# Procurement of care and support in Extra Care

To: Adults and Health Committee

Meeting Date: 17 March 2022

From: Executive Director, People & Communities

Electoral division(s): All

Key decision: Yes

Forward Plan ref: 2022/019

Outcome: To enable older people to continue to be supported to live

independently in extra care.

Recommendation: Adults and Health Committee is recommended to:

a) Approve the general procurement approach and the overall value of £11,750,000 (based on 2022/23 values) over 10 years;

- b) Tender the care and support in the following extra care schemes:
- (i) Bircham House, Sawston
- (ii) Dunstan Court, Cambridge
- (iii) Moorlands Court, Melbourn
- (iv) Poppyfields, Eynesbury, St Neots
- (v) Richard Newcombe Court, Cambridge
- (vi) Willowbank, Cambridge.

c) Delegate award of the contracts to Executive Director for People and Communities for decision.

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# 1. Background

- 1.1 Extra care housing schemes are specialist housing schemes for older people that have been specifically designed to maximise people's independence. All tenants have their own apartment with a front door and yet also benefit from the availability of the 24/7 on-site care and support service. The care and support service is flexible and tailored to individual's needs. The supportive environment in extra care enables older people to live independently for longer, without having to worry about repairs or other on-going maintenance issues. It is an important aspect of the prevention agenda as people's health and wellbeing is maintained thereby delaying and/or reducing the use of residential care. A case study is attached in Appendix A.
- 1.2 The allocations into extra care housing are managed with the aim of developing a balanced and stimulating community that supports and promotes independence. Schemes are generally well located with good access to local facilities. Applications are usually considered by a multi-agency panel which consists of a representative from the respective older people's locality team, the housing provider, a representative from the district council may be involved (but this varies from district to district) and the care provider will usually attend in an advisory capacity.
- 1.3 There are 18 extra care schemes in Cambridgeshire (see Appendix A, Table One) and the care and support services are delivered via contracts which are tendered by the county council. People living in extra care schemes can choose to make arrangements for their own care and would still be able to access the contracted care provider for emergency calls. Two of the schemes in this procurement are 'part sheltered/part extra care'. Although the flats will be identical in terms of their design, the sheltered flats would have been allocated to older people based on their housing need. Applications for the extra care flats would have been considered by allocations panel described in the previous paragraph, which would have included an up-to-date assessment of their care and support needs. Each person will also have a tenancy with the respective landlord. The contracts for these schemes are due to end in February/March 2023.
- 1.4 Extra care housing schemes are an important part of the overall provision for older people. The accommodation options range from sheltered housing schemes which are linked to an emergency alarm system through to nursing care homes for people who need regular medical care. Appendix B provides an explanation of the different types of provision.

# 2. Recommissioning of the services

- 2.1 The Council tenders for a flexible core and add-on contract. In all these schemes, the core contract is 203 hours per week (i.e. the guaranteed element) which provides 140 daytime hours and 63 hours waking night cover per week. This ensures that during peak daytime hours, more than one member of staff will be available to provide care and one person available overnight. Any additional hours above the daytime core of 140 hours are dependent upon the assessed care needs of the tenants and are invoiced separately.
- 2.2 In all six schemes, the number of hours above the core are determined by people's assessed care needs and can therefore vary from month to month. In all schemes there will be private self-funders (or people on direct payments) as well as people who purchase

additional staff time for activities which are not covered by their assessment such as cleaning and laundry.

The breakdown of the hours for November 2021 for each of the schemes are set out below:

Scheme	Weekly daytime core hours	Weekly hours above daytime core – Nov 21	Private hours	Total
Bircham House	140	0	56.25	196.25
Dunstan Court	140	122	63.25	325.25
Moorlands	140	162	270.25	572.25
Poppyfields	140	33.5	0	173.5
Richard	140	97.75	118.75	356.5
Newcombe				
Court				
Willowbank	140	21.75	10.5	172.25

