

Additional Homecare Block Provision for Winter Pressures

To: Adult and Health Committee

Meeting Date: 9 December 2021

From: Executive Director, People & Communities

Electoral division(s): All

Key decision: Yes

Forward Plan ref: 2021/071

Outcome: People will be supported to return home and regain independence in a timely manner upon discharge from hospital as a result of immediately available homecare capacity to support winter pressures.

Recommendation: Adults and Health Committee is recommended to:

award a 12 month contract to an existing provider, who have been able to guarantee the Council a total of 85,176 homecare hours, at a total cost of £1,622,790.

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1. Background

- 1.1. 'Homecare' is considered any support service that a person might need in their own home. This may include shopping, meal preparation, support taking medication and meeting their personal care needs. Provision of good quality homecare not only enables the Council to meet its statutory duties under the Care Act 2014, but it is also key to the prevention agenda in that it enables people to remain living independently within their own home for longer. In addition, to homecare the Council provides a delivers a range of other services which prevent admission to hospital and reduce the need for long term care. This includes the delivery of the Reablement Service, the Enhanced Response Service and Technology Enabled Care. The Council also commissions a range of services which support low level needs from the voluntary and community sector (VCS) from community warden schemes through to handy person services and information and advice.
- 1.2. Unfortunately, the complexity of someone's needs means it is not always possible to prevent admission to hospital. The availability of homecare services able to respond quickly and in a person-centred way is really important when supporting people to return home to recover on discharge from hospital. This support is currently delivered through two block contracts of homecare hours which allow the Council to meet the needs of service users quickly and effectively. The contracts buy 'blocks' of time to deliver care, so we don't have to spot purchase when we need care urgently, as the capacity is guaranteed and always available for people and family carers who require support.
- 1.3. The purchase of block homecare hours allows the Council to source care in the following circumstances:
 - To enable people to return home from hospital as soon as they are medically ready.
 - To provide care for people who are in hard-to-reach areas or to fulfil hard to place packages of care.
- 1.4. This approach enables people to return home on discharge from hospital without delay by providing a short-term service which assists recovery in the community. The homecare provider delivering the service is highly responsive and outcome focused, enabling the people they support in the short term to effectively recover in the community. Care is tailored to each person's specific needs so as they recover and become more independent, the level of care received may be reduced where appropriate. The provider supports each person to transition into a longer term or 'mainstream' homecare arrangement having undertaken this approach.
- 1.5. This paper outlines the proposal to award a 12 month contract, with a six month break clause, to a current provider to allow for additional provision of homecare to support an expected increase in the number of people who will need this service this winter. Working and funded in partnership with the NHS, this provision will ensure people continue to return home from hospital as soon as they are able to do so despite rising demand for services. To support hospital discharge throughout the County and meet the Councils statutory duty, it is vital that this provision is maintained.

2. Main Issues

- 2.1. This proposal supports winter planning preparation as well as expected challenges arising from COVID-19 by proactively securing additional homecare capacity to meet forecasted

pressures on health and social care. The impact of COVID-19 and the impending flu season is predicted to lead to even greater pressure on the health and social care system than we have seen over winter in recent years. This is compounded by existing pressures in both systems, including a reduction in workforce and higher placement costs in the care market.

- 2.2. In line with the trends experienced nationally, the homecare market is currently experiencing a higher than expected number of vacancies and challenges in recruiting and retaining staff. This is due to a combination of issues including leaving the EU, lack of visas, COVID-19, the prediction of mandatory vaccinations, working conditions and the overall value placed on care as a career. There is an increasing capacity issue within the homecare market and providers are reporting that they are unable to recruit carers at this present time.
- 2.3. The Council have seen the number of service users awaiting mainstream care rise 557% from March 2021 to October 2021. It is expected the levels of those waiting for homecare could rise a further 74% on the existing numbers. Whilst we are currently able to meet the statutory needs of people awaiting homecare and short term solutions are in place, there is a need to manage the risk of further increases in demand for services. The sourcing of additional block homecare hours to support hospital discharge over the winter months will ensure people at risk are not left without provision and we are able to support hospital discharges.
- 2.4. This capacity will deliver additional homecare capacity over and above the two contracts the Council currently hold - one local authority funded contract for block hours of homecare and one recently recommissioned contract for block hours of homecare, funded by the Improved Better Care Fund (IBCF) grant. This additional contract alongside the newly commissioned provision provides cover for winter pressures as well as offering more choice to service users.
- 2.5. The Council works in partnership with the Clinical Commissioning Group (CCG) and health colleagues to ensure a smooth transition between hospital and returning home with social care support through hospital discharge pathways. This contract for block hours of homecare will support smooth transitions between hospital and home. This joint working with the CCG forms part of a wider system response to winter pressures.
- 2.6. It is intended to award the contract to an existing provider of block hours of homecare, Beaumont Healthcare. This provider is a local Small Medium Enterprise with an excellent track record of delivering this provision and has maintained high quality care throughout the pandemic, as well as a history of well-maintained capacity throughout previous winter months.
- 2.7. Outlined below are some of the alternative options that have been explored:

