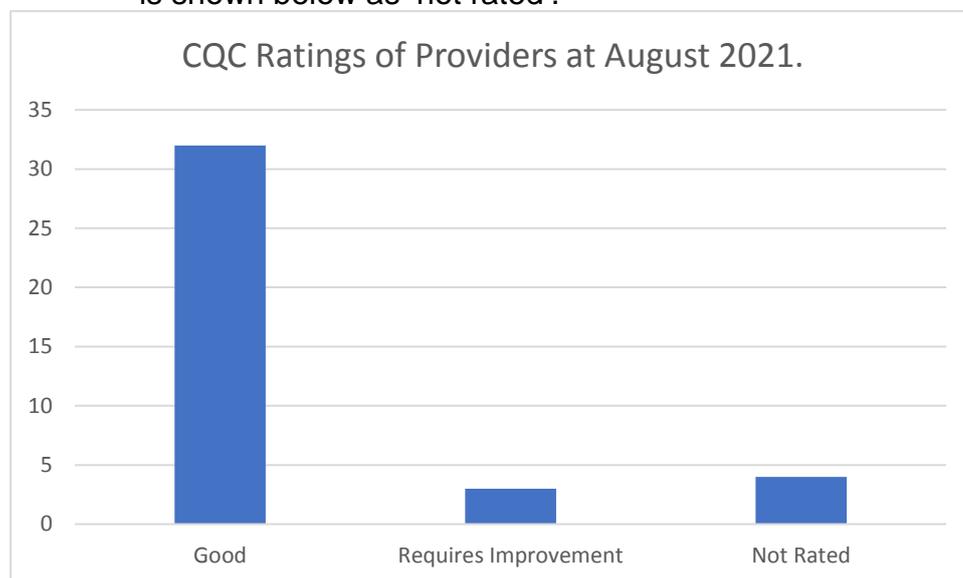
- 4.8 Within the Adult Social Care & Commissioning Division, Contracts & Assurance (CaAS) monitor service activity through electronic care monitoring (ECM), which comprises IT systems and processes for carers to log their entry and exit from a care call, and in some cases complete care records using mobile devices.
- 4.9 The contract requires providers to submit call data every 28 days to the Authority, for both quality monitoring and payment purposes. Providers are also required to monitor their ECM systems on a real time basis to ensure the risks of missed calls to people who use domiciliary care are reduced.
- 4.10 For the first two years of the contract, the Authority had to provide significant support to providers to ensure they were compliant with the requirements in the contract. Action plans were issued to a number of providers and by the end of 2019, all providers were compliant with ECM requirements.
- 4.11 For quality purposes, data is used to monitor the key performance indicators in the contract, including early / late attendance at calls, and continuity of care.
- 4.12 For finance purposes, data is checked by CaAS prior to submission to Finance colleagues for accuracy. Checks over the course of 2020 – 2021 have identified savings of approximately £50000 where providers have incorrectly charged or made errors with submissions.
- 4.13 ECM data is then uploaded to Council systems and validated prior to payment.
- 4.14 An audit was conducted by Internal Audit in 2020 of the systems and processes used in Domiciliary Care to pay providers and this found substantial assurance that systems and processes were robust and made one recommendation for the service to consider

automatic reporting of call data to care management colleagues for review purposes.