Table One: Breakdown of care hours November 2021

- 2.3 It is proposed that contracts for care and support in the following six services Bircham House, Dunstan Court, Moorlands Court, Poppyfields, Richard Newcombe Court and Willowbank are tendered at the same time thereby reducing overall procurement costs. It is also proposed that the services should be re-tendered for 5 + 5 years with a standard 6 months' break clause.
- 2.4 Recruitment and retention of staff in the care sector is challenging and informal soft market testing has confirmed that longer term contracts would provide more certainty for care providers, enable more investment in training and provide the opportunity to build long term relationship with the housing provider. It will enable providers to plan for the longer term and invest in upskilling staff regarding technology enabled care innovations, supporting people living with dementia and linking with the wider community. The development of staff skills would also support the Council's direction of travel to enable people to continue to live in extra care for longer. Providers, however, were keen to ensure that a mechanism or formula was incorporated into the contract for price uplifts to ensure agreed rates acknowledge inflationary increases.

## 3. Bircham House

3.1 Bircham House located in Sawston in south Cambridgeshire and Sanctuary are the registered social landlord. The scheme has 30 self-contained flats, restaurant, communal lounges and gardens. The contract value for the core care and support service is £157,233 per annum. The current contract expires on 1 February 2023.

#### 4. Dunstan Court

4.1 Cambridge Housing Society (CHS) are the landlord and care provider of Dunstan Court. CHS is a social enterprise and charitable housing association that only operates within 35 miles of Cambridge. Dunstan Court in Cambridge has a total of 46 flats and of those, 29

flats are used for extra care and the remainder for sheltered housing. It is expected that the number of tenants requiring care will increase over time and therefore this balance will change. The annual contract value for the core care and support service is £200,505. The current contract expires on 31 March 2023.

4.2 In addition to providing care and support to people living in Dunstan Court, the current care provider also provides on-site support to people living at The Haven, which is opposite the extra care scheme. The Haven Mental Health Supported Accommodation previously provided supported housing for 8 people with mental health problems. However, by 2017 there had been no new referrals for two years, the building was not appropriate for the physical needs of the current tenants and there were a significant number of empty flats in the scheme. So, with the agreement of Adults Committee (4 July 2019), spot purchase arrangements were put in place for the remaining tenants. It is proposed to include the onsite support to tenants at The Haven in the specification for Dunstan Court as this arrangement appears to be working well and is more cost effective than the previous block arrangement. The additional costs for the on-site support are £29,981 per annum and will reduce or cease when the remaining residents move on from The Haven.

#### 5. Moorlands Court

Moorlands Court in Melbourn, south Cambridgeshire is owned by CHS and has 40 flats with a range of communal facilities. In addition, there is a day centre on site which operates four days a week for activities and social interaction. The contract value for the core care and support service is £199,402 per annum. The current contract expires on 31 March 2023.

## 6. Poppyfields

6.1 Poppyfields in Eynesbury, St Neots in Huntingdonshire is owned by Anchor and the scheme is located near a large supermarket and a GP surgery. The scheme consists of 34 flats and a range of communal facilities including restaurant, lounge, hair salon, hobbies room and library/faith room. The contract value for the core care and support service is £174,023 per annum and the contract is due to expire 1 February 2023.

## 7. Richard Newcombe Court

7.1 Richard Newcombe Court in Cambridge was built in 2011 to sustainable housing code Level 5. The sustainable systems include grey water recycling, a bio-mass boiler and photovoltaic cells to reduce communal electricity costs. CHS are the landlord and the scheme has 40 flats. The scheme has a range of communal facilities including a pavilion room which opens out onto the landscaped courtyard garden. Annual contract value £207,761. The current contract expires 1 February 2023.

#### 8. Willowbank

8.1 Willowbank in Cambridge owned by Anchor has 34 flats and is part sheltered, part extra care. The scheme has communal lounge, library, games room, laundry room, guest room, three assisted bathrooms, a lift and communal gardens. Contract value £154,930. The current contract is due to expire 1 February 2023.

