

1. Topic of assessment

EIA title:	Possible impacts as a result of tendering of Home Based Care Support Services framework agreement for Adult Social Care.
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2. Approval

	Name	Date approved
Approved by¹	Jo Parkinson	4 July 2014

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3. Quality control

Version number	3	EIA completed	7 July 2014
Date saved	7 July 2014	EIA published	10 July 2014

4. EIA team

Name	Job title (if applicable)	Organisation	Role
See above			

¹ Refer to earlier guidance for details on getting approval for your EIA.

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5. Explaining the matter being assessed

<p>What policy, function or service is being introduced or reviewed?</p>	<p>The purpose of this Equalities Impact Assessment (EIA) is to highlight the possible affects for all users who receive Home Based Care (HBC) support services.</p> <p>Where possible, this EIA will outline the potential impacts the new contract models may have on all users who either receive support directly (individuals/service users) or indirectly (individual's carers/families). Where potential impacts are identified this EIA will propose ways of mitigating them, whether they are positive or otherwise. This EIA is important in ensuring all stakeholders have had their needs considered and goes towards informing the decision making process.</p> <p>Home Based Care (HBC) support services are available to enable individuals with health and social care needs to continue to live independently in their own homes. The services are predominately for older people but can also be delivered to other service user groups such as people with learning disabilities, people with sensory or physical disabilities and also mental health. Services can include personal care (such as support with getting up, getting washed, eating and drinking) and non-personal care (such as support with shopping, household cleaning and laundry).</p> <p>Providing HBC support services to vulnerable adults in Surrey is a statutory obligation of the council and due to the value and complexity of support services delivered by external home based care providers, HBC is a strategic and critical service. This service supports the Adult Social Care (ASC) directorate strategy 2012 -2017: to help people live independently and safely in their own home.</p>
<p>What proposals are you assessing?</p>	<p>Following a comprehensive review of HBC services and the market (providers whom deliver care to service users in their own homes) during 2013 officers identified a need to replace the existing contractual arrangement with contracts for a new service delivery models the Strategic Contract Partnership (SPC) and the Any Qualified Provider (AQP). These new delivery models were established through a competitive tendering exercise in the spring and summer of 2014 and are due to commence on 1st October 2014.</p> <p>This EIA will investigate and mitigate the potential impacts of the new contract models for all individuals who directly/indirectly depend on HBC support services, whether positive or otherwise. This EIA will also consider the wider impact of these contractual arrangements on the home based care market.</p>

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Who is affected by the proposals outlined above?	<p>There are a number of different stakeholder groups who could be affected by the change in contractual arrangement, and they have been grouped into two categories:</p> <p>Internal Stakeholders of the council:</p> <ul style="list-style-type: none"> • Commissioners • Council Staff (Practitioners and Locality Staff) • Staff of the Clinical Commissioning Groups (CCGs) <p>External Stakeholders:</p> <ul style="list-style-type: none"> • Service Users (Individuals who receive a direct support) • Families/Carers (Individuals who receive indirect support) • Providers (organisations who manage the support services) • Care Workers (who deliver the support services)
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6. Sources of information

Engagement carried out
<p>Officers from the council and CCGs actively sought feedback from a number of stakeholder groups.</p> <p>The HBC Reference Group is a group of stakeholders who provide oversight of the contract management process as part of the governance of the service delivery. They are made up of individuals representing the views and concerns of Individuals (receiving support), Carers and providers were informed of the outcomes throughout the exercise. The representatives included:</p> <ul style="list-style-type: none"> • Action for Carers • Age UK (Surrey) • Surrey Care Association (SCA) • Surrey Coalition • Surrey Disabled People’s Partnership • Adult Social Care staff groups including commissioners, Quality Assurance and Personal Care and Support. • Procurement and Commissioning (Business Services Directorate) <p>The SCA also supported discussions with potential bidders on the new contract model and real time monitoring systems. Officers attended SCA meetings throughout autumn 2013 and spring 2014 with advice and guidance on commissioners’ intentions.</p>
<p>The following were additionally consulted:</p> <ul style="list-style-type: none"> • Mel Few (Cabinet Member for Adult Social Care) • Adult Select Committee Members • Dave Sargeant, (Interim Strategic Director, Adult Social Care)

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- Anne Butler (Assistant Director, Commissioning)
- Quality Assurance Managers (Adult Social Care)
- Laura Langstaff (Procurement and Commissioning Manager, Business Directorate)
- Anna Tobiasz (Category Manager, Adults)
- Andrew Hewitt (Principal Accountant, Finance)
- Naz Fox (Senior Lawyer, Legal Services)

Officers from Procurement and ASC Commissioning also attended local Empowerment Boards to discuss the proposed changes to the contract models.

