RESPONSE TO ADULTS, WELLBEING AND HEALTH OVERVIEW AND SCRUTINY COMMITTEE'S REPORT ON HOMECARE SERVICES

То:	Cabir	net	
Date:	6 th March 2012		
From:	Executive Director: Children and Young People's Services and Adult Social Care		
Electoral division(s):	All		
Forward Plan ref:	N/a	Key decision: No	
Purpose:	To outline Cabinet's response to the Adults, Wellbeing and Health Overview and Scrutiny Committee working group's report into home care services.		
Recommendation:	a)	To thank the Scrutiny Committee for an excellent and thorough report	
	b)	To consider and agree the responses to the recommendations.	

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1. BACKGROUND

- 1.1 This report sets out the response to the findings and recommendations of the review of home care services conducted by the Adults, Wellbeing and Health Overview and Scrutiny Committee Adult Social Care working group. The review took place between August 2011 and January 2012.
- 1.2. The working group consisted of County Councillors Kevin Reynolds, Sue Austen, Gail Kenney, Simon King, and Caroline Shepherd and Huntingdonshire District Councillor Richard West. Officer support was provided by Jane Belman, Scrutiny and Improvement Officer.
- 1.3 The objectives of the review were to:

Identify the extent to which current home care services

- Provide a high quality service for individuals
- Use resources effectively
- Promote a personalised approach
- Support the objectives of reablement and timely hospital discharge
- Are part of a well co-ordinated system of health and social care

Make recommendations for improvement in relation to the above.

- 1.4 In conducting the review, members obtained evidence from a range of sources including the views and experience of people who used home care services, the views and experience of home care workers, care agencies and the perspectives of other statutory agencies along with written information.
- 1.5 Members also considered the following reports
 - 'Close to Home; an inquiry into older people and human rights in home care': Equalities and Human Rights Commission (EHRC) August 2011.
 - 'Joining up Health and Social Care': Audit Commission December 2011

2. MAIN ISSUES

- 2.1 The current contracts for home care services expire on 30th September 2012. Preparations are underway to procure home care services that meet the needs of frail and vulnerable people across the county. The new contracting approach will take into account the personalisation agenda and seek to encourage care agencies to offer a wider range of services than is currently available.
- 2.2 The report will assist in developing the thinking and market development responsibilities of commissioning officers in order to ensure that people are able to access high quality services that meet their individual needs.
- 2.3 The report recognises that there are a range of inter-related issues that have a fundamental impact on the effectiveness of home care services and on

people's lives. These include recruitment, monitoring and safeguarding, workforce development, interagency relationships, provider capacity and electronic homecare monitoring.

2.4 The report structures its findings into a number of main headings and goes on to make a series of recommendations suggesting how each area could be improved. Each recommendation has been reproduced in Appendix 1 with an individual response.

3. ALIGNMENT WITH PRIORITIES AND WAYS OF WORKING

3.1 Supporting and protecting vulnerable people when they need it most

The following bullet points set out details of key implications identified by officers:

- People who use home care services will be enabled to maintain their independence
- People will have increased choice and control over the services they are able to choose
- Providers of services will be supported to develop a skilled and competent workforce able to meet the needs of vulnerable people.

The remodelled home care contract will provide:

- A more integrated approach across different agencies and the public sector
- Increased collaboration between care agencies so that they can maximise the hours spent with people and eliminate unnecessary travel time
- Tailored services to the different needs and expectations of those living in rural/urban situations.

These services work with some of the most vulnerable people in the county including:

- Older people
- People with a learning disability
- People with sensory impairment
- People with a physical disability
- People with mental health problems.

3.2 Helping people live healthy and independent lives in their communities

The following key implications were identified:

- People will be able to continue to live in their own homes as long as possible through the introduction of new services tailored to meet their individual needs
- Services will aim to be more flexible by challenging artificial barriers between different types of need. Care agencies will be actively encouraged to work across different client groups and develop their expertise according to the needs of people who use their services

• Officers will work with corporate colleagues, advocates and partners to ensure that people are able to complain and comment on the services they are receiving in an accessible and confidential manner. This information will be used to further improve the quality and types of service available to people.