Option Summary	Consequences
Do nothing.	If we do not commission an additional provision of block hours for homecare, there is a risk we will not be able to meet the increased demand the winter period can bring and be unable to fulfil the needs of people in need of support on return home from hospital. Lack of available homecare support

	could result in the use of care home beds as an alternative which is not conducive to improving the experience and outcomes for individuals. It could also prevent those in the community from accessing vital homecare services.
Run a full tender.	Ordinarily a full procurement process would be undertaken to increase capacity through additional contracts with independent sector providers. However, a full procurement exercise will be a lengthy process and cannot be implemented in time to meet the winter demand. There is also the possibility that the provider/s will not be able to mobilise the service due lack of capacity in the market. Demonstrating value for money – the proposed award is made at the same price as it was in 2017, with no uplift in rates for four years.
Deliver through In House Services	The use of in house services would also add considerable time to the process as in house capacity is not readily available to respond to this level of demand immediately. In addition to this, in house provision of block homecare hours costed at double that of a providers' overheads, due to the additional staffing requirements, training, etc. so does not work out as value for money in the immediate term.

2.8. Alongside the additional block hours of homecare, to tackle some of the issues facing the market and support in recruitment and retention, the council is undergoing a wider workforce development project as part of the new homecare commissioning model, to improve the longer term outcomes for the market. However, this will need to be managed in partnership with local, regional and national networks to fully address the significant challenges which face the sector as a whole.

2.9. The benefits of utilising the block homecare hours are listed below:

- Ensure the Council has planned enough homecare provision to meet demand in upcoming winter pressures.
- Support people to return home from hospital in a timely manner by providing a responsive homecare service.
- Increase joined up working with health and align arrangements to the development of Discharge to Assess.
- Enable people to return to their own homes and encourage autonomy and choice in care.
- Reduce reliance on bed based care whether that be in hospital or a care home.
- Protect and enhance choice and control for service users through adopting a rights-based approach to service delivery and the concept of independent living.
- This request supports the move towards integrated health and social care, seeking a clear shift towards prevention and 'early help', with an emphasis on health and social care outcomes.

3. Alignment with corporate priorities

3.1. Communities at the heart of everything we do.
There are no significant implications for this priority.

3.2. A good quality of life for everyone.

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

- This service allows people to return home from hospital, should they wish to go home with homecare.
- This service prevents people from being kept in hospital waiting for homecare.
- This service allows people to return home quickly and safely and avoids them going into an unnecessary residential placement should homecare not be available.

3.3. Helping our children learn, develop and live life to the full.
There are no significant implications for this priority.

3.4. Cambridgeshire: a well-connected, safe, clean, green environment
The following bullet points set out details of implications identified by officers:

- This service allows people to go home with care quickly and efficiently. The service is also part of a wider project to move towards greener provision by providing electric cars.
- The report also sets out the implications for this priority in 4.8. below.

3.5. Protecting and caring for those who need us
The report above sets out the implications for this priority in [ref paragraph]

4. Significant Implications

Report authors should evaluate any further significant implications using the eight sub-headings below. These significant implications should also be evaluated using the questions detailed below. Each specific implication must be signed off by the relevant Team within the Council before the report is submitted to Democratic Services.

4.1. Resource Implications
The following bullet points set out details of significant implications identified by officers:
This provision will consider and support:

- Appropriate, expedited and safe discharge from hospital, supporting reablement and encouraging independence.
- Reducing the risk of inappropriate admission / re-admission to hospital with the right intervention at the right time, supporting people to stay at home and regain / retain independence.
- The contract will be funded through the winter planning budget and contributions from the CCG. The funding required for this contract is £1,622,790 and it has been agreed the CCG will fund the first 6 months of this service. It is important to note that the contract has a break point at a six-month point, this will allow the council to determine if it is still achieving value for money for this service and make a decision to continue with the remaining six months of the contract or terminate under the contract's terms.
- The funding over and above the NHS winter money is included in the pressures paper. The pressures paper sets out the significant increase in costs as well as the sharp increase to demand to support discharges from hospitals into the community. Therefore, the remaining £811,395 will be sought through the pressures paper.