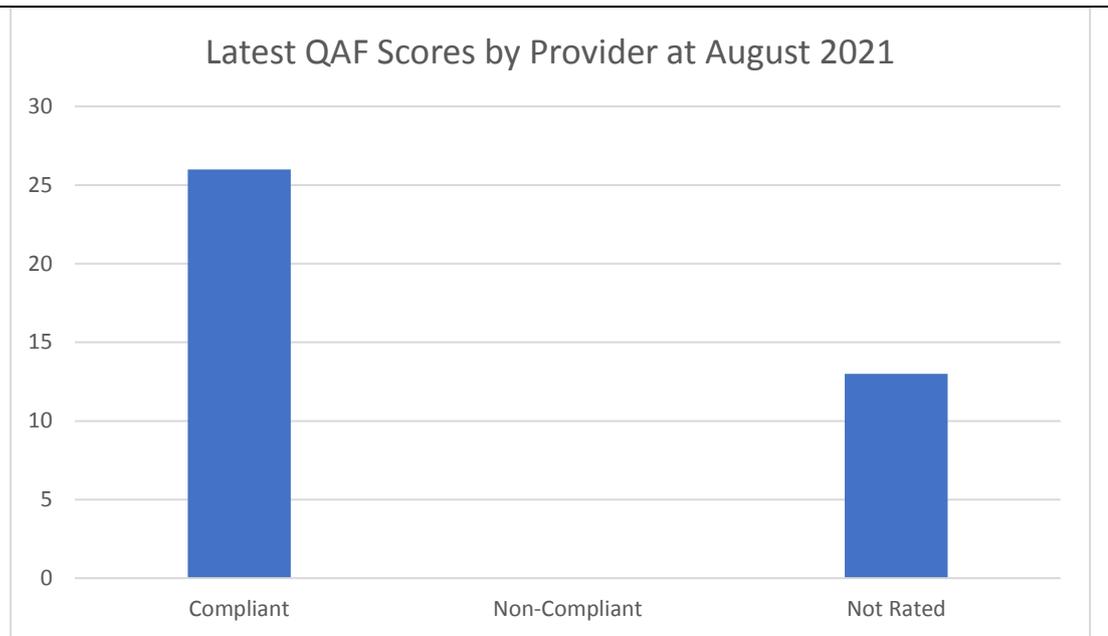
### **The Quality Assurance Process**

4.15 The Quality Assurance of Domiciliary Care Providers consists of several processes including investigation and analysis of safeguarding concerns and complaints, monitoring of key performance indicators using electronic care monitoring, assessment through the quality assurance framework, and regulatory inspection.

4.16 Latest CQC rankings for contracted Providers (including new to the framework). Providers are not always rated by CQC until a visit is arranged according to a risk assessment undertaken by them. That is shown below as 'not rated'.



4.17 The Council's Quality Assurance Framework assesses providers across a range of contractual requirements and includes assessing evidence and seeking the views of people who use the service and staff.



4.18 All the current providers on the domiciliary support framework are compliant with the Quality Audit Framework (QAF). Only providers who recently joined the Framework in April 2021 are not rated, however, these providers have undertaken pre-contract checks prior to contracts being signed to ensure these providers are ready and capable of delivering the service.

4.19 The service has resumed quality visits to providers in line with lockdown easements following the Covid-19 pandemic.

**Number of People Supported over the period of the contract**

4.20 Detailed in Appendix 1 is a table showing the number of people supported by Domiciliary Care agencies over the course of the current framework agreement.

4.21 To note: 2017/18 and 2021/22 have returned a lower total due to the contract not starting until October 2017 and 2021/22 being the figures up to the end of June.

4.22 Appendix 1 details a provider-by-provider breakdown of the above figures and shows currently contracted as well as Providers that are no longer contracted.

4.23 The reasons for a provider ending its contractual arrangements with the authority vary, and could include:

4.23.1 Termination due to performance, quality, and safeguarding issues

4.23.2 Termination due to closure of the business

4.23.3 Termination due to the natural end of the contract (in the case of the Covid-19 emergency contracts)

4.23.4 Termination due to the novation (transfer) of a contract between two different providers due to merger, acquisition, or purchase of a company legal entity.

**Contract costs**

4.24 The annual spend in 2020/21 was £20m which exceeds the usual annual spend by about £5m. This is in the main due to the increase in support commissioned because of Covid and other pressures as described in paragraph 4.7

4.25 Appendix 2 details the total funding for supported packages paid to providers since the beginning of the contract.

4.26 It should be noted that the table in Appendix 2 does not include some payments for sleep-in / live-in care and manual payments made to providers, hence the disparity between the £20m total in 4.24 above.

