

From: Graham Gibbens, Cabinet Member for Adult Social Care
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To: Adult Social Care Cabinet Committee –
9 March 2018

Subject: **COMMISSIONED SERVICES FOR ADULT CARERS OF VULNERABLE ADULTS – CONTRACT MONITORING**

Classification: Unrestricted

Past Pathway of Paper: None

Future Pathway of Paper: None

Electoral Division: All

Summary: This paper provides Cabinet Committee with an update on the commissioning and performance of the Kent Carers' Grants and Contracts.

Recommendations: The Adult Social Care Cabinet Committee is asked to **CONSIDER AND COMMENT** on the content of the report.

1. Introduction

- 1.1. This paper provides an update on the commissioning and performance management of the Commissioned Services for Adult Carers of Vulnerable Adults.
- 1.2. The Kent Carers' Contracts and Grants are jointly commissioned with the Seven Kent Clinical Commissioning Groups (CCG). The contracts awarded to the Voluntary and Community Sector (VCS) providers listed below were let to run from 1 April 2013 to 31 March 2018 and to cover the whole of Kent and the grant is historic.

Provider	Grant/ Contract	Contract/Grant Values 2017/18	Health Contribution 2017/18	Other Income
Crossroads	Grant	£1,767,800*	£194,300	£407,000
Crossroads	Contract	£1,385,300	£585,300	
Involve Kent	Contract	£596,300	£173,100	
Carers First	Contract	£1,275,100	£229,800	
East Kent Carers Consortium	Contract	£2,378,400	£849,700	

* This figure includes Volcare and Carers First

- 1.3 [KCC's Voluntary and Community Sector Policy \(Sept 2015\)](#) helpfully articulates the difficulties in monitoring the performance of grants and the need to shape the market differently as we move forward. The VCS policy recognised that “the absence of a standardised approach to grant funding...has created confusion across the sector and a perception that grants were not accessible to all” and that this “made it difficult for us to effectively monitor the impact of our funding”. The Planned Short Breaks Grant has been awarded for many years, has been consistently awarded to just one provider (Crossroads Care) and is in return for services provided (which is contradictory to the principle of grant funding endorsed by KCC and as laid out in Managing Public Money (HM Treasury 2013), as laid out at page 13 of [KCC's Voluntary and Community Sector Policy \(Sept 2015\)](#).
- 1.4 The paper Interim Contracts for the Provision of Carers Services is associated with this paper and will seek a decision to implement Interim Contracts for the Carers Spend highlighted for one year to 31 March 2019.

2. Definition of a Carer and Policy Framework

- 2.1 The Care Act 2015 defined that we have we have a duty to meet the unmet eligible needs of adults living in Kent and that a Carer “means an adult who provides or intends to provide care for another adult (needing care), but clarifies that this adult will not be considered a Carer is providing care under/by virtue of a contract, or as voluntary work.
- 2.2 Local Authorities have a number of statutory duties, established in legislation to ensure Carers are supported, these include:
- Assessing the needs of any adult (cared for or carer) with an appearance for care and support
 - Arranging services, where appropriate
 - Meeting the unmet eligible needs of adults living in Kent.
- 2.3 Although the Contracts/Grants were awarded prior to the publication of KCC’s Strategic Statement ***Increasing Opportunities, Improving Outcomes***, they remain strategically relevant, contributing to the following Strategic and Supporting Outcomes:

Strategic Outcome 2: Kent communities feel the benefits of economic growth by being in-work, healthy and enjoying a good quality of life

- Physical and mental health is improved by supporting people to take more responsibility for their own health and wellbeing
- All Kent’s communities benefit from economic growth and lower levels of deprivation
- Kent residents enjoy a good quality of life, and more people benefit from greater social, cultural and sporting opportunities.

Strategic Outcome 3: Older and vulnerable residents are safe and supported with choices to live independently

- Families and Carers of vulnerable and older people have access to the advice, information and support they need
- Older and vulnerable residents feel socially included
- The health and social care system works together to deliver high quality community services.

3. Commissioning Background

3.1 Prior to commissioning the services highlighted in the table at para 1.2, the Council commissioned a range of services through **37** grants. The commissioning exercise in 2013 outsourced Carers' Assessments in advance of the Care Act (2014), integrated Carers commissioning with Kent's seven CCGs, enabled some performance reporting and developed and shaped the market to ensure we had a platform for the future. The commissioning strategy in 2013 consisted of two elements (a) The Adult Carers' Assessment and Support Service; and (b) The Adult Carers' Short Breaks Service.

