

Extra Care Contract Extensions

To: Adults and Health Committee

Meeting Date: 12th December 2024

From: Executive Director Adults, Health and Commissioning

Electoral division(s): Cambridge City, East Cambridgeshire and Huntingdon

Key decision: Yes

Forward Plan ref: KD2024/006

Executive Summary: This paper provides an overview of how the County Council are investing resources to deliver essential care and support to those in Extra Care Housing. It seeks support for the continuation of this work through delivering an extension to 5 existing Extra Care contracts.

Recommendation: Committee are being asked to:

- a) approve a 2-year contract extension from 1st April 2025 at a value of £1,662,354 (£831,177 per annum) for Ditchburn Place, which will be adjusted for any future inflationary uplifts and awarded at the Council's discretion. This includes formal contract variation to reflect the need to harmonise Terms and Conditions for TUPE staff.
- b) approve a 3-year contract extension from 1st April 2025 at a value of £3,578,556 (£1,192,852p per annum) for Baird Lodge, Eden Place, Millbrook House and Ness Court (Baird Lodge et al), which will be adjusted for any future inflationary uplifts and awarded at the Council's discretion.
- c) delegate the authority to award the subsequent extension periods and contract variations on both contracts to the Executive Director Adults, Health and Commissioning in consultation with the Chair and Vice Chair of the Adults & Health Committee.

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1. Creating a greener, fairer and more caring Cambridgeshire

1.1 The continued delivery of these services supports the following Cambridgeshire County Council ambitions:

1.1.1 **Health inequalities are reduced.** Extra Care schemes offer equitable access to care and support services. The support service commissioned by the Council is provided for those with an assessed care need and predominantly accessed by older age adults across Cambridgeshire. The services allow for the Cambridgeshire population to receive care and support in a more enabling environment than other traditional models of care, i.e. residential care homes. Extra Care schemes aim to achieve a balanced community of tenants and reduces health inequalities for those who are at risk of social isolation by creating a community that is able to support them.

1.1.2 **People enjoy healthy, safe, and independent lives through timely support that is most suited to their needs.** Extra Care schemes ensure that tenants are able to live safely and independently in services that can flex to meet their care and support needs as and when is appropriate. This ambition is central to the ethos of Extra Care and to ensuring the best possible outcomes for tenants.

1.1.3 **People and communities prosper because they have a resilient and inclusive economy, access to good quality public services and social justice is prioritised.** Extra Care schemes provide a community for those who may become isolated in their homes. Most schemes are well located and have access to local amenities allowing for tenants to remain active parts of their communities. Schemes also employ local people and therefore contribute to an inclusive economy.

2. Background

2.1 Extra care housing schemes are specialist housing schemes for older people that have been specifically designed to maximise independence for tenants. All tenants have their own apartment with a front door and also benefit from the availability of the onsite care and support service. The supportive environment in extra care enables older people to live independently for longer. It is an important aspect of the prevention agenda as people's health and wellbeing are maintained thereby delaying or preventing the use of residential care.

2.2 The model of Extra Care Housing offers tenants self-contained accommodation with their own front door but also provides a significantly higher level of support than other options available for older adults such as sheltered accommodation. This is an integral feature of the Extra Care model and there are additional facilities (for example, larger bathrooms to accommodate any necessary equipment) for the less mobile. Communal areas tend to include social and practical facilities such as lounges and laundries and a meal service is usually on offer. Extra Care aims to provide greater independent living whilst also being capable of providing care and support. The kind of care and support delivered in Extra Care services is a step down from those seen in residential and nursing care.

2.3 The extra care model aligns with the Council's market shaping approach which seeks to ensure a vibrant and sustainable provider market which is able to deliver appropriate accommodation options with care and support. The strategic importance of Extra Care in meeting the accommodation and support needs of older people is also reflected within the Older People Demand Profiles.¹ The demand profiles highlight a clear need for the continued need for Extra Care Housing as an option for Cambridgeshire's ageing population, the graph below outlines the projected additional supply of Extra Care Housing required between 2021 – 2026 to meet this demand. Extra Care Housing presents as an attractive option for those looking to enter into a flexible model of home ownership as a number of schemes in the County offer leasehold properties as well as tenancy. To meet this demand. To meet our current project demand, we would need to double the number of extra places currently available within the County.

2.4 The Council's market shaping approach acknowledges the need to significantly increase access to Extra Care so that people can be supported at an earlier stage in their care journey and have a higher likelihood of being independent for longer, supporting Cambridgeshire's prevention agenda. Plans to increase access to Extra Care are in development and Commissioners are working, as part of the Adults Social Care Accommodation Board to develop a pipeline and will explore a number of options and approaches to increasing capacity within this area. The care and support provided in Extra Care Housing prevents or delays the need for further intervention e.g. residential or nursing homes.

