

Adult Social Care Scrutiny Commission

Re-procurement of Domiciliary Care Support Services

Date: 12th July 2016

Lead director: Steven Forbes



Leicester
City Council

Useful information

- Ward(s) affected: All

- Report author: Sally Vallance
- Author contact details: 454 4122
- Report version number plus Code No from Report Tracking Database:

1. Purpose of report

- 1.1 To provide the Adult Social Care Scrutiny Commission with an overview of the work in progress to re-procure domiciliary care support services in readiness for the expiry of existing contracts in October 2017.
- 1.2 The review also provides the opportunity to jointly procure services in conjunction with the Leicester Clinical Commissioning Group (CCG), who also purchase a significant amount of domiciliary care support each year.

2 Summary

- 2.1 Domiciliary care support (sometimes referred to as home care) is purchased by the Council for people eligible for Adult Social Care (ASC) assistance, who would like the authority to arrange their support.
- 2.2 The current contracts expire in October 2017 and work is underway to prepare for the procurement of new services with tenders expected to be issued in the autumn of 2016. We would be aiming for new contracts to commence in October 2017, which will allow for a mobilisation period of up to 6 months before existing contracts end. This will support the effective transfer into new contract arrangements and ensure that any changes to care provider for service users can be managed over a time period that enables the individual to adjust to any new arrangements.
- 2.3 As part of the process, user, stakeholder and provider engagement is taking place to help inform the new specifications and contractual arrangements for the new services.

3 Recommendations

- 3.1 The Adult Social Care Scrutiny Commission notes the content of the report and provides comment in advance of the formal procurement process commencing in October 2016.

4 Report/Supporting information including options considered:

Background

- 4.1 Domiciliary care support is purchased by the Council on behalf of approximately 2,000 eligible ASC service users at any one time, which equates to approximately 18,364 hours per week (954,930 annually) at an annual cost of approximately £10.5 million.
- 4.2 For the period of 2015/16 there were 2,585 people who received the service; of which 2,089 were people aged over 65 years and 496 are people of working age (18-64). Of these people 262 had dementia, 94 had a learning disability, 216 had a mental illness, 1180 had a physical disability, 728 were physically frail/temporarily ill, 20 had substance misuse issues and 59 had a hearing and/or sight loss or impairment (the remaining 36 had a variety of other vulnerabilities).
- 4.3 As at 13/06/16 there were 1,826 people who were in receipt of the service; of which 1,459 are people aged over 65 years and 367 are people of working age (18-64).
- 4.4 There are currently 17 organisations contracted with the Council to provide the service. 16 have been subject to the full Quality Assurance Framework (QAF) assessment by the ASC Contracts and Assurance Service. 1 provider has recently started to provide services in the area, so has not yet been through the full QAF process. In addition to the Council's own quality checks, domiciliary care is a regulated service and subject to the Care Quality Commission (CQC) inspection regime. An overview of current provider quality for the City Councils QAF and the CQC inspection regime is detailed below:

| LCC Quality Score | | CQC Quality Score | |
|---------------------|---|---|---|
| Level A (Excellent) | 0 | Outstanding | 0 |
| Level B (Good) | 2 | Good | 5 |
| Level C (Compliant) | 8 | Requires Improvement | 2 |
| Non-Compliant | 6 | Inadequate | 0 |
| | | Compliant under old regulatory regime | 7 |
| | | Non-Compliant under old regulatory regime | 2 |

- 4.5 For those that are currently non-compliant with the Council's QAF, remedial action is underway and improvements are being monitored.
- 4.6 The current contracts for domiciliary care support are due expire in October 2017 without the option to extend the existing contracts beyond this date. Therefore, the Council is required to re-procure these services in order to ensure there is no disruption to service users and that the authority complies with EU procurement legislation.
- 4.7 The Leicester Clinical Commissioning Group (CCG) also purchase domiciliary care support services in the city, often from the same providers for people with continuing health care needs. Therefore, work is underway to determine whether there is any merit in the authority procuring domiciliary care support on behalf of both the City Council and the CCG. Joining together with the CCG may bring benefits, such as reducing duplication of work, managing costs and removing the competition to secure the same providers. No decision has been taken on

whether a joint approach should be pursued at this point.

