



<b>Classification</b>	<b>Item No.</b>
<b>Open</b>	

<b>Meeting:</b>	Cabinet
<b>Meeting date:</b>	26 <sup>th</sup> May 2021
<b>Title of report:</b>	Adult Social Care - Care at Home Re-tender
<b>Report by:</b>	Councillor Simpson – Health and Wellbeing
<b>Decision Type:</b>	<b>Key Decision</b>
<b>Ward(s) to which report relates</b>	<b>All wards</b>

### **Executive Summary:**

The Care at Home service supports the vulnerable people of Bury with their assessed needs including medication support, moving and handling and personal care amongst others. The current service was commissioned in 2017 for an initial period of 3 years with 10 Providers covering 6 neighbourhood 'zones':

- Ramsbottom
- Tottington
- Bury East
- Radcliffe
- Whitefield
- Prestwich

In line with the options available within the contract this has been extended for a further year to September 2021 to allow for a review of the provision and engagement with all relevant stakeholders.

The consultation has now been completed and this report requests approval to progress to tender for the new Care at Home service for a further 3 years with the option of up to 2 year extension. A service specification will be developed to ensure the new service will:

- Align to the Locality Plan, having providers work across the 5 neighbourhoods, mirroring and aligning to the Integrated Neighbourhood Teams.
- Provide a greater focus on partnership working alongside the Integrated Neighbourhood Teams with our care providers having an equal role in best meeting the needs of the people of Bury.
- Encourage innovation and flexibility in service delivery including taking an asset based approach to care and support.
- Allow for tighter contract management and payment of the service with the support of Controcc.

The Council currently spends approximately £4.8m on Care at Home and there are no additional increased financial implications as the service is already budgeted for in the Care in the Community budget.

The re-tender of the Care at Home service aligns to the Commissioning Plan and supports wider social care transformation and therefore does not come with a specific cost saving attached. The benefits of closer working with the Integrated Neighbourhood Teams, the tighter contract monitoring and payment options available via Controcc and the ability to work more dynamically and flexibly may combine to create savings but this is not the over-riding aim.

### **Recommendation(s)**

**That:** Cabinet approve the request to re-tender the Care at Home service.

### **Reasons for the decision:**

Re-tender of the Care at Home contract allows for changes to be made to the service specification that will allow greater flexibility and choice for customers in how their needs are met. The strengths of this are:

- A well-functioning and sustainable Care at Home service will have a positive impact for other areas of health and social care, for example, reduced social isolation, reduced admissions to hospitals, reduced carer breakdown, more people being able to live at home for longer.
- Enabling providers to have a stronger role in assessment and care management will allow more capacity for social workers.
- A truly person-centred service for customers will be developed.
- Opportunity for new care providers to enter the market and share their knowledge and expertise.
- Implementation of innovative ideas that the current contract does not allow.
- Alignment to the Integrated Neighbourhood Teams and Locality Plan.

## **Other options considered and rejected:**

- Extend the current contract for a further 12 months was considered but rejected given the benefits of re-tendering the service and the positive impact this will have on customers now.
- Under procurement rules you can make slight changes to a contract without having to re-tender the service. This was rejected as it was felt we should be more ambitious and give customers greater options in the way their needs are met.

## **Key considerations**

### **1. Background**

1.1 The Care at Home service was re-tendered in 2017 for an initial period of 3 years with the option to extend for a further 2, with a contract start date of September 2017. Currently 10 Providers cover 6 neighbourhood 'zones':

- Ramsbottom
- Tottington
- Bury East
- Radcliffe
- Whitefield
- Prestwich

1.2 In line with best practice, it was agreed to review the Care at Home service in advance of its initial 3 year contract end to ensure that the contract is both effective and high performing for its final year and beyond.

The COVID-19 pandemic had a massive impact on the Care at Home review and forced us to re-evaluate the scope of the review and reconsider our desired outcomes to ensure a more transformative service for the future. To that end a one year extension was granted for the existing Care at Home contract with a view to carrying out a full re-tender in 2021.

The aim of the re-tendered Care at Home provision will be to offer an enhanced service with the ability to enable people to live in their own homes longer and reduce the need for permanent, residential and nursing care. To align to the Locality Plan, having providers work across the 5 neighbourhoods, mirroring and aligning to the Integrated Neighbourhood Teams. The new service will also recognise that care staff are integral partners in achieving this and providing them with career opportunities that encourage a more stable workforce.

## **2. Engagement**

- 2.1 We have engaged with a range of stakeholders in order to capture both their feedback on the current service and ideas and hopes for a future provision.

Key concepts that came out of our engagement will be at the forefront of the new Care at Home service specification. These include:

### **Strength Based Approach**

- Care management conduct a strength-based assessment to identify broad outcomes and available budget.
- Provider and customer to continue strength-based approach to support planning by working up support plan details and timings.
- Providers to use the ability to subcontract to consider working with voluntary and community sector organisations in the neighbourhood which may be able to support certain specialist needs or sections of the community.
- Strengths-based approach with customers
- Providers able to deliver a level of reablement when there is insufficient capacity or it is inappropriate for them to be referred to the Bury Council Reablement Team.

