CARE HOME DEVELOPMENT

То:	Adults Committee		
Meeting Date:	18 th October 2018		
From:	Executive Director, People & Communities.		
Electoral division(s):	All		
Forward Plan ref:	2018/034	Key decision:	Yes
Purpose:	respite and interin	n bed capacity, an ning strategy to a	ntracts for short term, nd provide an update address the current Cambridgeshire
Recommendation:	term, respite 2. Approve cu addressing beds within 3. Approve the	extension of 12 r e and interim con rrent commissior the remaining sh Cambridgeshire	ning approaches to ortfall of care home f care suites into

	Officer contact:		Member contacts:
Name:	Michelle Foster	Names:	Cllr Bailey/Cllr Howell
Post:	Commissioner	Post:	Chair/Vice-Chair
Email:	Michelle.foster@cambridgeshire.gov.uk;	Email:	annabailey@hotmail.co.uk;
			mark.howell@cambridgeshire.gov.
			uk;
Tel:	01223 706317	Tel:	01223 706398

1.	BACKGROUND			
1.1	The Council commenced a review of care home provision in Cambridgeshire from November 2017 with the aim of increasing the capacity of affordable, sustainable high quality care home provision across the county. Through this review, a current shortfall of 150 quality, affordable beds which could be directly commissioned by the Council was identified.			
1.2	Since November 2017.	commissionina	have sought to address	the shortfall identified
	through:	5		
	 Extending the current block contract by 39 beds which has addressed the shortfall of Residential Dementia Care Home Beds within the Cambridge City area for the remainder of the contract. Development of a medium term approach to tender an additional block contract for long term beds within East Cambridgeshire, Huntingdonshire and South 			
	2019.	. This will aim to	target the ongoing shor	tfall of 111 beds by May
	 Making significant progress with the competitive dialogue process aimed at procuring a strategic partner to design, build and run a number of Care Homes on Council owned land under a lease arrangement. This programme will target both the current and future shortfall of beds as well as introducing a number of high quality beds to the self-funder market through an ongoing build programme. The contract is currently due to be awarded to a strategic partner in May 2019, with an initial build site being identified as part of the procurement process. 			
1.3	Whilet this has taken p	laca a raviaw of	the volume and approac	to commissioning Caro
1.5	 Whilst this has taken place a review of the volume and approach to commissioning Care Home provision has been undertaken. This review has considered how the Council currently commissions and uses both: Long Term Care Home provision which is purchased on a block and spot basis for individuals who require a permanent placement in order to meet their outcomes under the Care Act. This is commissioned via a 3 plus 2 year block contract which, with the extension period, will expire in August 2021. Short Term Care Home provision which is purchased on a block and spot basis for individuals who require temporary, more intensive support for period of time or to provide short term respite. These have been commissioned under historical contractual arrangements which are due to expire and therefore require review and recommissioning. An overview of current arrangements has been included in the table below: 			
	Type of Provision	Total Volume	Total Annual Spend (2017/18)	Key Challenges
	Long Term Block Beds	369 Beds	£9,838,839	Shortfall of 111 Beds
	Long Term Spot Beds	774 placements	£32,680,787	Rising cost of spot placements
	Total		£42,519,626	

	Type of Provision	Total Volume	Total Annual Spend (2017/18)	Key Challenges
	Short Term/ Respite Block Beds	14 beds	£409,739	
	Short Term/Respite Spot Beds	295 placements	£291,665	Contracts are due to expire and the rising costs of spot
	Interim Block Beds	19 beds	£697,406	placements
	Interim Spot Beds	120 placements	£34,771	
	Total		£1,433,581	
1.4	 1.4 Key findings have identified a number of challenges which Adults Commissioning is seeking to address: The need to re-dress the balance of block and spot commissioning: At present, 65% of long term care home provision is spot purchased, with remaining provision being commissioned via a block contract arrangement. Block contract arrangements offer the provides a more stable income for a longer period of time which translates into more affordable rates for the Council, with better control of rising costs over the term of the contract. As spot purchased beds do not offer the provider this level of certainty and are often used at times of capacity pressures and escalation they are, on average, more expensive and over time provide the council with less control over cost. The rising cost associated with spot purchasing beds which cannot be delivered through our current block arrangement either due to capacity or individual requirements is placing pressure on existing budgets. Short Term, Respite and Interim Contracts: The Council currently commissions 33 short term beds under historical contractual arrangements which are due to expire. An extension to existing arrangements is required to enable provision to reviewed and recommissioned. The need to incorporate and consider new models of commissioning and care: The review of existing care home provision and approaches being produced to manage the market are taking place within a fluid environment, into which new concepts and models are continually being trialled, tested and introduced. Care Suites is an example of a new model which has been implemented within the Sussex area. Care Suites is an model of 24 hour residential care which continues to deliver outcomes for residents requiring this level of support, but offers the Council a more sustainable model of funding. However, this model does impact on the level of welfare and housing support currently claimed from District Councils and their 			commissioning: At present, d, with remaining provision Block contract arrangements iod of time which translates ntrol of rising costs over the er the provider this level of res and escalation they are, council with less control over eds which cannot be delivered bacity or individual ncil currently commissions 33 its which are due to expire. able provision to reviewed of commissioning and care: ches being produced to onment, into which new ed and introduced. Care inplemented within the Sussex which continues to deliver at offers the Council a more impact on the level of
2.	Recommended appro	ach and cost ii	mplications	
2.1	Taking of all of the abo	ve into account,	please see three recom	mendations outlined below:
2.2	 Recommendation 1: Approval for two extensions for short term, interim and respite block contracts is requested to recommission provision and meets need over the next 12 months: 19 interim beds with an annual value of £685,510 (mainly nursing provision) 			