Data used

Officers also conducted a comprehensive review of the current framework using data from a number of sources which fed directly into an options and needs analysis. This analysis then informed consultation with stakeholders and the options concerned were developed from the outcome of these discussions.

The data and information analysed as part of this review was sourced from:

- Joint Strategic Needs Assessment (JSNA) to determine demographic trends/demands
- The Council's customer satisfaction surveys
- Feedback from Quality Assurance Monitoring visits, undertaken over the first year of the Framework Agreement.
- Research findings (such as the workforce development strategy)
- Performance monitoring returns submitted by the existing HBC framework providers.
- Swift and AIS
- ASC Personal Care and Support placement teams
- Meetings with existing framework providers
- Network quality assurance forums
- Engagement with providers and service users

The data was used to identify trends and common themes within the existing service delivery model which prompted discussion about the most appropriate way to resolve the issues and concerns currently experienced.

The team also sought best practice recommendations from the following reports:

- **Workforce Strategy** – tools for 'Value based employment '
<http://www.skillsforcare.org.uk/NMDS-SC-intelligence-research-and-innovation/Workforce-development-strategy/Workforce-development-strategy.aspx>
- **Norman Lamb June 2013 'crisis talks'** - HBC is the next big scandal – ethics of 15 minute calls <http://www.bbc.co.uk/news/health-22883708>
<http://www.bbc.co.uk/news/uk-24424785>
- **Human Rights Commission** - audit of Domiciliary Care (home based care

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<http://www.equalityhumanrights.com/legal-and-policy/inquiries-and-assessments/inquiry-into-home-care-of-older-people/guidance-on-human-rights-for-commissioners-of-home-care/>

- **Unison Ethical Charter on Domiciliary Care** – zero based contracts and minimum wage payment for ‘highly skilled’ workforce
<http://www.unison.org.uk/upload/sharepoint/Research%20Material/Final%20Ethical%20Care%20Charter%20PDF.pdf>
http://www.bbc.co.uk/news/uk-26021026#story_continues_2 (Recent “Councils in England pay too little for home care”)
- **UKHCA** – care is not a commodity report - deteriorating relationships , concern for safety and dignity of service users and lack of guaranteed purchase.
<http://www.ukhca.co.uk/pdfs/UKHCACommissioningSurvey2012.pdf>
- **Long Term Condition strategy** - increased complex needs living in the community.
- **Technological improvements** - monitoring, Telecare and Telehealth
Top tips for Directors – ADASS guidance
<http://www.adass.org.uk/images/stories/Publications/Miscellaneous/TopTipsDec13.pdf>

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7. Impact of the new/amended policy, service or function

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7a. Impact of the proposals on residents and service users with protected characteristics

Protected characteristic ²	Potential positive impacts	Potential negative impacts	Evidence
Age	<p>It is anticipated that the enhanced service specification will provide a positive impact for all individuals receiving support.</p> <p>Please refer to the evidence section for further details.</p>	N/A	<p>There is no change to the scope of services being commissioned through the new HBC contracts. Any individual deemed eligible by the council and CCGs for support will continue to receive HBC funded services.</p> <p>The enhanced specification empowers providers to move from “task” to “outcomes” based commissioning, promoting greater personalisation, independence and outcomes focused approach for individuals.</p> <ul style="list-style-type: none"> • Transparency and management of missed and late calls – providers will know in real time if service delivery is late or to be missed – with consequences for poor performance • More flexible services as total time allocated can be managed more proactively • Individuals will have a copy of a easy read specification based on the outcomes individuals should expect from the service • More responsive “pick up” times of packages, especially for hospital discharge, means packages should commence sooner • Putting requirement on providers to engage individuals in their communities, in support of Family, Friends and Community Support agenda • The council will publish their "qualified providers" to assist self funders' when independently selecting a care provider.
Disability		N/A	
Gender reassignment		N/A	
Pregnancy and maternity		N/A	
Race		N/A	
Religion and belief		N/A	
Sex		N/A	
Sexual orientation		N/A	
Marriage and civil partnerships	N/A		
Carers ³	The introduction of a Long Care Rate should offer additional support to Carers and members of the individuals family	N/A	

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² More information on the definitions of these groups can be found [here](#).