2.5 **The Cambridgeshire Extra Care market**

Cambridgeshire currently has 18 Extra Care Services as detailed in Table A. The extension request being issued today covers the delivery of 240 extra care units representing just under 32% of capacity available across the County. All services are operated by an independent housing provider responsible for tenancy arrangements and any building related queries with a separate care provider delivering the 24/7 care and support.

¹ [Demand profiles forecast - Cambridgeshire County Council](#). Please note that this document is a shared CCC and PCC paper and therefore and action is required to review following the Council's decoupling.

District	No. of EC schemes	Unit numbers	Scheme
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)

Table A: Extra Care Schemes in Cambridgeshire

++: Dunstan Court and Willowbank in Cambridge City also have 17 and 13 sheltered housing flats respectively.

2.7 Outcomes

Case studies highlighting the positive impact of the care and support delivered at the schemes can be found at Appendix A. In addition to this, a new Extra Care monitoring form has also been developed to feedback on the outcomes delivered at each scheme. Part of the new monitoring form, to be provided to the Contract Management Team quarterly, is related to the outcomes delivered. This will provide a tangible data set to complement extra care case studies. The information gathered from these monitoring returns will help to highlight how extra care housing aligns with the council's strategic framework i.e. to reduce health inequalities.

- 2.8 To monitor performance, the Contract Management Team have maintained oversight of the current provider of services as part of the risk-based monitoring approach used across the market and there are currently no concerns about either the quality of performance of the contract outside of developments specifically referenced in the report.

3. Main Issues

- 3.1 The contract for Ditchburn Place was directly awarded for a period of 10 years (5+3+2). The initial contract period runs from 24th February 2020 to 23rd February 2025. The contract for Baird Lodge and the other schemes was awarded for a period of 10 years (5+1+1+1+1+1). The initial contract period runs from 1st April 2020 to 31st March 2025.
- 3.2 Both contracts were let prior to the use of the current wording pertaining to the delegated authority to extend being granted to the Executive Director of Adults, Health and Commissioning.

3.3 Somers Court

3.3.1 When the Baird Lodge et al contract was procured in 2019, Somers Court in Wisbech was also included in the tender.

3.3.2 In late August 2024, the landlord of Somers Court, Housing 21, informed Cambridgeshire County Council of their intention to close the service by the 31st March 2025. It had been the intention of Housing 21, who took over the scheme in 2023, to operate the service until a new larger, and updated scheme was developed by Fenland Futures Limited nearby to the current scheme. However, due to delays in the building of the new services, the increasing complexity of delivering a service with shared facilities and growing maintenance required on the building, Housing 21 have concluded that Somers Court can no longer operate in a safe and sustainable manner.

3.3.3 CCC colleagues are part of a small project group, together with Housing 21 and Fenland District Council to manage the decommissioning safely, sensitively and effectively. Local members have been briefed, and the project group is working on the required next steps to ensure all tenants are supported with securing alternative accommodation, with care and support where required. This process is currently ongoing but on completion a report detailing the outcome and impact of the approach will be issued to Adults and Health Spokes meeting. If any implications require a key decision to be taken they will be tabled on the agenda for a future committee meeting.

3.3.4 Somers Court held a total contract value of £408,898 per annum. This is not included in the budgetary figures outlined in Table C below as the service is not being included in the extension request.

3.4 Ditchburn Place

3.4.1 Care within Ditchburn Place extra care scheme was previously provided by Cambridge City Council. A competitive tender process was undertaken to award a new contract when the arrangement with Cambridge City ended, but no bids were received. This was predominantly due to financial risk associated with high levels of local authority staff transferred across to the new provider, and the fact that the service was supporting those people living here who had higher levels of care than an extra care scheme, would normally be expected to support.

3.4.2 As no bids were received, a request to directly award the contract to Radis was taken to Adults Committee as a confidential decision in April 2019 and approved. It was acknowledged that a higher level of block hours than needed was contracted for to ensure that additional costs around TUPE would be covered.

3.4.3 There was an expectation that during the initial 5 year contract term that the provider would look at harmonisation of staff terms and conditions and also consider how the service could be brought back into line with standard extra care services. However, this was not formalised and there has been very limited progress on this, mainly due to the fact the number of TUPE staff remains significant. To move this forward the Contract Management Team are working with the provider to address this through development of a clear plan to harmonise the staff terms and conditions and realign the care balance within the scheme which will be agreed by both the provider and Social Care teams. This will be formalised through delivery of a contract variation incorporating requirements to harmonise staff terms and conditions. Any further extension beyond April 2027 offer would be contingent on demonstrable progress in these areas.