3.3 Developing the local economy for the benefit of all

The following key implications were identified:

- The majority of the care agencies supplying home care services are local businesses, the revised contracting approach will allow for meaningful consultation regarding the implementation and development of the new approach
- Officers will work with employers, training providers, colleges and health colleagues to develop learning opportunities and sustainable career pathways for those workers in the care industry. This work will be dependent on the willingness of those organisations that employ care staff to commit their time and resources to improving the career prospects of their staff.

3.4 Ways of working

The following bullet points set out implications identified by officers for:

- Being a genuinely local Council implementation of the recommendations contained in Appendix 1 will lead to the growth of local businesses.
- Making sure the right services are provided in the right way see particularly 3.2 above
- Investing in prevention effective services to those who need care in their own home supports the prevention agenda through an enabling approach to the delivery of care in people's homes.
- Working together see 3.3 above

4. SIGNIFICANT IMPLICATIONS

4.1 Resource and Performance Implications

The following bullet points set out details of significant implications identified by officers:

- The introduction of the responses to the recommendations in the report by the Adults, Well-being Health Overview Scrutiny Committee report will lead to increased efficiency and collaborative working across the sector. This in turn will assist with ensuring savings are secured to assist with balancing the budget for 2012/13
- The eventual tendering of these services will ensure best value and the most competitive prices for services are realised, whilst maintaining and improving the quality of service to frail and vulnerable people.

4.2 Statutory, Risk and Legal Implications

Corporate Procurement and Legal Advice

In preparing this paper, the opinion of both the Corporate Procurement and Legal teams were sought, which are briefly outlined below.

As advised by Corporate Procurement, it is important to recognise that all
of these contracts are classed as Part B Services, as per Section 25 of the
Public Contracts Regulations 2006. However, whilst Part B services are
not subject to the full rigour of all EU Procurement Legislation, as a public
body the Council has an obligation to comply with EU Treaty principles
and to act with fairness and transparency in procuring such services.

4.3 Equality and Diversity Implications

The following bullet points set out details of significant implications identified by officers:

• The ability of people who use services to comment or complain about those services will be improved as a consequence of implementing the actions detailed in Appendix A.

4.4 Engagement and Consultation

Providers of services will continue to be involved in the development of the new contract through a variety of approaches including Provider Forums, questionnaires, workshops and individual meetings with commissioners and contract officers.

People who use services will be able to influence the development of home care services through groups a range of consultation forums and advocacy organisations.

Source Documents	Location
'Close to Home; - an inquiry into older people and human rights in home care': Equalities and Human Rights Commission (EHRC) August 2011.	<u>http://www.equalityhumanrights.c</u> <u>om/legal-and-policy/inquiries-and-</u> <u>assessments/inquiry-into-home-</u> <u>care-of-older-people/close-to-</u> <u>home-report/</u>
'Joining up Health and Social Care': Audit Commission December 2011	<u>http://www.audit-</u> <u>commission.gov.uk/nationalstudie</u> <u>s/localgov/Pages/joininguphealtha</u> <u>ndsocialcare.aspx</u>
Health Overview and Scrutiny Committee Adult Social Care working group's report into home care services	Jane Belman Room 221, Shire Hall Cambridge

<u>Response to recommendations made by the Adults Well-Being and Health</u> <u>Overview Scrutiny Committee.</u>

RECOMMENDATIONS

A human rights approach

Recommendation 1.

The Council explicitly promote and protect human rights in the way that it commissions home care services, and procures and monitors contracts, and report back to the Adults Wellbeing and Health OSC how it has implemented the recommendations of the EHRC Close to Home report

Proposed Response – fully accepted

<u>Response</u>

The Council has noted the report by the Equality and Human Rights Commission and will take forward a range of initiatives aimed at improving the lives of vulnerable people including:-

- Briefings for officers involved in commissioning home care services to ensure they are aware of how the Human Rights Act impacts on home care services. The Head of Older People's Commissioning will provide a similar briefing to the Older People's Partnership Board.
- Review the advocacy and information services provided by AgeUK to ensure they incorporate advice regarding Human Rights breaches.
- Review the process, ease and confidence with which people can complain about their care agency.
- Provide a formal briefing to the Adults Safeguarding Board.
- Consider the support and information requirements of Personal Assistants and develop a strategy to promote the development and prospects of those individuals seeking to become Personal Assistants.
- Consider a formal briefing for Health and Well-Being Board, Scrutiny Committee and Healthwatch. The briefing could be based on *Close to Home* with a view to informing Committee members of their responsibilities whilst highlighting the positive steps already taken.
- Take into account any responses to the report by the Association of Directors of Adult Social Service (ADASS), the Local Government Association (LGA), Care Quality Commission (CQC) and Department of Health as and when they are published.
- Consider any amendments to adult social care policies and strategies that may be impacted by either the content or recommendations within the report