³ Carers are not a protected characteristic under the Public Sector Equality Duty, however we need to consider the potential impact on this group to ensure that there is no associative discrimination (i.e. discrimination against them because they are associated with people with protected characteristics). The definition of carers developed by Carers UK is that ‘carers look after family, partners or friends in need of help because they are ill, frail or have a disability. The care they provide is unpaid. This includes adults looking after other adults, parent carers looking after disabled children and young carers under 18 years of age.’

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7b. Impact of the proposals on staff with protected characteristics

Protected characteristic	Potential positive impacts	Potential negative impacts	Evidence
Age	This new contract requires the council and CCG staff to work in a different manner when sourcing HBC packages, and develop partnership relations with providers. The positive impact of this will include more effective and efficient sourcing processes, and offer Practitioners more flexibility in having a greater supply of providers who are already approved and set up in AIS, reduces time when organising new spot placements	N/A	With the introduction of revised smaller, or concentrated “zones”, Care Workers travel time should be reduced or remain the same as they are currently.
Disability		N/A	
Gender reassignment		N/A	
Pregnancy and maternity		N/A	The new contract and specification takes into consideration the recommendations of industry reports (listed within the data section of this document). Through the tendering evaluation process bidders had to demonstrate their compliance with new legislation (Care Act 2014) and how they will operate their businesses in line with best practice recommendations, outlined within the service specification.
Race		N/A	
Religion and belief		N/A	
Sex		N/A	
Sexual orientation		N/A	
Marriage and civil partnerships		N/A	
Carers		N/A	
	The enhanced service delivery model will have a positive impact on staff employed directly by home care agencies contracted with the council and the CCGs. Please refer to the evidence section.		The evaluation process focused on the importance of managing the welfare and promoting the rights of Care Workers. Bidders were asked to demonstrate how they incentive and develop their staff.

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8. Amendments to the proposals

Change	Reason for change
The contracted zones have been revised from 4 to 18.	In recognition of the challenges of operating an effective and sustainable home care agency within Surrey, the number of zones have been increased from to 4 to 18. This is to enable sustainable provider growth in Surrey, and decreasing any risk of provider failure. This also supports the commissioners to guarantee a minimum volume of hours which provides sustainable growth to the provider.
The number of zones each bidder could be awarded through the tendering process	<p>Positive Impact: Due to the potential risks involved in service delivery, and the mutual dependency of commissioners and providers, commissioners looked to restrict the total number of zones any one bidder could be awarded. This would reduce the chance of a provider failing to meet their contractual obligations and mitigate any impact.</p> <p>Negative Impact: bidders who may not be awarded an SPC in a zone they currently operate, may experience an unsustainable reduction in the number of packages they delivery in that particular zone. This would need to be clearly managed with commissioners through regular contract review meetings.</p>

9. Action plan

Potential impact (positive or negative)	Action needed to maximise positive impact or mitigate negative impact	By when	Owner
Risk of providers developing unsustainable 'rounds of packages' in zones where they were not awarded an SPC.	Any provider who submitted a bid will automatically be included within the AQP contract, with exception to any who received less than 20% of the total score for their SPC submission.	1 st October	Procurement

10. Potential negative impacts that cannot be mitigated

Potential negative impact	Protected characteristic(s) that could be affected
N/A	

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11. Summary of key impacts and actions

Information and engagement underpinning equalities analysis	Commissioners have consulted with a wide range of stakeholders in the engagement carried out section of this report
Key impacts (positive and/or negative) on people with protected characteristics	There are no anticipated negative impacts on people with protected characteristics. There are positive impacts due to the new contractual model and service delivery model. Benefits include enhanced service specification, more responsive, effective and efficient sourcing processes, prompt weekday and weekend hospital discharges.
Changes you have made to the proposal as a result of the EIA	The contracted zones have been revised from 4 to 18 and the number of zones each bidder can be awarded through the tendering process
Key mitigating actions planned to address any outstanding negative impacts	Any provider who submitted a bid will automatically be included within the AQP contract, with exception to any who received less than 20% of the total score for their SPC submission.
Potential negative impacts that cannot be mitigated	N/A

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Annex 1 – Issues to consider when assessing the impact

To explain how the HBC support services could potentially impact of the HBC re-tender, this report has been broken down into key areas:

- 1) Individuals in receipt of support (service users)
- 2) Members of the individual’s families/carers
- 3) Members of staff employed by the council, CCGs and the provider.
- 4) Provider sustainability

There are no anticipated negative impacts on people with protected characteristics and all positive impacts apply to any group of individuals with protected characteristics

1) Individuals in receipt of support (service users)

The enhanced specification and performance targets of the new SPC will significantly benefit the service user.

