



Adult Social Care Select Committee
15 January 2015

Update on the Home Based Care Tender 2014

Purpose of the report: Scrutiny of services, budgets and performance management.

The Committee has requested an update on the Home Based Care Tender that was awarded from 1 October 2014.

Introduction:

1. Home Based Care in Surrey was retendered in 2014 on a two contract structure:
 - Strategic Partnership Contracts (SPC) - based on cost and volume with a guaranteed income level
 - Any Qualified Provider - A list of qualified providers that the Council can call on when needed
2. The service specification was co-designed with the Locality Teams, user led organisations and the Clinical Commissioning Groups. The new service specification now reflects the Think Local Act Personal Statements.

Update on Strategic Partnership Contracts

3. The 'Pre-Qualification Stage' received 60 responses from providers' of which 55 passed. Of these, 39 respondents received an invitation to tender and 22 were short-listed for interview and evaluation.
4. The tenders were evaluated using a weighting of 60% for quality and 40% for price.
5. The Cabinet approved the contract award at its meeting on 22 July 2014 and contracts were awarded effective from 1 October 2014.

6. The contracts have been awarded to nine providers to cover 18 zones county-wide. The providers are:
- **Alpenbest** – Reigate & Banstead, Elmbridge, Epsom & Ewell, Runnymede, Spelthorne, Woking
 - **Britannia Homecare** – Reigate & Banstead, Tandridge, Mole Valley,
 - **Care UK Homecare** – Guildford, Surrey Heath
 - **Carewatch Care Services** – Woking, Surrey Heath
 - **London Care** - Spelthorne
 - **Mears Care** – Elmbridge, Mole Valley
 - **MiHomecare** – Elmbridge, Epsom & Ewell, Runnymede, Waverley, Guildford
 - **Surrey Social Care Professionals** – Reigate & Banstead
 - **Taylor Gordon & Co (Plan Care)** – Tandridge
7. The contracts are for five years (3 fixed + possible up to 2 years extension).

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| Benefits of the new Strategic Provider Contract - Update |
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8. Benefits of the new contract include:
- a) Joint contracting and monitoring with the lead clinical commissioning group for Home Based Care and Continuing Healthcare (CHC)
 - b) Undertaking that SPC is offered at least 60% of new packages with uptake of at least 40%. This allows providers to plan ahead and invest in capacity recruitment/training
 - c) Strategic providers now being offered proactive workforce development with support from Surrey County Council
 - d) Mandatory electronic monitoring of care assistants
 - e) The contracts allow for proactive management of late/missed calls
 - f) More accurate reporting
 - g) Mandatory 7 day availability for picking up new packages
 - h) Linking with Hospital Team discharges at weekends
 - i) Key performance indicators are linked to potential financial recovery if not met
 - j) The Commissioning realignment provides for an enhanced level of local relationships with providers with local commissioners
 - k) Family, friends and community is a core part of the service specification and performance monitoring framework. Under the active and supportive section of the service specification it requires providers to support individuals to: 'have access to a range of support that helps me to live the life I want and remain a contributing member of my community'; 'have a network of people who support me – carer's, family, friends, community and if needed paid support staff'; 'feel welcomed and included in my local community'; and 'feel valued for the contribution that I can make to my community.'

Any Qualified Provider (AQP) - Update

9. Invitations for Expressions of Interest were published in December 2014. This is an open invitation with no closing date. This makes the process more flexible than formal tendering.
10. Other benefits of this process are:
 - a) Allows new/niche/developing providers to be considered
 - b) Providers have to meet the minimum set of requirements to proceed to evaluation for qualification – quality maintained but no overall commitment of volume
 - c) Specification, pricing and contractual Terms and Conditions are pre-agreed
 - d) AQP providers are available for spot placements where an SPC provider is unavailable or through service user choice
 - e) Joint process with the lead Clinical Commissioning Group (Surrey Downs) for Home Based Care and CHC service
 - f) Provides list to signpost the public under Care Act obligations
11. As the AQP list grows all previous framework contracts available until April 2015 and 'Spot' providers still available.
12. When sufficient capacity of AQP providers has been established this will become the sole route of qualification to provide this service.

Contract Performance and Management Measures

12. Performance Management results will be reported through the Home Based Care Reference Group. This group now has Member representation and has always included representatives from user and carer led organisations.
13. A key aspect to the ongoing performance monitoring is the intelligence gathered from our Locality Teams and Social Care Development Coordinators. The Social Care Development Coordinators have already started developing strong relationships with the providers in their areas and have been attending contract management meetings to ensure that we can give direct and local feedback to the Strategic Providers.
14. The first full contract performance report will be published in April 2015.
15. Performance indicators are linked with financial reparations and contract monitoring will inform any decisions to be taken on this.
16. By April 2015, to support choice to all Surrey residents, we will publish names of the "Strategic Domiciliary Care Providers "and "Any Qualified Providers" on the Surrey Information Point. This will be reviewed on a monthly basis and updated to reflect any changes as new AQP standings are awarded or withdrawn.