Contracting for quality

Recommendation 2

Agencies bidding for contracts should be required to provide evidence of how they will be able to achieve what is expected of them, and deliver a safe high quality service. This includes how they will ensure that:

- they have the capacity to deliver the service throughout the year, including holiday periods and periods of high demand
- they have the capacity to provide urgent care
- they have the management capacity and processes to underpin a high quality service
- staff are trained to a level that enables them to meet the assessed needs of the clients that they care for, including those with dementia and other specialised needs.

Proposed Response – fully accepted

<u>Response</u>

The new contract for personal support services is being prepared and will be advertised in March 2012. The evaluation criteria used to assess potential applicants will include a number of specific questions at Pre-Qualification Questionnaire stage, aimed at ensuring that those applying can meet the requirements outlined in the Service Specification and the requirements of the Care Quality Commission's "Essential Standards of Quality and Safety".

The Invitation to Tender will require bidders to give comprehensive responses to a range of Method Statements. These will test the processes, procedures, structures, experience and capacity to deliver complex services in a geographical area. Those shortlisted will be required to attend an interview process where further questions will be asked about their bid submission.

Every bidder will be required to pass a quality benchmark in each area evaluated. Those not able to meet this benchmark will not be selected to provide services across the county.

Recommendation 3

The contract should specify what is expected of the agency in terms of ensuring personal safety for staff, and the agency should evidence how it will address this.

Proposed Response – fully accepted

Response

The new contract will require providers to undertake risk assessments for their staff as part of their response to the Health & Safety Method Statement. This is a legal requirement. The contract will also require providers to have comprehensive processes in place for monitoring and evaluating the effectiveness of their policies and approach to lone working and assessing any risks to their staff.

Training and Development

Recommendation 4

The Council work proactively with agencies, training providers and partners to ensure that :

• care agencies can access appropriate and affordable training for their staff, including training provided by the Council, which will enable them to meet the needs of the clients that they care for. This includes:

- Generalist training. which should include adequate training in personal safety
- Specialist training, including end of life-care; caring for people with dementia and caring for people with mental health issues.

This includes working with the NHS to ensure the availability and provision of specialist dementia training.

• care agencies have easy access to Information about what accredited training is available e.g. through a Council website.

Proposed Response – Fully accepted

<u>Response</u>

Every contract across adult social care includes a requirement that providers have a skilled and competent workforce able to discharge the requirements within the service specification and meet the needs of people they are caring for.

The Head of Transformation and Quality is responsible for working across relevant agencies to ensure a co-ordinated approach to workforce development across the social care sector. An integrated approach to workforce development is in development and it will seek to support the introduction of sustainable career pathways across health and social care. This initiative is dependent on the commitment and resource availability across a number of agencies including health, Skills for Care, JobCentre plus, the county council, schools, colleges and independent sector employers. Initial meetings have taken place and an action plan will be developed as part of the Adult Social care Workforce Development Strategy 2012 – 2015.

The County Council will continue to work with other organisations to ensue that comprehensive training opportunities are available across the sector. This will however, be dependent on the resources available within each agency.

The focus of learning opportunities will be linked to the results of monitoring inspections by the Council, CQC inspection reports and the results of meetings with CQC to discuss performance and trends across the county. The approach will also be informed by any trends highlighted in Safeguarding investigations.

Staff pay

Recommendation 5 The Council:

- ensure that every agency it contracts with pays at least the minimum hourly wage including time spent travelling.
- work proactively with agencies as far as legally permissible to encourage them to pay at least the national living wage.

This should be linked with an open book approach, in which agencies are asked to provide a breakdown and explanation of their costs, including overheads.

Proposed Response – partially accepted

<u>Response</u>

The Council has a legal obligation to ensure that agencies it contracts with pay at least the National Minimum Wage. The new contract will be explicit regarding this requirement.

Providers must be allowed some flexibility in their remuneration arrangements for their staff. Each provider will adopt different approaches to payment for mileage, guaranteed hours of employment and payment rates per hour. The Council's role is to ensure that the proposed remuneration package is realistic and sustainable given our knowledge of local employment markets.