Work in Progress

- 4.8 A joint domiciliary support services project board has been established to oversee the work, this board reports into the Joint Integrated Commissioning Board (JICB) as well as the usual governance structures of the Council and CCG. The governance structure is attached in appendix A.
- 4.9 As part of the process the Council is engaging with users, stakeholders and existing and other providers to understand the positive aspects of the current operating practices and where improvements need to be addressed. Any changes will then be reflected in the new specifications and contractual arrangements. The engagement plan is attached at appendix C.
- 4.10 A first round of provider engagement has taken place, a user questionnaire has been sent out (attached as appendix B) and officers are visiting some stakeholder and user groups to hear views on what the most important aspects of this service are.
- 4.11 As part of the review, the requirements of the UNISON ethical charter will be considered including in the future agreement obligations for there to be no zero hour contracts for staff, the payment of travel time between visits and the provision of an occupational sick pay scheme. The cost of applying these terms to any new contract will be considered as part of the review process. The UNISON charter also seeks the payment of the Living Wage, whilst there is now a legal requirement to pay the National Living Wage. Anything beyond this, will result in significantly higher costs and will need to be considered as part of the review process.
- 4.12 The City Council currently does not commission 15 minutes visits (except in a few permitted exceptions e.g. when a second member of staff is needed to assist with a hoist). This will stand in the new contract going forward.

Timescales and Next Steps

- 4.13 Proposals for the procurement exercise, the contract and specification to be used and any proposals around working with the CCG will be prepared for decision in the August 2016. The procurement exercise is planned for the autumn of 2016 and handover to new providers will take place the following year in readiness for contracts going live in October 2017.

5. Financial, legal and other implications

5.1 Financial implications

There are no further financial implications arising from this report. The impact of the National Living Wage has already been dealt with in revised rates for 2016/17 by the Council and the CCG.

Martin Judson, Head of Finance

5.2 Legal implications

As this procurement is for ASC services it will fall under the Light Touch Regime in the Public Contract Regulations 2015, which allows for a very flexible procurement approach to be taken. Given the value of the service the contract will be over threshold however and therefore will require:

- An OJEU Advert to be placed
- The publication of a contract award notice following the procurement
- Compliance with Treaty principles of transparency and equal treatment.
- Conduct the procurement in conformance with the information provided in the OJEU advert regarding: any conditions for participation; time limits for contacting/responding to the authority; and the award procedure to be applied.
- That time limits imposed by authorities on suppliers, such as for responding to adverts and tenders, must be reasonable and proportionate

Beyond this however the Council have the flexibility to use any process or procedure they choose to run the procurement. There is no requirement to use the standard EU procurement procedures but we can use those procedures if helpful, or tailor those procedures according to the procurement, or design our own.

The LTR rules are flexible on the types of award criteria that may be used, but make clear that certain considerations can be taken into account.

From recent experience it is advised that the current terms and conditions for the service are reviewed early in the process in order that they can be amended to reflect the various legal and procedural changes that have occurred since the last contract was entered in to. Dependent upon the procedure used there will be minimal scope to amend these once the procurement has been instigated. This is also crucial if there is to be a joint procurement with the CCG as their standard requirements may differ and we will need agreement on the contract terms prior to going out to tender.

Emma Horton, Head of Law (Commercial, Property & Planning)

5.3 Climate Change and Carbon Reduction implications

Jointly procuring domiciliary care with the CCG could potentially reduce carbon emissions as it would avoid duplicated services running in the same areas. Some local

authorities have taken direct action to reduce their carbon emissions related to their social care provision. Bristol in particular have developed a green checklist for their outsourced social care that considers; providers environmental policy, reduction of staff miles by choosing the most efficient routes and avoiding unnecessary visits, use of energy-efficient pool cars or bikes, the use of telecare to reduce the need for multiple care visits, provision of environmental advice to service users. The Environment Team should be contacted to discuss how sustainability can be engrained into the ASC procurement process.