### **Trusted Assessor**

- A stronger role for providers in assessment and ongoing review.
- An end goal that providers shall become recognised Trusted Assessors.

### **Flexibility**

- Flexibility to provide wider support (for example, accompanying to appointments or improving social connections).
- Flexibility to bank and bring forward hours, perhaps when someone is out or away, and use them another time, for example when a larger or longer task needs doing.
- Providers trusted to vary people's packages of care up and down, within agreed limits.

### **Person Centred**

- Continuity of care and support being delivered through a small core team of care workers familiar to the customer and family.
- Each customer to have a key-worker.
- Place based service (picking up all packages of care in a specific area, including in Extra Care facilities).

### **Partnership Working**

- Becoming part of Integrated Neighbourhood Teams.
- Success dependent on close partnership working.

### **Living Well at Home**

- Providers to start delivering some of the monitoring and non-invasive health care tasks currently performed by district nurses.
- A developing service with the ambition for a more highly skilled workforce and career progression for carers
- Potential to reduce the number of visits customers need to receive.

### 3. Proposal

To develop a service specification that captures the above and re-tender the Bury Care at Home Service.

## Community impact/links with Community Strategy

### Equality Impact and considerations:

*Under section 149 of the Equality Act 2010, the 'general duty' on public authorities is set out as follows:*

*A public authority must, in the exercise of its functions, have due regard to the need to -*

- eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;*
- advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;*
- foster good relations between persons who share a relevant protected characteristic and persons who do not share it.*

*The public sector equality duty (specific duty) requires us to consider how we can positively contribute to the advancement of equality and good relations, and demonstrate that we are paying 'due regard' in our decision making in the design of policies and in the delivery of services.*

<b>Equality Analysis</b>	<i>Please provide a written explanation of the outcome(s) of either conducting an initial or full EA.</i>
 <p>2020.11.02 Equality Analysis - Care at Hor</p>	

*\*Please note: Approval of a cabinet report is paused when the 'Equality/Diversity implications' section is left blank and approval will only be considered when this section is completed.*

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**Assessment of Risk:**

The following risks apply to the decision:

<b>Risk / opportunity</b>	<b>Mitigation</b>
<ul style="list-style-type: none"><li>• A positive impact on other areas of health and social care will be difficult to evidence.</li><li>• Disruption to current care packages.</li><li>• Reduced cashable savings by allowing providers to manage hours flexibly</li><li>• Care at Home Providers use electronic rostering and monitoring systems to support developing their rotas and monitoring care visits. There is a risk their systems may not align to a new way of flexible working.</li><li>• A reluctance from key-stakeholders to drive the goals and aspirations forward.</li></ul>	<ul style="list-style-type: none"><li>• Robust and outcomes focussed contract monitoring in place from the start of the contract.</li><li>• Transition arrangements and options will be put in place for all affected customers. No customer will have to change provider if they do not want to.</li><li>• A well-functioning and sustainable Care at Home service will have a positive impact for other areas of health and social care, for example, reduced social isolation, reduced admissions to hospitals, reduced carer breakdown, more people being able to live at home for longer.</li><li>• Work with providers to ensure systems are able to adapt to flexible working.</li><li>• We will develop a Communications Plan to engage and involve key-stakeholders as much as practically possible within the proposed timeframe.</li></ul>

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**Consultation:**

We have engaged with a range of stakeholders in order to capture both their feedback on the current service and ideas and hopes for a future provision. Partners engaged include:

- Bury Clinical Commissioning Group
- Bury Council Adult Social Care Operation Staff
- Current and prospective care at Home Providers
- Current Care at Home customers and families
- Bury Council Community Commissioning Division Staff
- Other Local Authorities.

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### **Legal Implications:**

Fully re tendering for this service will ensure that the care at home service is aligned to meeting the wider strategic aims. The legal service will assist with the development of the specification and advise on the process.

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### **Financial Implications:**

The council currently has budgeted privation for the current contract. Whilst the final cost of the contract is not yet known it is envisaged that it can be met from within the existing budget. Any variance in cost will need to be considered in the context of the councils financial strategy.

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### **Report Author and Contact Details:**

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### **Background papers:**



2021.01.21 Care at Home Options Paper

**Please include a glossary of terms, abbreviations and acronyms used in this report.**

Term	Meaning
Strength Based Approach	Looking positively at what a customer can do.
Trusted Assessor	Providers acting on behalf of and with the permission of the local authority to carry out an assessment of health and/or social care needs

Service specification	Document that outlines the expectations of the service and the outcomes that should be achieved by the provider.
Controcc	<p>Controcc supports adults' and children's social care finance teams with the process of managing contracts and budgets, making payments and collecting contributions.</p> <p>ContrOCC is designed to integrate with case management systems, such as Liquidlogic, and with corporate finance systems, such Unit 4.</p> <p>ContrOCC helps teams improve the accuracy of their payments and charges. It can also help them to eliminate data duplication and improve efficiency of administration</p>