The pricing schedule within the tender pack will require providers to break down their price into a number of areas which will allow the finance team to assess the sustainability of tendered prices. Officers are working with the sector to introduce an "open book" element within the new contract.

Recommendation 6

The Council works with agencies, as far as is legally permissible, to identify and implement pay strategies that recognise the need for differential pay in different parts of the County, are realistic about mileage costs, and that rewards staff who increase their skills and undertake more skilled work.

This includes identifying where agency contracts with staff need to be changed in order to ensure there are sufficient staff of the right quality to provide the services required, for example guaranteed hours rather than zero hours contracts.

Proposed Response – partially accepted

<u>Response</u>

Pay strategies are essentially a matter for each individual organisation and not for the Council to determine.

Providers will have the opportunity to submit differential rates for different geographical areas across the county. This approach recognises that it is more difficult to recruit and retain staff in some areas. Providers should then be allowed flexibility to construct their remuneration packages in a way that fits with their business strategy.

As part of the evaluation process, officers will test the sustainability of these arrangements to ensure that staff retention and recruitment can be achieved in line with contract requirements and the prices submitted by each organisation.

In order to maintain and ensure capacity and continuity of staff, there may be a need to adopt a more interventionist approach to dealing with issues such as provider's ability to manage delayed transfers of care (people coming out of hospital). In these circumstances the Council may choose to adopt an "open book" approach for a limited period of time or for the introduction of an initiative that will assist with ensuring a smooth flow across the system.

Payments under the contract

Recommendation 7

The Council:

- Require agencies to give a clear breakdown of their costs
- Examine this information to identify whether the rate the Council pays to agencies needs to be changed, and/or differential rates paid for different types of activity or for services in different parts of the County, in order to meet the assessed needs of service users
- Allocate resources in the light of the above

Proposed Response – Fully accepted

<u>Response</u>

The pricing document included in the Invitation to Tender will be constructed to take account of geographic and different market conditions across the county. Providers will be required to break down their costs. The finance team will take into account the new prices applicable from the 1st October 2012 and revise financial projections accordingly.

Operational managers will take account of any price changes from the 1st October 2012 and the effect this may have on their budgets.

Staff recruitment and retention

Recommendation 8

The Council work with agencies to develop career pathways for staff, including the opportunities to develop and utilise specialised skills.

Proposed Response – Fully accepted

Response

The Adult Social Care Workforce Development Manager is leading a project to develop sustainable career pathways in the home care sector. The project involves a number of stakeholders including Skills for Care, The Apprenticeship Scheme, JobcentrePlus, 3rd sector representatives and independent sector employers. The Adult Social Care Workforce Development Strategy 2012 – 2015 will include an action plan that will detail the tasks that are the responsibility of the Council along with timescales and resource implications.

Recommendation 9

The Council work with agencies to actively promote care work as a career. This could be, for example, by arranging recruitment events, liaising with colleges, or facilitating recruitment from other EU countries.

Proposed Response – Fully accepted

Response

As part of the project mentioned above the Council intends to work with providers to promote home care as a viable career alternative for those seeking employment across the county. This will include working with providers to promote recruitment events and publicise the sector in the local media. Initial meetings have already taken place and the first recruitment event is planned for early summer 2012.

Service monitoring

Recommendation 10

The Council ensure there is sufficient monitoring officer capacity to review and provide evidence of the quality of care provided by all agencies on an ongoing basis, including visits to individual users, thus ensuring that issues can be identified and addressed at an early stage, and that standards of care are maintained. This would enable the Council to build on the focused monitoring work undertaken with providers during 2010-2011.

Proposed Response – Fully accepted

<u>Response</u>

The Head of Procurement – Adult Social Care & Supporting People will review the structure and available staff resource to ensure that the team continues to monitor and work with providers to continuously improve services. A schedule of preplanned visits is in place and Service Development Officers use a workbook developed with colleagues across the eastern region.

The Council will continue to use its resources across a number of teams to identify and work with providers to correct any issues uncovered following monitoring inspections. The approach to scheduling monitoring visits will be risk based and take into account information supplied by a range of stakeholders including CQC, Safeguarding, operational teams, complaints, District Nurses and other colleagues across health. Visits to individual service users already take place and this will continue.