3.2 The Adult Carers' Assessment and Support Service was developed to promote Carers wellbeing in a flexible and person-centred way. The service consists of the following components:

- OUTCOME 1: Carers are proactively sought and identified
- OUTCOME 2: Carers are provided with appropriate up-to-date information, advice and guidance.
- OUTCOME 3: Carers receive Carers Assessments
- OUTCOME 4: Carers receive "Carers One off Payments" (COOP's)
- OUTCOME 5: Carers are engaged and supported to plan for the future
- OUTCOME 6: Carers feel empowered
- OUTCOME 7: Carers wellbeing is improved through the provision of emotional support
- OUTCOME 8: Increased engagement with other sectors
- OUTCOME 9: Improved support for Young Carers' transition to adulthood
- OUTCOME 10: Increased knowledge, skills and behaviours for Carers and professionals through training and development opportunities
- OUTCOME 11: Carers receive health prescribed support when appropriate via GP Rapid access and Hospital Discharge Services

3.3 The Adult Carers' Short Breaks Service is delivered to the cared for person for the benefit of the Carer by enabling them to have some respite from their caring role. The service consists of the following components:

- Crisis Short Breaks response through professional referral
- Self-Referral Health appointment service
- Carers' Planned Short Breaks

3.4 The Carers' Planned Short Breaks element of the service is funded partially through an historic grant and partly through a contract. The other service elements were funded through the contract, which was formally let through a commissioning and tendering exercise.

4. Financial Activity

4.1 KCC spend is predicted to be £3,061,200 on Carers Contracts and £1,573,500 for Carers Grants in 2017/18.

4.2 The 2017/18 Health and Social Care budget for the above Carers' Services was £5,635,100 for contracts and £1,767,800 for grants, with Health contributing approximately £2,032,200 and other income of £407,000.

4.3 Planned reductions in the Voluntary and Community Sector budget, presented to the Strategic Commissioning Board in November and December 2017, will lead to a reduction in the available budget for Carers' contracts of £360,000 (afforded by annual underspends (see above)) and a reduction of 1.84% on grant amounts.

4.4 It should be noted that the Carers' One-Off Payments, Health Prescribed support (GP Rapid access and Hospital Discharge Services) and Crisis Short Breaks are all demand led and therefore fluctuate annually. Significant activity will be undertaken to tighten up on activity and eligibility in 2018/19.

4.5 Commissioners will combine the grant and contract budgets for 2018/19, negotiate the necessary contractual changes in relation to this reduction in budget and ensure actions are put in place that mitigate impact and enable local teams to spot purchase in exceptional circumstances (if the spending limit of the Carers' Contracts is reached), see the '*Interim Contracts for the Provision of Carers' Services*' paper for more detail.

5. Performance Activity

5.1 Contract relationships have developed between commissioners and providers since 2013. Contract management transferred to a new commissioner in May 2017 to commence the review and analyse phase.

5.2 Commissioners have been able to access more information during the review than has previously been available including increasing the Carers intelligence on the Kent Integrated Dataset (KID) from 5000 – 20,000 unique identifiers.

5.3 The key findings of the review can be found at Appendix 1 and have influenced the design of the Key Performance Indicator (KPI) and Specification requirements included within the proposed Interim Contracts (see associated report). This will support KCC on its journey to further shape the market. The new KPIs have been included in a balanced scorecard approach to enable a rounded approach to the future contract management of Carers contracts.

- 5.4 Increasing the uptake of statutory Carers' Assessment is an on-going challenge, with only 23.1% of people opting to progress to a statutory Carers' Assessment, with many opting instead to be supported with a 'lighter touch' provider assessment and outcome star process. Some of the qualitative analysis gathered through in depth research and Carer workshops has been that the current KCC assessment documentation is a significant barrier.
- 5.5 A more in-depth review of the interim contract will be undertaken alongside Adult Social Care's consideration of different assessment models such as the 'three conversation model' (carers' assessment work in Essex) and the Outcomes star (adopted as the statutory tool by Lincolnshire).

6. Recommendations

6.1 Recommendations: The Adult Social Care Cabinet Committee is asked to CONSIDER and COMMENT on the content of this report.
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7. Background Documents

None

8. Lead Officers

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