Louise Buckley, Senior Environmental Consultant, 37 2293

5.4 Equalities Implications

In order to ensure that we meet our Public Sector Equality Duty, we must have a clear understanding of the needs of our service users and how best to meet those needs from their perspectives. User and stakeholder engagement, as presented above, is an effective means of ensuring the council understands those needs and that the contract specification appropriately reflects what is required to meet them within service delivery.

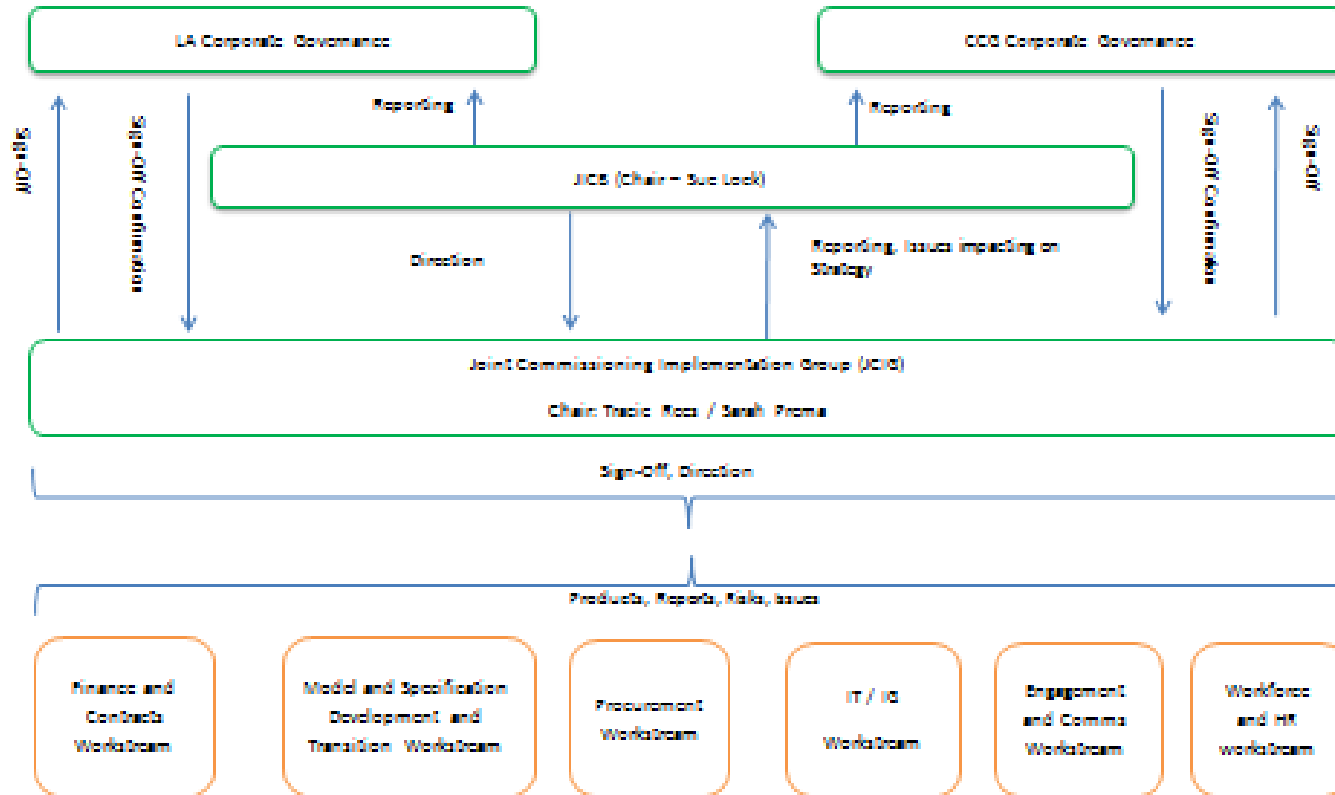
Irene Kszyk, Corporate Equalities Lead, ext 374147

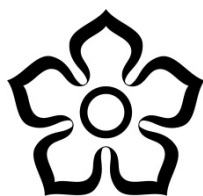
5.5 Other Implications (You will need to have considered other implications in preparing this report. Please indicate which ones apply?)