## 9.0 The Procurement

- 9.1 In-house provision for the care service would cost considerably more, mainly due to organisational overheads and would not represent value for money. It is therefore proposed that the schemes should be re-tendered as six separate lots. Service users will be involved in formulating and evaluating a method statement which will form part of the quality criteria. Bidders' social value offer will be evaluated and use of the Social Value Portal will be explored to implement the Themes, Outcomes and Measures (TOMs) approach to do this.
- 9.2 A project plan has been produced and the key milestones are set out below:

Evaluation and Moderation
 P&C Joint Commissioning Board
 Decision to Award / standstill period
 End of September 2022
 End of October 2022
 Middle of November 2022

Implementation and Mobilisation
 Mid November – Feb/March 2023

Contract Go Live (inc. letters to service users)
 February/March 2023

9.3 The most significant risk in the procurement will be to devise a clause or formula for future increases in the contract price which enables providers to meet increased wage costs and other direct costs which they cannot control. The inflationary uplift process will be incorporated into the annual business planning process, thereby ensuring the services are financially sustainable for the Council and appropriate governance is in place. In addition, the Council intends to raise the awareness of extra care and its benefits in enabling people to live independently. This will generate more interest in the schemes and ensure that that the care contracts are used more effectively and potentially reduce the need for residential care.

## 10. Future direction of travel

10.1 Aside from publicising extra care more effectively, the Council intends to work with care providers and landlords to encourage the schemes to become part of the local community rather than being seen as a separate communal facility. Many schemes have facilities which can be used by people living locally and encouraging their use will help to ensure they become vibrant communities, which will further enhance their popularity. The Council is keen to ensure that a range of provision is available, including tenancy-based models, such as extra care and independent living suites.

# 11. Alignment with corporate priorities

- 11.1 Communities at the heart of everything we do
  The report above sets out the implications for this priority in 10.1.
- 11.2 A good quality of life for everyone

  Extra care offers greater choice, control, and care flexibility for those older people and is a real alternative to residential care homes.
- 11.3 Helping our children learn, develop and live life to the full

There are no significant implications for this priority.

- 11.4 Cambridgeshire: a well-connected, safe, clean, green environment There are no significant implications for this priority.
- 11.5 Protecting and caring for those who need us

  The report above sets out the implications for this priority in 1.1.

## 12. Significant Implications

#### 12.1 Resource Implications

There are likely to be resource implications as there have been significant increases in staffing and associated on-costs in the care market. However, usually there are a healthy number of responses to extra care tenders which ensures they are secured at a competitive rate. Work is underway to incorporate a formula or mechanism for price reviews over the course of the contract.

- 12.2 Procurement/Contractual/Council Contract Procedure Rules Implications
  Work is underway with Procurement to apply Contract and Procurement Rules and Public
  Contract regulations.
- 12.3 Statutory, Legal and Risk Implications
  There are no significant implications within this category.
- 12.4 Equality and Diversity Implications
  There are no significant implications within this category.
- 12.5 Engagement and Communications Implications
  There are no significant implications within this category.
- 12.6 Localism and Local Member Involvement
  There are no significant implications within this category.
- 12.7 Public Health Implications

There is an evidence base that suggests that extra care housing improves health and wellbeing outcomes for older people.

- 12.8 Environment and Climate Change Implications on Priority Areas
- 12.8.1 Implication 1: Energy efficient, low carbon buildings.

Status: Neutral Explanation:

12.8.2 Implication 2: Low carbon transport.

Status: Neutral Explanation:

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

Status: Neutral Explanation:

12.8.4 Implication 4: Waste Management and Tackling Plastic Pollution.

Status: Neutral Explanation:

12.8.5 Implication 5: Water use, availability and management:

Status: Neutral Explanation:

12.8.6 Implication 6: Air Pollution.

Status: Neutral Explanation:

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

Status: Neutral Explanation:

Have the resource implications been cleared by Finance? Yes

Name of Financial Officer: Justine Hartley

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

Name of Officer: Clare Ellis

Has the impact on statutory, legal and risk implications been cleared by the Council's

Monitoring Officer or LGSS Law? Yes Name of Legal Officer: Fiona McMillan

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

Yes

Name of Officer: Will Patten

Have any engagement and communication implications been cleared by Communications?