17. Contract monitoring will be conducted monthly in conjunction with the lead Clinical Commissioning Group (Surrey Downs) for Home Based Care and CHC.
18. We will maintain and monitor the 'Home Based Care Risk Matrix' of all providers, incorporating quality assurance (social care and health), Care Quality Commission compliance, safeguarding and capacity and commercial intelligence.
19. An annual customer feedback survey is conducted. The most recent survey was completed in September 2014. The survey was re-designed jointly with user led organisations to fit the new service specification. The survey asks specific questions around maintaining and making new links with family, friends and community and whether people regularly see the same group of care workers.
20. A new provider self assessment was also designed and was completed in November. The provider self assessment mirrors the customer feedback survey and therefore enables direct comparison between what our customers think of the service and how the providers think they are performing.

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| Key Risks and Mitigation |
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Risks

21. Finance: The market's ability to maintain/afford 7 day working and health infrastructure support without significant fee increases.
22. Safeguarding: ongoing issues around the issues posed by late/ missed calls and the general quality of care offered by providers.
23. Recruitment and retention of provider staff: This is a significant challenge for home based care providers particularly in Surrey. There is difficulty recruiting the right staff in high enough numbers and then retaining them within the home based care market in Surrey.
24. Cost of Continuing Health Care and End of Life Care could push up costs for specialist areas, speed, turnover and administration/assessment.
25. Operational risk: Practitioners are the main commissioners and it is crucial that the intelligence on how the providers are performing is fed back to the commissioning and procurement leads for Home Based Care.

Mitigation

26. Different rates for different zones could manage higher costs of rural delivery being spread across the board. SPC providers are absorbing costs across the board, and not charging a “rural premium”.
27. Electronic monitoring has been brought in as a requirement for all of our Strategic Providers and as an aim for our Any Qualified Providers, this will mitigate against the risk of late/missed calls and if they do happen allow providers to put safeguards in for those individuals whose call maybe late or missed. Reporting on late/missed calls is a core part of our performance management regime.
28. The Home Based Care risk log for all providers captures safeguarding and quality concerns about providers and is reviewed monthly allowing appropriate action to be taken. Where possible commissioning and procurement also attend safeguarding meetings in regards to specific providers.
29. To support our providers and help improve their recruitment and retention rates we are holding in conjunction with Skills for Care a recruitment and retention workshop on 29 January just for our strategic providers. Further workshops will be held which will be open to all home based care providers in Surrey.
30. As part of embedding the new contract commissioning and procurement have made presentations at all locality team meetings and have met with the Social Care Development Coordinators both as a county wide group, at an area level and individually to highlight the importance of the local intelligence gathering. These relationships will be further strengthened by the re-alignment of commissioning to the Clinical Commissioning Groups and having a greater local focus and presence.
31. Through the extra care housing remodelling we have reduced costs/risks and agreed flat rates. Evidence shows that this model of care provides increased independence, choice and control for residents.
32. The local Family, Friends and Community agenda is developing cost effective services (voluntary sector shopping support services, dog walking, etc) replacing expensive domiciliary care provision. The Borough and District Councils are crucial in developing and strengthening the Family, Friends and Community work and ensuring that people are fully supported throughout their care journey, which includes before they need care and whilst they are in receipt of care.
33. The new social value act will also place greater requirements on providers to be making a contribution to their local community and as part of our initial meetings with providers we have specifically been asking what they do in regards to supporting the local community they are based in. This will further enhance the Family, Friends and Community agenda.

Recommendations:

34. It is recommended that the committee:

- a) Note the progress made to date;
- b) Share with Members of Select Committee the analysis of both the customer feedback survey and the provider self assessment; and
- c) Request an update in 12 months time when the contracts have been operating for a longer period and further analysis of the outcomes can be made.

Report contact:

Kirsty Malak - Senior Commissioning Manager,
Ian Lyall – Senior Category Specialist

Contact details:

E-mail: kirsty.malak@surreycc.gov.uk, Tel: 020 8541 7062,

E-mail: ian.lyall@surreycc.gov.uk, Tel: 020 8541 9933

Sources/background papers:

[Adult Social Care Select Committee Report 26 June 2014 - Home Based Care Tender 2014](#)

[Cabinet Report 22 July 2014 - Surrey County Council Home Based Care Support Services](#)