- **Improved quality of care** – the new service delivery and contract structure has replaced the existing contractual arrangement to enable a new approach of commissioning services to be implemented. The enhanced specification includes the requirement for providers to implement real time monitoring systems which will proactively monitor services to ensure support is delivered in a timely manner.

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- **Responsiveness of pick-up rate of new packages** – the new service delivery model will result in a timely service commencing within the required timescales and prompt weekday and weekend hospital discharges. Currently limited capacity of Care Workers within the home based care market can result in delays in starting a new package of care, which can result in some service users hospital discharges being unnecessary delays.
- **Outcomes focused approach** – the enhanced service specification shifts home based care away from a service focused on rigid prescription of tasks and times, to a service which is able to respond to an Individual's changing needs and preferences. The specification incorporates the Think Local Act Personal Making it Real "I statements", which focuses on achieving outcomes for Individuals, based on achieving outcomes for Individuals.

This will support service users to become more independent at home and active within their wider community. This is critical to the success in achieving the Council's ASC directorate strategy 2012 -2017: to help people live independently and safely in their own home, by delaying or preventing need for support.

- **Improved choice of provider for the service user** – with the introduction of the Any Qualified Provider (AQP) contract, service users will be able to choose from a wider range of providers than the council currently contracts with.

2) Members of the individual's families/carers

- **Increased responsiveness of support** – through the requirement to implement an electronic real time monitoring system, providers will know in real time if a Care Worker is late and mitigate the impact of this call.
- The use of **electronic real time monitoring systems** will also enable providers to demonstrate how long support was provided for (this enables flexible use of total time available over a week, and billing according to what is delivered).

3) Members of staff employed by commissioners and the provider.

Members of staff employed by commissioners (the council and CCGs)

- The **new service delivery model** to be implemented for the SPC and AQP contract will support staff to provide a more efficient and effective service for the individual, their carer and family members.
- **Sourcing process** – the new contract and service delivery models will enable locality staff to work and develop a stronger operational relationship with providers in their zone. Staff will have a better understanding of provider's capacity and any challenges they are currently facing.
- Enable practitioners and social care development coordinators to **build commercial relationships** with strategic providers in each zone and enable early identification of risks to service delivery.

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- **Vendor set up** – when capacity is limited locality staff often need to source a new provider (who the council doesn't currently contract with) and this will require a new vendor to be set up in AIS/Swift. Due to the ad-hoc requests to place a package of care off the current framework agreement which can result in delays in the provider's invoices being processed due to missing information from the provider and therefore outstanding due diligence checks which must be completed prior to the set up being completed.

The AQP process will enable providers who do not currently work with commissioners to apply to join the AQP list each quarter, which will follow a structured due diligence process, after the provider has submitted all of the mandatory information on the Council's e-Sourcing Portal, followed by a robust evaluation process.

Members of staff employed by providers

The SPC contract will support providers to deliver a more efficient and effective service for the individual, their carer and family members.

- **Travel time between packages of care** – the SPC zones are smaller, more local, geographical areas and have been selected in line with population density and volume of current need. This prevents the need for Care Workers to travel as far between visits and reducing depreciation of Care Worker's vehicles
- **Security of work** – by offering strategic providers a contract of up to 5 years and guaranteeing a minimum volume of new hours each quarter, clearly states the councils and CCGs intention to build long term partnerships with providers. Care Workers will be aware of this and providers should be seen as the provider of choice.
- **Ethical Employment** – the enhance service specification also requires providers to ensure their recruitment processes are ethical and in line with legislation.

4) Provider sustainability

Many of the lessons learnt from the current framework agreement have demonstrated the need for commissioners to actively support providers to develop a sustainable business in Surrey. The home based care market is reliant on robust quality assistance processes, recruitment and retention of staff. Recruitment and retention in Surrey is a significant challenge across the home base care market and this is one of the key influences affecting capacity.

The SPC has been developed in response to the lessons learnt with the current framework and will enable commissioners to proactively work with providers and support them in developing a sustainable business. One example of this is the new zones. The smaller zones will enable providers to build a density of packages and proactively recruit new staff to meet the anticipated volume of demand each quarter.

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5) Measuring provider performance

The council and CCGs recognise the importance of effective contract management and the opportunity this brings to delivery continuous improvement throughout the lifetime of the contract. The strategic providers have signed up to a set of key performance indicators , linked to their real time monitoring systems, which will provide evidence of whether the provider has met its contractual obligations. The evidence gathered will form a base of learning and continuous improvement for the overall benefit of all Parties to the Contract.

Performance data will give commissioners and providers greater transparency of what and how support services were delivered and together how we can jointly identify improvements to service delivery.