None

APPENDIX A

Governance -Organisation





Leicester
City Council



**Leicester City
Clinical Commissioning Group**

Have Your Say - Local NHS and Adult Social Care (Council)

Domiciliary Support Services Customer Survey

Domiciliary Support is a term we use to describe the support and care you receive in your home. This support is provided by an organisation that employs a paid carer or support worker to help you. The support you receive at home can include help with a number of things. This can be help with housework or with personal care such as washing and dressing or with going shopping.

This survey will help us find out what you think about these services and how this support helps you remain well and as independent as possible.

**Question1: Please tell us who you are completing this survey as:
(Please tick a box)**

I am a person who is receiving support at home

I am a family carer or friend of someone who is receiving support
in their home

I am interested in the service but not receiving support

If you are not receiving a service but would like to give your own views please go to question 12.

Question 2: Please tell us who did your assessment for the help you receive at home (Please tick a box)

A nurse did my assessment

A social worker or care manager did my assessment

I don't know

Question 3: Please tell us where you were when your assessment was done (Please tick a box)

It was done when I was at home

It was done when I was in hospital

I don't know

My assessment was done somewhere else

Please write where your assessment was done here:

.....

Question 4: How long have you been receiving support at home? (Please tick a box)

Less than 6 months

Less than 1 year

1 - 2 years

2 - 5 years

Over 5 years

**Question 5: How often do you receive support at home?
(Please tick a box)**

- 1 - 2 times a day
- 3 times or more a day
- 1 - 3 times a week
- 4 - 6 times a week

**Question 6: What services do you receive?
(Please tick all that apply)**

- Support with personal care such as washing and dressing or toileting
- Help with taking medication
- Help with domestic tasks, such as shopping, laundry and making a meal
- Support with regaining or learning new skills to help you to live independently
- Support with getting out and about such as using the bus to go and see your GP
- Help with specific health needs such as treating pressure sores or managing a colostomy bag
- Help to get around your home using special equipment like a hoist

If there are other things you get support with please tell us what they are here:

.....

Question 7: Please tell us what you think is good about the support you receive?

Please write here:

Question 8: Please tell us how your support could be better?

Please write here:

Question 9: Do you know who to contact if you want to change the way your support is organised, for example if you wanted to cancel a visit for a day? (Please tick a box)

Yes

No

I don't know

Question 10a: Do you feel the support you receive at home helps you to stay well and as independent as possible? (Please tick a box)

Yes

No

I don't know

**Question 10b: Can you tell us how the help you receive at home supports you to stay well and as independent as possible?
Please write here:**

Question 11: Is there anything else you would like to tell us about the support you get at home?