Yes

Name of Officer: Eleanor Bell

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

Contact? Yes

Name of Officer: Will Patten

Have any Public Health implications been cleared by Public Health?

Yes

Name of Officer: Emily R Smith

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

Yes

Name of Officer: Emily Bolton

- 5. Source documents guidance
- 5.1 None

I am unable to recall much about living in the Nursing home, except a few things - the carers were really nice, they got me my meals and drinks and I spent most of the time in the communal area. Having just a room for your precious things was restrictive, although it was nice living there it never felt like a real home to me.

Things changed when I moved into Moorlands Court Extra care scheme in 2017. My flat is really spacious I have all of my things around me, I have space to move around and having my possessions with me is important to me. I am a lot more independent now, I have adaptations in my flat meaning that I can be as independent as possible, I manage my own medication, able to make myself small snacks and get drinks whenever I like, I love it. I go to the restaurant at lunch times and enjoy the delicious food served. I enjoy interacting with the other tenants and will join in if there are any activities. I have made some new friends here and also enjoy spending time in the garden whenever the weather is fine.

I have my sister to thank for living here, she found Moorlands and I am ever so grateful for this. It is good to be back in the village where I used to live; this means that I am closer to my family and friends and see them regularly, when they visit there is plenty of space in my flat to sit and its nice and private too.

The care team visit me throughout the day to care for me in the way that suits me, they have assisted me to remain independent and show me respect in my home - the carers are lovely - I love them. When my needs have change, I am involved throughout the process. I feel in control of my life and free to do what I want when I choose.

Yes, I love living here.

Table One: Extra Care schemes in Cambridgeshire

District	No. of schemes	Overall number of flats	
Cambridge City	4	126	Ditchburn Place; Dunstan Court++;
			Richard Newcombe Court,
			Willowbank++
East Cambs	3	149	Baird Lodge, Ely; Millbrook House,
			Soham; Ness Court, Burwell
Fenland	4	184	Doddington Court, Doddington; Jubilee
			Court, March; Somers Court, Wisbech;
			Willow Court, Whittlesey
Huntingdonshire	3	123	Eden Place, St Ives; Park View,
_			Huntingdon; Poppyfields, St Neots
South Cambs	4	175	Bircham House, Sawston; Mill View,
			Hauxton; Moorlands, Melbourn;
			Nichols Court, Linton

<sup>++</sup> Dunstan Court and Willowbank in Cambridge City also have 17 and 13 sheltered flats respectively.

**Own Home** 

Sheltered Housing

**Extra Care Housing** 

Independent living service

Residential Care

**Nursing Care** 



People remain independent within their own property with limited or no support.

Typically, several self contained, independent homes –flats and sometimes bungalows-each with their own front door. A lower age limit of 55 or 60 is common.

The individual units are typically linked to an emergency alarm service and include design features to make life easier for elderly people. There is usually an on site warden, and communal facilities such as a lounge and laundry. Rental and privately owned sheltered housing is available, although not always on the same site

These units offer an older person self-contained accommodation with their own front door, but also provide a significantly higher level of support than sheltered accommodation. The service element is often integral to the extra care product. There are additional facilities (for example, in terms of bathroom design) for the less mobile.

Communal facilities tend to include social and practical facilities, such as lounges and laundries. A meals service is usually on offer. It aims torovide greater independent living.

ILS is a 24hr care & support service focuson enabling and maintaining independence for older people.

The level of support can increase as the person's level of care need increases. Round the clock care is availablencluding nursing care.

Tenants need never to move homesagain.

Typically, residential homes offers personal care and ensures tenants basic personal needs such as meals, medication are met.

Residential homes essentially provide a home for people who struggle to live independently and need additional support but aren't (yet) in need of nursing care.

Nursing Care is like residential care, but with trained nurses on duty. A nursing home is considered for one's condition bathing, going to the toilet and that needs regular medical care and attention. Often this would be a clinical decision made by the multidisciplinar team.

> People may have lived in residential care or even in the community for a period before going to a nursing home due to a deterioration in their condition and the district nurse support do not have the capacity or ability to take care of the person's health needs.