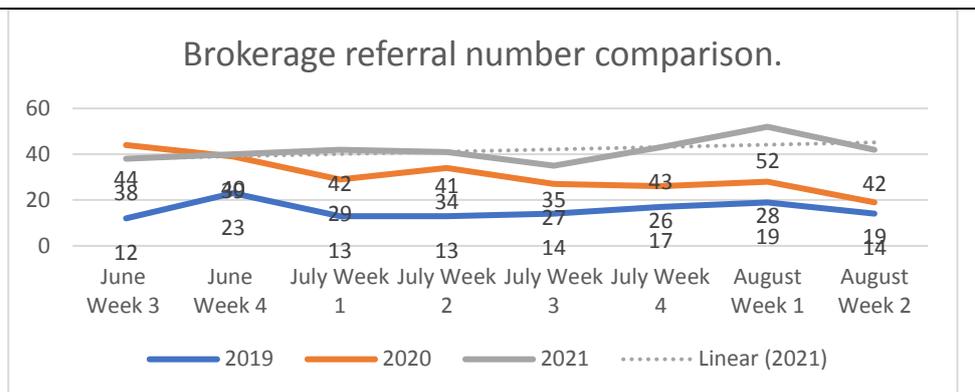
### **Market Considerations**

4.27 The COVID pandemic has had a significant impact on the way that domiciliary care and support has been provided, and the market has adapted well to the new context. Most quality concerns raised centred around a lack of compliance with COVID-19 PPE and infection control procedures by individual members of care staff, and management of PPE by providers. This was attributed to the everchanging landscape of national guidance and access to PPE stock at the start of the pandemic. Each provider was proactive in rectifying issues with support from the Authority with stocks of PPE and audit tools. We also saw a more collaborative approach between providers to ensure that the wider market remained safe. This collaborative approach was also extended to providers buddying up to deliver training to small groups of care staff in larger venues and outdoor space using open side marquees. Some of our larger providers were also happy to support the smaller providers by offering their staff places on their sessions, and with smaller providers offering their premises to facilitate training.

4.28 Spot contracts were awarded to support with COVID demand, which gave the authority the opportunity to identify gaps that existed in the market which spot providers appeared to fill. These included responding to cases where male carers were preferred, cases in the East of the city and some of the outlying areas, and Somalian speaking care staff. There were also issues with struggling to place calls where two carers were required. The spot contracts were recently allowed to end and most of those providers applied to be on the contracted framework when it was reopened recently which gives additional capacity to commissioners and allows us to monitor the quality of provision and address shortfalls where necessary.

4.29 Although the domiciliary care market in the City was stable during the pandemic, and the addition of the new providers means that the market should continue to be in a good position as we move towards the winter where demand is higher and for any unanticipated COVID demands, we are currently facing unprecedented demand from community and hospital referrals.

4.30 The graph below shows a significant increase in referrals to the brokerage service for the same 7-week period in 2019, 2020, and 2021:



4.31 That demand together with recruitment issues currently faced by the market, staff holidays, sickness and the recent 'pingdemic' has seen the market under some pressure. We are actively working with providers to support them and explore solutions to their problems.

## 5. Scrutiny Overview

The Adult Social Care Scrutiny Commission were involved in the commissioning review and their comments taken into consideration in the service design. Reports were presented to ASC Scrutiny Commission in:

- August 2016
- September 2016
- June 2017
- September 2017
- January 2018
- March 2018
- September 2018

## 6 Financial

- a. There are no direct financial implications arising from this report.
- b. For note, in 2020/21 £20m was spent which compares to the spend of £15m in 2019/20. The increase in spend of £5m is due to additional demand for domiciliary care due for early discharge from hospitals and higher package costs due to the pandemic.

Rohit Rughani, Principal Accountant, Ext. 37 4003

## **7 Legal**

The report is for briefing and no direct legal implications arising at this stage.

*Mannah Begum, Principal Solicitor, Commercial, Ext 1423*

## **8 Equalities**

. In carrying out its duties the Council must comply with the Public Sector Equality Duty (PSED) (Equality Act 2010) by paying due regard, when carrying out their functions, to the need to eliminate unlawful discrimination, harassment, victimisation and any other conduct prohibited by the Act, to advance equality of opportunity and foster good relations between people who share a 'protected characteristic' and those who do not. In doing so, the council must consider the possible impact on those who are likely to be affected by the recommendation and their protected characteristics.

Protected Characteristics under the Equality Act 2010 are age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, sexual orientation. The act continues the duty of service providers and employers to make "reasonable adjustments" to ensure that people with disabilities are not disadvantaged.

There are no direct equality implications arising from the report as it provides an update on key aspects of domiciliary support delivered in Leicester. Underpinned by the Care Act, adult social care supports many different people, including older people, disabled people and those with long-term conditions, those in need of support to maintain good mental health, and those who are mentally unwell, along with their carers. Domiciliary care allows service users to maintain their independence and quality of life. People from across all protected characteristics at any stage of life could require domiciliary care including those with learning disabilities, mental health problems, sensory impairment or physical disabilities.

COVID 19 will have disproportionately impacted on particular protected characteristic groups, either directly or indirectly. The report does not include equality monitoring information, however, where this is collected, it may be useful in establishing where and for whom COVID 19 has had disproportionate impacts and may provide a useful indication for further work, for the Council and partners.