3.5 Utilisation

3.5.1 Services across the county are well utilised and vacancies are generally filled quickly. For most schemes, including those we are seeking to extend in this paper, waiting lists are in operation. Utilisation of the contracts is regularly monitored and over the period of 07/0/2024 to 25/08/2024 the average weekly care hours were as follows:

- Baird, Millbrook, Ness and Eden Schemes = 453 hrs per week
- Ditchburn Place = 378 hrs per week

This means that whilst there are minimal vacancies, the care hours being delivered at Ditchburn Place are falling significantly below the allocated block of 600 support hours. This will be addressed through the harmonisation work summarised in paragraph 3.4.3.

3.5.2 Monitoring and market feedback suggests that our approach to commissioning extra care may no longer be the most cost effective or efficient way of ensuring appropriate delivery of care within these services. Currently all schemes have a block amount of hours and can claim for additional hours of care and support if required. However, this is proving to be a rigid approach that does not allow for flexibility when block hours are over or underutilised. To assist with this in the short-term contract terms & conditions will be amended to enable us to review the block hours annually and renegotiate based on actual usage across the year. Alongside this, alternative future delivery models will also be explored.

3.7 Extension request

3.7.1 This is the first request to extend the care and support contracts for all at the above schemes. During this extension periods, Commissioners will continue to work with Contracts colleagues to understand the utilisation of the block hours, which are regularly monitored. This will help to establish the viability of any future extensions or re-tendering of the services should any re-balancing of block hours be required. Please note, that whilst Somers Court is included in the current contract for Baird Lodge et al, as the service is due to close from March 2025, we are not requesting an extension to this element of the funding and the associated contract value outlined in paragraph 3.3.4 has been removed.

Table C below details the Extra Care schemes seeking contract extension.

Scheme	District	Care Provider	Annual Contract Value	Total extension value
Ditchburn Place	Cambridge	Radis	£831,177	£1,662,354 (2 years) £3,578,556 (3 years)
Baird Lodge	East Cambs	Radis	£1,192,852	
Eden Place	East Cambs	Radis		
Millbrook House	East Cambs	Radis		
Ness Court	Hunts	Radis		

Table C – Annual contract value with proposed 24/25 uplift applied. This is based on current rates and would be adjusted if services are eligible for an uplift.

3.7.2 The block usage will continue to be regularly monitored by the Contract Management Team for all services. For Ditchburn Place the council will be seeking reductions in hours over the 2 year period as a result of harmonisation. For Baird Lodge et al, it has been agreed with procurement to seek a contract variation which alters the extension periods from a +1 year arrangement over 5 years to a 3+2 year arrangement. This is on the basis that the total duration and the financial value is the same.

4. Alternative Options Considered

4.1 The alternative options that were considered alongside this recommendation are outlined in the table below.

Baird, Millbrook, Ness & Eden		Ditchburn Place	
Option	Reasons this was not considered	Option	Reasons this was not considered
Do not extend the contracts	Contracts are utilised and providing positive outcomes for service users therefore there is no reason not to extend the contracts for a period of 2 years.	Terminate the current contract and re-tender	Original tender received no bids due to high financial risk as a result of the large number of local authority staff who would be transferring under TUPE. As the TUPE implications have not been addressed during the initial contract period, it is extremely likely that we would again be in a position where no bids are received due to financial risk posed by the TUPE transfer.
		Arbitrarily reduce block hours to reflect current care hours and extend for full 3 years	Reducing the hours to match care package hours would not take account of the additional TUPE costs which additional hours were put in place to offset. Reducing to this level would make the contract financially unviable for the Provider and therefore there would be a significant risk the contract could not continue.
		Set up as an 'in-house' service	The recent review of in-house service delivery undertaken by Red Quadrant has highlighted a need to address some recommendations around delivery of current in-house services before considering expansion of in-house delivery. The review also suggested that any future expansion should be targeted to meet specific market needs or gaps, rather

			than market areas with good coverage such as Extra Care.
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Table G – Options considered

5. Conclusion and reasons for recommendations

- 5.1 In commissioning these services the Council is supporting the commitments made within its ambitions and helping to deliver positive outcomes for older people and those with additional care and support needs.
- 5.2 By supporting individuals within these services, the Council is also helping to prevent people’s needs from escalating to a level where they would require emergency or higher need services e.g. residential or nursing homes.
- 5.3 Extending the contracts will allow the Council to continue to meet the needs of service users, and to review the current commissioning approach and consider other potential options for the future. This will be informed by any recognised best practice and through discussions with other local authorities who have already successfully implemented different approaches elsewhere.
- 5.4 Over the next 6 months, commissioners will: -
- Engaging with other local authorities about the way they commission extra care housing
 - Obtain views and thoughts from providers/landlords/service users on the current approach
 - Workshop and test out new approaches and models with stakeholders and partners.