Recommendation 11

The Council work more systematically with partners and with voluntary organisations to ensure that concerns about quality of care are identified and communicated back to the Council.

Proposed Response – Fully accepted

<u>Response</u>

Senior officers from adult social care and the Primary Care Trust attend a regular meeting with the CQC specifically aimed at discussing and sharing information about poor service providers. The Commission is also piloting a database that allows officers across the country to share information across boundaries. The County Council is part of the pilot scheme.

The Council already works closely with a number of advocacy organisations, the Local Involvement Network and other stakeholders to ensure that any concerns highlighted are dealt with by the Safeguarding Team and the Adult Social Care Contracts Team. However, it is recognised that more could be done to ensure that it is easy for users of home care services to comment or complain about the service that they are receiving. Heads of Service across Adult Social Care will shortly discuss the findings and recommendations in the *Close to Home* report and develop an approach that will make it easier for people to complain or comment about the service they are receiving.

The Council is developing an approach to improving the quality of care that will include partners, stakeholders and providers of services. The approach will include

cross-sector Provider Forums, newsletters, workshops on topical issues such as dementia and palliative care along with a section within the Council's website dedicated to providers. The web page will include presentations and a synopsis of workshop discussions along with links to commissioning strategies, council policies and examples of best practice across the sector, health & safety, safeguarding and workforce development guidance notes.

Recommendation 12

The Council work with independent organisations to develop mechanisms by which service users and carers, including those who arrange their care directly, can easily feed back concerns to the authority or to an independent body

Proposed Response – Full accepted

<u>Response</u>

The Council has noted the recommendations included in the Equality and Human Rights Commission's report *Close to Home* regarding the inability of people to air their concerns regarding the care they are receiving in their own homes. Officers will take into account the response to these recommendations from the CQC and LGA and develop mechanisms that allow people to comment or raise concerns in a way that is easy to access and leads to service improvement.

Recommendation 13

The Council work with independent organisations to develop mechanisms by which service users and carers, including those who arrange their care directly, can easily feed back concerns to the authority or to an independent body, and have support in doing so.

Proposed Response – Fully accepted

<u>Response</u>

The Council's adult social care portal, <u>www.yourlifeyourchoice.org.uk</u> contains information about services, as does <u>www.Cambridgeshire.net</u> The Council has commissioned AgeUK to provide information, advice and advocacy to older people. As part of the current contract there are specific requirements relating to self funders. The Council's Adult Social Care Customer Care team manages complaints if they arise from independent services which are contracted to the Council. The Council's websites and other distributed literature contain information about safeguarding procedures, and concerns are raised via the Council's Contact Centre.

Recommendation 14

The Council work with independent organisations to ensure that Individuals who arrange their own care have easy access to information that will enable them to make informed choices, know what to do if problems arise, and have access to support if quality or safeguarding issues arise.

Proposed Response – Fully accepted

<u>Response</u>

In addition to the response to recommendation 13, the Council's website includes references to the CQC and other advocacy organisations able to assist people who arrange their own care. The Council also publishes a care directory that includes details of all providers currently working across the county together with information on where to get advice.

Recommendation 15

Agencies should be required to actively promote and pay for flu jabs, and other inoculations as appropriate, for their staff, and ensure that staff do not come to work while sick

Proposed Response – Partially accepted

<u>Response</u>

Staff welfare is the responsibility of every employer as is their approach to sickness management.

The Department of Health publish an annual *"UK Influenza Preparedness Strategy"*. This document sets out the Government's strategic approach to planning and responding to an outbreak, both nationally and locally. The Health & Social Care Local Resilience Forum is responsible for managing this process across Cambridgeshire and will make flu vaccines available to front line health and social care staff (including those identified as essential workers in the independent sector) in accordance with direction from the Department of Health. In previous years the cost of making vaccinations available has been met by the Department of Health.

Electronic call monitoring

Recommendation 16

The Council take forward its proposal for electronic call monitoring, incorporating the comments made in Sec 11 of the report, working with agencies to promote best practice in the development and use of the new system

Proposed Response – Fully accepted

<u>Response</u>

The Council is in the process of purchasing an electronic call-monitoring system which it intends to put in place prior to the start date of the new contract. Local providers will be involved in the evaluation of the various systems being considered. All of the systems being considered will be taken from the eastern Shires Purchasing Association's approved (ESPO) list. A mini-tender process will be undertaken to select a products that is compatible with the Council's IT systems and meets the needs of providers.