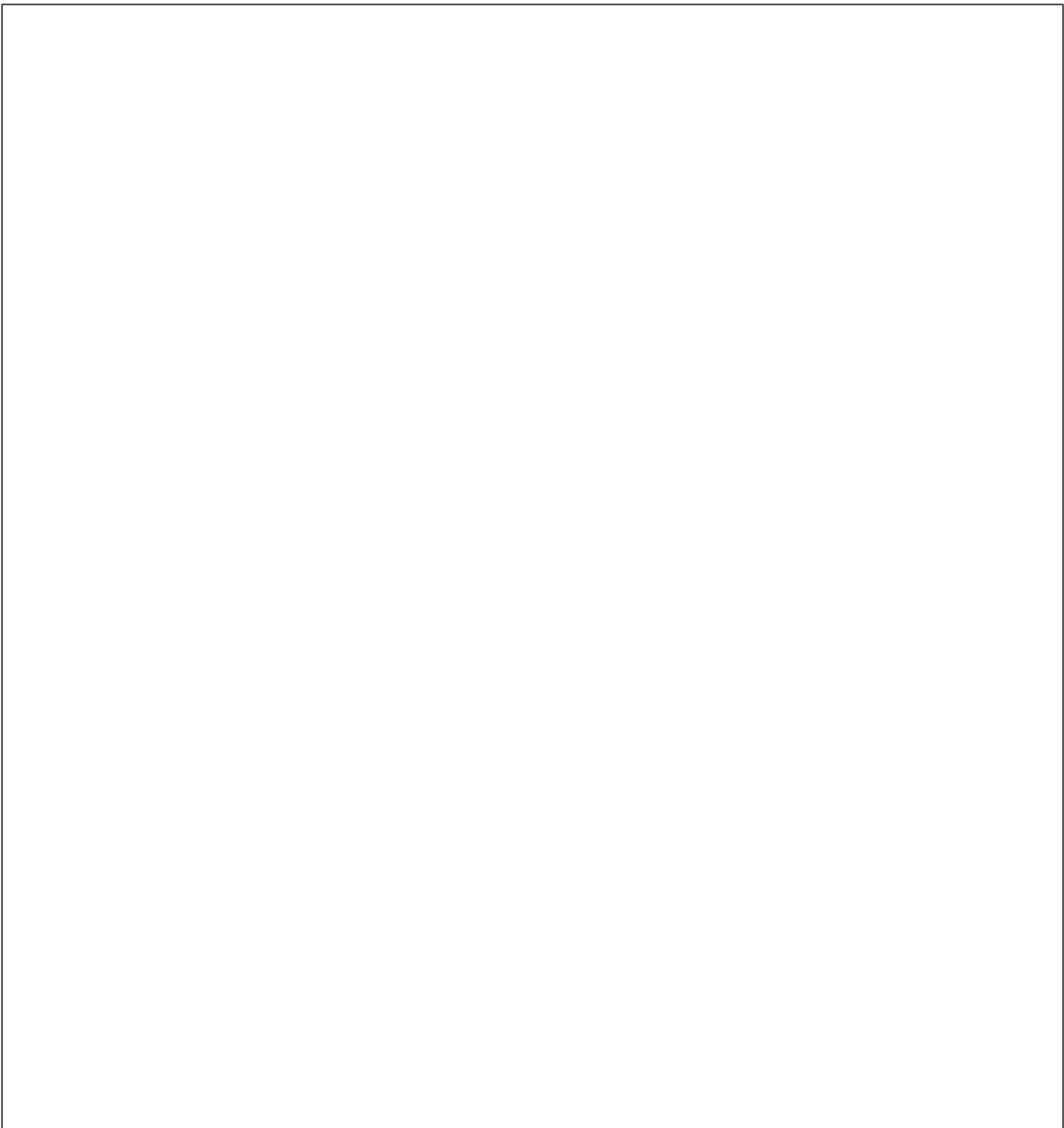
Please write here:

Question 12: If you have any general views on domiciliary support services please tell us below.

Please write here:

Question 13: If you have any views about way the NHS and council are thinking about buying and managing domiciliary support services together as one organisation in future, please tell us what you think below.

Please write here:



To finish, here are some questions about you, but you do not have to answer these if you do not want to.

APPENDIX C

Domiciliary services: Engagement plan

Domiciliary support helps people to remain independent and prevents them from needing a higher level of support such as residential or nursing care. Currently domiciliary support is commissioned separately by Leicester City Council (LCC), triggered by an assessment of social care needs.

The main type of support commissioned by the Council is non-complex community based support. Non-complex support is commissioned to help patients meet the activities of daily living. This includes activities such as getting up / dressed, washed, assistance with toileting and skin care, communication, meals, moving and handling including the use of adaptations and equipment, medication, emotional and psychological needs.

LCC is required to re-procure domiciliary support for the residents of Leicester City. This is triggered by the expiry of existing contracts in October 2017.