6. Significant Implications

6.1 Finance Implications

The financial implications are the outlined in Section 3 of the report.

6.2 Legal Implications

The requested contract alteration for Baird Lodge et al is on the basis of the duration and the financial value of the extension periods remaining the same. Providers will have the opportunity to challenge this during the standstill period.

6.3 Risk Implications

If required outcomes are not delivered in relation to the Ditchburn Contract, then the County Council would need to review our position. Whilst this will not impact on the level of service people will receive, it will delay the financial efficiencies associated with realigning the terms and conditions.

6.4 Equality and Diversity Implications

The EQIA's remain the same from the original committee papers.

6.5 Climate Change and Environment Implications

N/A

7. Source documents

None

Appendix A – Case studies

Example One

We support a lady (B) who has lived at Eden Place for the last 8 years. She lives with Dementia, which has gradually been getting worse. She is now not visiting the dining room, forgetting to eat, does not attend activities and is spending a lot more time in bed. Family are concerned about B having to move out of Eden Place, and have made it clear that they want B to remain at Eden Place, even though B's condition is deteriorating.

To ensure that we are able to continue to support and meet B's needs, we have put additional monitoring in place including:

- Where staff have any spare time, they will carry out extra checks on B, where they will sit, talk and interact with B
- B loves music and singing, so where B is feeling up to it staff will take B to accessible activities such as singing, coffee mornings, or to watch the entertainers. When B is having a bad day staff will put music on in B's room
- Where the family have visited B and raised with staff that B is having a down day, we will ask the waking night staff to do some additional checks overnight to reassure the family and alleviate their anxiety
- In addition to attending activities staff will take B around the garden or to the dining room for a cup of tea in any spare time. This has resulted in B going to bed less as she is less socially isolated and more active
- Staff will prepare breakfast for B first, so they are able to encourage and monitor B's eating during their visit. This has resulted in B eating more
- We have records in place so staff record what B is eating and drinking
- Staff have completed training in addition to Care Certificate requirements, including Lewy Body and Dementia Awareness
- Consistent staff who know B well has meant that staff are able to understand B's body language and facial expressions, including if she is happy or not, so they are able to swiftly respond if required.

Example Two

Radis have supported K, an 97 year old lady, for just over 3 years after she moved in Ness Court following the Covid pandemic. K has lived in various settings over the years including sheltered accommodation and a care home. She has told staff that is fed up with moving, that she wants to settle at Ness Court and this is to be her final home.

K's health has recently declined. K has been deemed as having full capacity and has decided not to inform Radis staff, nor her son of her diagnosis/prognosis. We have noticed that she has stopped eating and drinking due to her inability to swallow, meaning that she is a high risk of choking. K's breathing has also changed and she has a constant pain in her chest.

Paramedics were called and had advised that K would need to be admitted in to hospital as she may need a PEG fitted. K refused to go into hospital as she felt that if she did get admitted that she would die there, which was not her wish and said that she would rather suffer.

Our Service Manager, Toma, has instead liaised with K's GP and local District Nurses to discuss the possibility of having a PEG fitted during day surgery to reduce the amount of time K spends at hospital and therefore, can recover at home as per her wish.

Specialist training is being sourced to continue to meet K's new nutritional needs and also to ensure K's pain medication can be administered to keep her comfortable. Staff have already completed End

of Life training so staff are able to provide appropriate support and care to K at Ness Court, if she continues to choose to die at her home.

Example three

Mr X moved into Ditchburn in 2023 following an accident he had while living abroad. This resulted in him suffering a head injury (Neurological trauma), and his mobility and continence being affected. Mr X also lived with Bi-polar disorder. Following the accident, his marriage also broke down, although he and his wife remained good friends.

Mr X moved back to England and lived with his sibling. His siblings were struggling to cope with Mr X's care needs and enquired about him coming to live at Ditchburn Place with this being close to them. Mr X came to visit and agreed to move in.

Mr X's goals were to be as independent as possible following his accident and to have a good quality of life. To support this staff would carry out welfare checks on Mr X, ensure he came to the dining room for his meals and prompt him to take his medication. This helped him to be engaged with staff and other residents as well as ensuring he did not self-neglect.

Mr X is at high risk of falls, so staff carried out a falls risk assessment, and ensured Mr X used his stick and provided gentle encouragement while mobile to help him to move independently. Staff also ensured support was available when Mr X needed extra support with his continence.

Staff also made Mr X aware of any activities/events that were on at the scheme, encouraging attendance to reduce his isolation. Mr X seemed to really enjoy these and became a regular participant and really enjoyed engaging with other people.

An email from his sister (25/9/24) stated *'I am happy to report that Mr X seems to be flourishing at Ditchburn, so thanks to all for looking after him so well.'*