Surinder Singh, Equalities Officer Tel 37 4148

## **9 Climate Change**

There are no climate change implications associated with this report.

## **10. Appendices**

Appendix 1 – Data - People supported by provider by contract year.

Appendix 2 – Funding by provider

## **11. Background Papers**

None

**Appendix 1 – Data – People supported by provider by contract year.**

<b>Provider</b>	<b>2017-18</b>	<b>2018-19</b>	<b>2019-20</b>	<b>2020-21</b>	<b>2021-22</b>	<b>Contract Type</b>
Adaptus Cares Limited	36	91	140	166	116	Framework Provider
Alliance SC Limited	-	-	-	7	-	Covid-19 Temporary Emergency Contract
Alpha Imperial Care	-	-	-	3	-	Covid-19 Temporary Emergency Contract
Amicare Domiciliary Care Ltd	14	1	29	81	52	Framework Provider
Aspire UK	484	545	521	473	399	Framework Provider
Blue Arch Homecare	-	-	-	16	-	Covid-19 Temporary Emergency Contract
Bluewood Healthcare	93	199	204	207	155	Framework Provider
Bonney Care Agency Ltd	18	30	34	16	16	Framework Provider
Care 4U (Leicestershire) limited	8	24	27	20	20	Framework Provider
Carers Direct Homecare Ltd	20	72	193	214	168	Framework Provider
Choices Care Ltd	84	88	74	48	39	Framework Provider
CM Community Care Services Ltd	-	-	16	44	22	Framework Provider
Creative Care Limited	-	-	-	10	-	Covid-19 Temporary Emergency Contract
Domiciliary Care Services (D.C.S.)	94	113	105	97	77	Framework Provider
Evolving Care LTD	22	31	53	34	40	Framework Provider
Family Care Agency Ltd	20	74	68	40	34	Framework Provider
Fosse Healthcare Ltd	17	16	27	20	12	Framework Provider
Green Square Accord	58	63	61	67	48	Framework Provider
Hales Group LTD	-	-	1	7	3	Framework Provider
Help At Home	205	299	286	301	218	Framework Provider
HH Care Limited	-	1	-	-	-	Framework Provider
HK Care Consulting Ltd	-	-	-	2	-	Covid-19 Temporary Emergency Contract

ICall Care	-	-	-	7	-	Covid-19 Temporary Emergency Contract
Melton Care Services Ltd	-	-	11	15	12	Framework Provider
Meridian Health and Social Care	125	163	139	86	78	Framework Provider
Mi Life Care Services Limited	28	62	71	89	74	Framework Provider
Nationwide Care Services Ltd	14	59	-	-	-	Framework Provider - Now Ended
Panashe Care Services Ltd	-	-	-	1	-	Covid-19 Temporary Emergency Contract
Precious Hope Health & Home Care Ltd	-	-	9	30	31	Framework Provider
Private Home Care UK LTD	62	68	76	81	62	Framework Provider
Raageh Care Ltd	-	-	-	27	28	Framework Provider
Richmore Care Services	-	-	-	2	12	Framework Provider
SELECT CARE SERVICES LTD	-	-	-	24	22	Framework Provider
Sensitive Care Solutions Ltd	-	-	-	2	20	Framework Provider
Spirit Homecare	-	-	41	62	45	Framework Provider
UK Care Team Ltd	14	55	87	108	76	Framework Provider
UK Top Care Limited	-	-	-	8	0	Covid-19 Temporary Emergency Contract
Westminster Homecare (Leicester)	222	355	317	238	176	Framework Provider
Sensitive Care Solutions	-	-	-	20	1	Covid-19 Temporary Emergency Contract
Ark Home Healthcare	189	11	-	-	-	Framework Provider - Now Ended
Carewatch Care Services Limited	99	2	-	-	-	Framework Provider - Now Ended
English Rose Care Ltd	21	43	2	-	-	Framework Provider - Now Ended
Synergy Homecare	-	-	-	12	-	Covid-19 Temporary Emergency Contract
Universal Care Services (UK) LTD	56	40	1	-	-	Framework Provider - Now Ended
Wellbeing and Support Ltd	-	-	-	12	8	Covid-19 Temporary Emergency Contract
UK Top Care Ltd	1	1	-	-	-	Framework Provider - Now Ended
<b>Total</b>	<b>2004</b>	<b>2506</b>	<b>2593</b>	<b>2697</b>	<b>2064</b>	