Before we do this, we are interested to hear from people who have used these services in the past and from those who may use them in the future. We would like to know what people think of the current services, and hear of suggestions for how we can improve them. We also need to engage with the market to ensure providers are aware of the services we wish to purchase and are telling us about how they can respond.

Our purpose is to make sure the user voice is at the heart of any decisions we make in planning and buying local health services so it is critical that they are involved in the future plans. It is therefore proposed that hold a period of engagement to ask patients, carers, family members and other interested stakeholders a series of questions (primarily via a survey) to help us develop a future service which would best meet their needs.

Engagement activity

| |
|--|
| Timeframe: The engagement phase will open the week commencing 13 th June and close on the 7 th July 2016 |
|--|

As public bodies we have a duty and a commitment to listen and engage with service users and members of the public to ensure we understand their views on domiciliary support, the areas of domiciliary support which they are satisfied or dissatisfied, and how they would like to be engaged or informed going forward.

As such, the below outlines the engagement activity we will undertake to ensure those who use these services are taken into account before any changes to services happen.

We will prioritise this engagement phase primarily with people who use the services. We will also widen the engagement to include providers and interested stakeholders.

In addition a service user survey, stakeholders will be asked to arrange a small number of face to face meetings with service users to encourage participation in the developments and to give us the opportunity to speak with groups who may not understand or be comfortable with completing a survey.

Stakeholders:

Internal audiences

- Care management
- Enablement service
- ICRS

Domiciliary services

- Existing providers
- Wider market who may provide in the future

Other stakeholders

- Network for change
- LGBT Centre
- Adhar project
- LAMP/Genesis group
- Stroke Association
- Diabetes Uk
- Breathe Easy (BLF)
- LCIL
- Headway
- Leicestershire Aids Support Services (LASS)
- Action Deafness
- Vista
- Age Uk
- 50+ network
- LOROS
- Parkinsons Uk
- Clasp the carers centre
- Motor Neurone Disease Association (Leicestershire and Rutland)
- Speaking up for health group
- Rethink
- BME Elders forum
- Rainbows
- Leicester Chinese Elderly Project
- Leicester Stroke Club
- Leicester Deaf Action Group

- Leicester Mencap Society
- CLASH - Arthritis support group
- West Indian Senior Citizens Project
- Alzheimers Society
- ANSAAR
- Learning Disability Partnership Board
- Leicestershire Kidney Patients' Association
- Healthwatch Leicester
- Leicestershire Down's Syndrome group

Stakeholder communications

- GP Practices
- Local media channels
- Social media channels
- LCC and CCG website

We will pay particular attention to the 9 equality strands to ensure we have a mixture of views from the services (not all will be applicable).

Communications planning

All communication on the development of this work will involve a number of different channels to spread the messages. The below offers suggestions of methods which we will use:

Internal and External Channels

We will use internal methods of communication such as e-newsletters to communicate with our staff and the CCG's channels to GPs.

Stakeholder networks

Information is distributed to local stakeholders to raise awareness of projects through their local networks, service users and groups. We encourage stakeholders to distribute news about service developments through their internal and external channels of communication.

The engagement phase will close on the 7th July, when the collated feedback will be analysed and reported into the project board. The feedback will be used to support the development of the future service specification.

Timeline

| Task | Dates |
|--|---------------------------------|
| Agree content of letter/consultation documents | w/c 25 th April 2016 |
| Comms messages including stakeholder engagement and social media | w/c 6 th June 2016 |

| | |
|--|---|
| Survey distribution to service users | w/c 13 th June 2016 |
| Hold series of service user meetings where requested | 15 th June – 7 th July 2016 |
| Consultation closes | 7 th July 2016 |
| Report on findings to project board | 19 th July 2016 |
| Respond to public with results | TBC |

Requested face to face meetings

| DATE | SERVICE | VENUE | TIME | TYPE |
|-------------------------------------|---------|-------|-------------|-----------------------------|
| 27 th June 2016 | Mencap | | 10am – 11am | Service user coffee morning |
| W/c 4 th July (date tbc) | Age UK | | Time TBC | Coffee morning |

(Further groups are being added as contact is made).