	 14 respite beds with an annual value of £409,739 (mainly residential provision) Total extension annual value (12 months): £1,095,249
2.3	 Recommendation 2: Adults Committee are asked to approve the commissioning approach to addressing the current shortfall in capacity and redressing the balance of block and spot contracts through: Tendering an additional block contract for long term beds which aims to address the current shortfall of beds within East Cambridgeshire, Huntingdonshire and South Cambridgeshire. This approach will aim to use a 'light touch' procurement approach to enable additional capacity to be accessed by May 2019. Continued progression of the competitive dialogue procurement process which will enable the Council to work with a strategic partners to design, build and run a number of care homes in order to address the current and future shortfall of long term beds. This will aim to produce additional capacity by 2021.
2.4	Recommendation 3: Approval to work in partnership with District Councils to incorporate the use of 'care suites' into commissioning arrangements wherever it is appropriate to do so. This will include engaging with existing providers to convert current provision into care suites where appropriate to do so and in consultation with residents.
3.	ALIGNMENT WITH CORPORATE PRIORITIES
•-	
3.1	Developing the local economy for the benefit of all
	There are no significant implications for this priority.
3.2	Helping people live healthy and independent lives
	 The following bullet points address this priority: Respite enables informal carers to have a break and thus support them in their role of caring and making this role sustainable for as long as possible. Interim beds facilitate discharge from the acute hospital enabling individuals to reach their potential before returning home.
3.3	Supporting and protecting vulnerable people
	 The following bullet points address this priority: Respite and interim/short term bed provision supports individuals who have identified care and support needs under the Care Act 2014.
4.	SIGNIFICANT IMPLICATIONS
4.1	Resource Implications
	The report above sets out details of significant implications in <i>Paragraph 2.1 above.</i>
	The report above sets out details of significant implications in Faragraph 2.1 above.
4.2	Procurement/Contractual/Council Contract Procedure Rules Implications
	The following bullet points set out details of significant implications identified by officers:

	
	 The report above details the request for two extensions under existing arrangements The extensions were discussed at Commercial Board on 06-09-2018 where it was reported that the evidence of the basis of the original contract award arrangements was not known
4.3	Statutory, Legal and Risk Implications
	 The following bullet points set out details of significant implications identified by officers: The existing short term, interim and respite bed provision does not appear to have followed the expected contract and procurement rules so the County Council could be at risk of challenge. It is felt to be a low risk as the market was approached in 2016 under the block bed contract procurement and had the opportunity to offer block bed provision at this time. The existing block bed providers were also approached in December 2017 under Work Stream one of the care home development project to offer additional block bed capacity.
4.4	Equality and Diversity Implications
	There are no significant implications identified by officers
4.5	Engagement and Communications Implications
	There are no significant implications identified by officers
4.6	Localism and Local Member Involvement
	There are no significant implications identified by officers
4.7	Public Health Implications
	There are no significant implications identified by officers

Implications	Officer Clearance
Llove the recourse implications here	
Have the resource implications been	Yes or No
cleared by Finance?	Name of Financial Officer: Stephen Howarth
Have the procurement/contractual/	Yes
Council Contract Procedure Rules	Name of Officer: Paul White
implications been cleared by the LGSS	
Head of Procurement?	
Has the impact on statutory, legal and	Yes
risk implications been cleared by LGSS	Name of Legal Officer: Allis Karim
Law?	

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: Matthew Hall
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: Tess Campbell

SOURCE DOCUMENTS GUIDANCE

It is a <u>legal</u> requirement for the following box to be completed by the report author.

Source Documents	Location
None	None
	•