Purpose of report:

At its meeting on 20 January 2017, Surrey County Council’s Social Care Services Board received a report on Surrey’s Home Based Care market and agreed to receive further update from officers following re-commissioning of the Service in October 2017. This report provides an update on the Home Based Care market in Surrey to the Adults & Health Select Committee as the successor to the Social Care Services Board while also detailing the impact of the e-brokerage system in more efficiently engaging with and developing the market.

Introduction:

The Home Based Care (HBC) market both nationally and locally is under extreme pressure in terms of finding the capacity to respond to growing demands for the service against challenging financial circumstances. Surrey County Council (SCC) continues to work with health services and providers in developing capacity and service solutions to secure availability of a quality service.

The HBC Service was re-commissioned from 1 October 2017 in order to respond to this challenging environment and this report is provided to update the Committee on the current status of this exercise.

Current Status of HBC Provider Agreements:

1. Invitations for Expressions of Interest to enter into agreement with SCC (with pre-agreed specifications, contractual terms and rates) were issued for Awarded Provider Status (APS) agreements to be effective from 1 October 2017. Receipts have been evaluated by Procurement, Adult Social Care Commissioners, Quality Assurance, Finance and NHS Continuing Health Care (CHC).

2. An initial tranche of Expressions of Interest were received from 128 providers - this has subsequently increased to 152 applications. (Note: There are currently 202 Care Quality Commission registered Home Based Care agencies in Surrey)

3. All post code delivery areas have had at least 20 APS provider bids. Details of number of bidders per post code are shown below –
4. Provider Engagement Events have been held to introduce/train newly awarded APS providers.

5. The invitation remains open for further providers to apply and SCC continues to accept and evaluate new bids on a bi-monthly basis. This allows SCC the flexibility in its approach to the market to encourage new or expanding agencies to engage with the Council for mutual benefit. It should be noted that although all registered providers are encouraged to engage with SCC, there are some providers who may not wish to undertake business with the Council – including, amongst others, those whose business model is established on servicing self-funders and those who are not currently expanding due to staff recruitment challenges.

**Use and Benefits of e-Brokerage in the Placement of Packages of Care:**

6. The e-brokerage system is a ‘one-stop’ electronic enquiry for availability to provide sent to all suitable providers using Surrey Information Point. All providers contacted are sent the same information and are given an equal opportunity to respond within a set time frame, usually three hours. The package of care is awarded after all providers contacted have had an opportunity to respond.

7. The decision about which provider is awarded the package, in the event of more than one provider having availability, is taken following discussions with the service user, their family, team knowledge or experience of the provider and guidance from Adults Social Care (ASC) officers, and funding approval. All provider rates are already agreed and established through previous APS contract agreements.
8. The system is used by all 11 ASC locality teams, and the five acute hospital teams. NHS CHC has had access to this system since October 2017. Every week more than 60 packages of care are awarded using e-brokerage.

9. Only APS providers are set up with access to the system. Providers receive requests specific to their contracted post code delivery areas. The use of e-brokerage by HBC providers is mandatory in the APS agreements and there are specific Key Performance Indicators (KPI) linked to the usage of e-brokerage.

10. E-brokerage has enabled SCC to generate more data regarding its providers and the HBC market in general. This means that SCC is less reliant on providers submitting data. The data that they do submit can be more easily verified using e-brokerage. The data supplied by e-brokerage enables the Council to identify potential issues with the HBC market and seek to develop solutions to address these issues with partners and providers.

11. The availability of data means that providers can also obtain a better view of the total SCC demand on a post code level allowing them to plan recruitment and capacity allocation within their business plans.

12. Feedback from both ASC/Continuing Health Care (CHC) users and providers has been very positive. Time is freed up to work on other tasks by both ASC/CHC staff and providers as e-brokerage does away with the need to make or respond to countless calls enquiring about availability of care.

### Ongoing Contract Management, Quality Assurance and Provider Networking:

13. Every HBC APS provider will have a named contact from SCC (either a local Commissioner or a Social Care Development Coordinator) to enable ongoing contact, development, and performance management.

14. Contract management and performance monitoring will be formally provided through quarterly KPI returns, required from all providers with APS agreements. A copy of the questions to show the areas covered is attached as Annex 1.

15. Contract monitoring meetings will be held regularly with SCC’s largest and strategically important providers. These meetings will be chaired by the lead HBC commissioner for each area. A proportionate approach will be taken as to the method and frequency of contract monitoring of smaller providers.

16. Monthly internal contract management meetings will be held with representatives from all local Commissioning areas, NHS CHC, Quality Assurance, Procurement, Business Intelligence, Finance and Legal. These will deal with operational matters, share information and intelligence, and review the action log on providers.

17. A HBC action log has been devised which lists all providers that SCC commissions with and enables risks, comments and actions to be captured by providers. This action log is reviewed at the monthly contract monitoring meetings. It is also accessible to SCC’s health colleagues. The action log forms a vital part of the day to day management of HBC and the contract monitoring process.
18. The four Area Quality Assurance Managers in SCC Adult Social Care will maintain oversight of the APS providers in their areas. This will be done by attending the contract monitoring meetings and analysing KPI returns in liaison with the Social Care Development Coordinators. Where concerns around performance or quality arise, the Quality Assurance Manager will arrange a monitoring visit to the agency and the people that use its service. In some instances assurance from the agency may be sought through other means such as telephone or emailing the manager to discuss concerns, or asking for service improvement plans.

19. Quarterly Reference Group meetings will be held with service user representatives for their information and feedback so that the Council can assure that the service continues to be informed by user experience.

20. Each local HBC Commissioner will organise regular provider forums in their area in order to facilitate two-way lines of communication in the local provision of capacity and quality.

21. In addition, the Council will maintain regular contact with Surrey Care Association and, through their provider network, the Surrey care provider market in general.

### Conclusions:

22. Contractual agreements have been concluded with an increased number of HBC service providers in Surrey, representing a majority of the market. These cover all postcodes in the County.

23. Placements of new packages of care are being made with use of SCC’s e-brokerage system achieving efficiencies for SCC officers and providers as well as delivering data that can be effectively used by all parties.

24. Contract management and performance monitoring processes have been put in place to ensure that ongoing delivery of care is of acceptable quality. Market and provider engagement continues to allow SCC to engage with suitable providers in a flexible way.

### Recommendations:

It is recommended that the Adults and Health Select Committee

i. note the status of the re-commissioned Home Based Care Service in Surrey, specifically the part of the market commissioned by Adult Social Care; and

ii. notes Surrey County Council’s plans to –

   a) continue gathering efficiencies through the usage of e-brokerage;
   b) exercise regular contract management and performance monitoring; and
   c) work with the provider market to stimulate and support sufficient quality delivery capacity.
Next steps:

The Adult Social Care Directorate will continue the commissioning, delivery and monitoring of HBC services to eligible residents and to address market developments in order to ensure the continuity of quality care.

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Annexes:
Annex 1 – Performance Monitoring Schedule

Sources/background papers:

None

Glossary of acronyms:
APS – Awarded Provider Status contract agreement for the provision of services
ASC – Surrey County Council Adults Social Care
CCG – NHS Clinical Commissioning Group
CHC – NHS Continuing Health Care commissioners (provided by Surrey Downs CCG on behalf of all Surrey CCGs
HBC - Home Based Care service
KPI - Key Performance Indicator
SCC – Surrey County Council
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