4.2. Procurement/Contractual/Council Contract Procedure Rules Implications.
The following bullet points set out details of significant implications identified by officers:

- There is a possible risk of challenge from the provider market due to the nature of the direct award and value of the contract. However, a recent tender was conducted for a longer-term block hours of homecare contract, open to all of those on the Dynamic Purching System (DPS), giving opportunity to those who wish to deliver a block provision of hours for homecare.
- The Public Contracts Regulations 2015 allow use of the negotiated procedure without prior publication (regulation 32) in specific circumstances. The circumstance that is relied upon in this case is:
 - 32(c): insofar as is strictly necessary where, for reasons of extreme urgency brought about by events unforeseeable by the contracting authority, the time limits for the open or restricted procedures or competitive procedures with negotiation cannot be complied with. The circumstances invoked to justify extreme urgency must not be attributable to the contracting authority.
- There is a risk of challenge from other providers capable of delivering the service.
- To help to mitigate this risk, the Council could publish a Voluntary Ex-Ante Transparency (VEAT) notice on the Find a Tender Service (FTS) website. There would then be a 10 day standstill period during which other providers could raise any concerns or challenge the decision. If no challenge is received, the contract would be awarded after the end of the standstill period and the Council would publish a Contract Award Notice on FTS.

4.3. Statutory, Legal and Risk Implications.

The report sets out the implications for this priority in 4.2. above and consequences of options in 2.6.

4.4. Equality and Diversity Implications.

There are no significant implications for this priority.

4.5. Engagement and Communications Implications.

There are no significant implications for this priority.

4.6. Localism and Local Member Involvement.

There are no significant implications for this priority.

4.7. Public Health Implications.

There are no significant implications for this priority.

4.8. Environment and Climate Change Implications on Priority Areas (See further guidance in Appendix 2):

4.8.1. Implication 1: Energy efficient, low carbon buildings.

Positive/neutral/negative Status:

Explanation: There are no significant implications within this category.

4.8.2. Implication 2: Low carbon transport.

Positive/neutral/negative Status: neutral

Explanation: This service by definition is to fund cars traveling across the county. There is an on-going project run by the local authority to run electric vehicles in the block provision of hours of homecare. The local authority is also undertaking activity to rationalise and review the runs in specific geographical areas to ensure the routes are the most efficient possible.

4.8.3. Implication 3: Green spaces, peatland, afforestation, habitats and land management.

Positive/neutral/negative Status:

Explanation: There are no significant implications within this category.

4.8.4. Implication 4: Waste Management and Tackling Plastic Pollution.

Positive/neutral/negative Status:

Explanation: There are no significant implications within this category.

4.8.5. Implication 5: Water use, availability and management:

Positive/neutral/negative Status:

Explanation: There are no significant implications within this category.

4.8.6. Implication 6: Air Pollution.

Positive/neutral/negative Status: neutral

Explanation: As stated in 4.8.2., this contract is for the implementation of cars to travel across the county in order to support people coming out of hospital. This will result in car emissions and air pollution. The longer-term homecare commissioning model will encourage local providers and local homecare staff to support people in a small geographical area or 'zone', reducing travel time and mileage, and consequently reducing emissions and air pollution.

4.8.7 Implication 7: Resilience of our services and infrastructure, and supporting vulnerable people to cope with climate change.

Positive/neutral/negative Status:

Explanation: There are no significant implications within this category.

Have the resource implications been cleared by Finance? Yes

Name of Financial Officer: Stephen Howarth

Have the procurement/contractual/ Council Contract Procedure Rules implications been cleared by the Head of Procurement? Yes

Name of Officer: Henry Swan

Has the impact on statutory, legal and risk implications been cleared by the Council's Monitoring Officer? Yes or No

Name of Legal Officer: Fiona McMillan

Have the equality and diversity implications been cleared by your Service Contact?

Yes

Name of Officer:

Have any engagement and communication implications been cleared by Communications?

Yes

Name of Officer:

Have any localism and Local Member involvement issues been cleared by your Service Contact? Yes

Name of Officer:

Have any Public Health implications been cleared by Public Health?

Yes

Name of Officer: Kate Parker

If a Key decision, have any Environment and Climate Change implications been cleared by the Climate Change Officer?

Yes

Name of Officer: Emily Bolton