Appendix 2 – Funding by Provider

Provider	2017/2018	2018/2019	2019/2020	2020/2021	2021/2022	Grand Total
Abundant Life	£2,277.89					£2,277.89
Adaptus	£93,638.23	£457,122.69	£826,923.57	£1,123,456.70	£283,180.30	£2,784,321.49
Alliance Speciality Care				£14,631.18		£14,631.18
Alpha Imperial Care				£33,430.94		£33,430.94
Amicare			£37,969.85	£202,889.90	£94,687.99	£335,547.74
Ark Home Healthcare	£875,576.81	£17,369.73				£892,946.54
Aspire	£2,647,089.14	£2,931,059.97	£3,234,858.71	£3,423,429.26	£1,007,450.40	£13,243,887.48
Blue Arch Homecare				£151,168.23		£151,168.23
Bluewood	£372,450.06	£1,212,582.05	£1,279,157.34	£1,771,104.33	£537,877.43	£5,173,171.21
Bonney Care	£46,172.37	£141,162.69	£148,143.08	£142,316.60	£25,221.43	£503,016.17
Care 4U	£51,875.10	£118,343.42	£268,307.36	£238,288.87	£40,672.57	£717,487.32
Carers Direct	£237,412.64	£682,216.98	£1,251,690.86	£1,914,751.27	£620,358.43	£4,706,430.18
CareWatch Care Services	£11,386.67					£11,386.67
Choices Care	£427,215.61	£464,038.63	£547,386.46	£504,911.69	£125,255.61	£2,068,808.00
CM Community Care			£21,844.99	£173,265.51	£57,043.15	£252,153.65
Creative Care Limited				£90,783.30		£90,783.30
DCS	£1,112,378.13	£1,192,574.47	£1,191,686.43	£1,252,863.48	£335,033.20	£5,084,535.71
English Rose	£41,485.74	£315,909.12	£2,026.66			£359,421.52
Evolving	£23,016.59	£132,046.34	£155,127.18	£183,453.64	£59,938.79	£553,582.54
Family Care	£68,165.43	£307,925.90	£503,906.36	£430,219.98	£123,997.21	£1,434,214.88
Fosse Healthcare	£21,450.61	£205,710.07	£118,926.70	£76,965.39	£18,677.37	£441,730.14
Green Square Accord	£373,288.22	£308,603.94	£325,990.73	£383,133.85	£103,205.34	£1,494,222.08
Hales			£2,856.20	£5,755.87	£2,868.82	£11,480.89
Help at Home	£1,473,878.46	£1,887,988.70	£1,707,243.45	£1,743,236.83	£475,189.72	£7,287,537.16
HK Care Consulting Ltd				£35,898.70		£35,898.70

iCall Care Ltd				£128,231.49		£128,231.49
Melton			£25,930.05	£46,670.75	£12,973.10	£85,573.90
Meridian	£592,597.16	£719,243.22	£710,626.67	£544,873.86	£162,096.37	£2,729,437.28
MiLife	£62,212.06	£280,770.15	£343,980.07	£466,799.01	£178,707.43	£1,332,468.72
Panashe Care Services Ltd				£5,914.56		£5,914.56
Precious Hope			£29,944.10	£147,363.78	£56,742.52	£234,050.40
Private Home Care	£445,936.75	£634,882.40	£747,839.90	£766,017.78	£185,293.73	£2,779,970.56
Raageh Care Ltd				£171,401.53	£85,850.95	£257,252.48
Richmore Care Services				£11,592.66	£29,109.81	£40,702.47
Select Care Services				£104,195.62	£33,614.20	£137,809.82
Sensitive Care Solutions				£136,236.11	£64,461.27	£200,697.38
Spirit Home Care			£55,230.03	£208,976.31	£72,764.83	£336,971.17
Synergy Home Care				£54,733.91		£54,733.91
UK Care Team	£21,221.52	£239,266.77	£444,900.82	£895,638.73	£242,578.99	£1,843,606.83
UK Top Care Limited	£15,299.06	£7,788.01		£46,079.94		£69,167.01
Wellbeing and Support Ltd				£57,423.53		£57,423.53
Westminster Home Care	£1,230,107.39	£1,917,909.89	£1,696,158.00	£1,457,752.08	£369,689.55	£6,671,616.91
<b>Grand Total</b>	<b>£10,246,131.64</b>	<b>£14,174,515.14</b>	<b>£15,678,655.57</b>	<b>£19,145,857.17</b>	<b>£5,404,540.51</b>	<b>£64,649,700.03</b>