Interagency working

Recommendation 17

The Council work with care agencies and partners to improve co-ordination and joint working in relation to

- Hospital discharge arrangements
- Primary care, including arrangements for medication
- Rapid arrangements for urgent care

Proposed Response – Fully accepted

<u>Response</u>

The County Council and NHS Cambridgeshire have in place joint commissioning arrangements which are formalised through the S75 contracts with both Cambridgeshire Community Services and Cambridgeshire Partnership Foundation Trust. These arrangements are under review. There is a strong history of inter agency working across health and social care and other public services such as housing. This approach has resulted in the delivery of an integrated reablement and intermediate care service, joint medication management and training arrangements and an integrated approach to the hospital discharge service, which includes weekly inter-agency co-ordination meetings, both at operational and strategic levels. Further work will be undertaken over the next year to further integrate services and processes in order to secure more efficient and effective care services.

Recommendation 18

The Council work with care agencies and GP leads to develop the working relationship between agencies and primary care commissioners, at both County and locality levels.

Proposed Response – Fully accepted

<u>Response</u>

The Director of Adult Social Care and the joint Head of Older People's Commissioning works closely with the GP commissioning clusters and the GP Senate to ensure that GP's are aware of the challenges and links between home care providers and the health and social care economy. GP's attend a range of meetings with partners.

The current contractual arrangements mean that a number of agencies operate in a single area, reducing the opportunity for the development of good working relationships between primary care and individual home care providers. This issue is being addressed, through the current review. In future, locality commissioning will be a key element of this approach. This will enable more effective partnership working at a local level.

Personalisation

Recommendation 19

The Council work proactively with agencies to develop their capacity to provide more personalised and outcome focused services, tailored to what people wanted, such as going on outings or taking part in activities. This includes:

- using the tendering and contractual process to commission a wider range of services.
- building flexibility into the care plan, for example by allowing for

variation in the times when services are provided, where this accords with user choice.

Proposed Response – Fully accepted

<u>Response</u>

The service specification in the new contract will expect providers to diversify their service offering to include a wider range of services than is supplied currently. Officers will continue to work with the sector to develop these alternative service offerings by identifying gaps in the market, consulting with people who use services and working with training providers to develop learning opportunities for care staff.

The current contract allows providers some flexibility in the timing of their calls so that the wishes of users of services can be matched to the availability of care staff working in that area. The new contract will continue with this approach. However, flexibility is dependent on capacity.

Service Development

Recommendation 20 The Council

- Proactively explore with agencies and other partners ways in which care workers can play a greater role in developing integrated care, particularly in relation to end of life care, admissions avoidance, and falls prevention.
- work with partners and agencies to take forward service development initiatives in relation to the above, by developing and evaluating locality based pilot projects.

Proposed Response – Fully accepted

Response

Home care services play a key role in preventing inappropriate admissions to hospital. Current arrangements include end of life work, where they work alongside clinical colleagues employed through NHS organisations. It is noteworthy that in feedback from service users in relation to palliative care, home care assistants have often been identified as the most important professional, because of the practical nature of their work. Our joint commissioning arrangements include the commissioning of end of life services from specialist providers such as Crossroads and Marie Curie. Additionally, there are formal requirements of home care services to undertake the management of complex medication. This work is supported through a joint training programme, and through contract monitoring. Falls prevention is also a major area of service initiated through joint commissioning. There are specialist services provided through Care Response 24 (provided through housing related support, the Falls Prevention vehicle (currently being piloted in Cambridge City and South Cambs and reablement. There are falls clinics provided by CCS and arrange of activities delivered in partnership with housing providers.

Efficiencies

Recommendation 21

The Council work with agencies, and encourage them to work with each other to identify efficiencies, with particular reference to:

- Rationalising staff rotas and travel times
- Shared purchasing

Proposed Response – Fully accepted

<u>Response</u>

The new contract will include an explicit expectation that providers work collaboratively to maximise the use of their staff. Cambridgeshire Community Service's care co-ordinators will play a key role in ensuring that this is effective and leads to more efficient rostering of care workers. However, it should be noted these organisations are commercial competitors and their willingness to collaborate with each other, will be dependent on building trust whilst protecting their individual commercial interests.

Officer will work with the LGSS Procurement Team to identify any potential opportunities for collaborative procurement across the sector.