

Briefing Paper

Carers FIRST in Kent & Medway

Context

Carers FIRST have existed since 1991, firstly as a project in Tonbridge VCS and then a registered charity. It became a company limited by guarantee in 1996.

In 2009 Carers FIRST became the parent company of Medway Carers Centre and those two organisations formally merged into one charity entitled Carers FIRST in Kent & Medway in April 2012. It is now a medium sized charity with a annual turnover of £2 million per annum and a staff team of 83. It is the largest Carers Centre in the United Kingdom.

Carers FIRST in Kent & Medway delivers a range of services to carers of all ages and all cared for specific conditions in South West Kent, Dartford, Gravesham, Swanley (DGS) and Medway.

Carers First in Kent & Medway also delivers in partnership with Voluntary Action within Kent (VAWK) the young carers service for the whole of Kent and the care navigator service in five of the six districts of West Kent.

Commissioning Carers Services in Kent

The transformation agenda for adult social care in Kent is a wide ranging programme that seeks to change fundamentally how we deliver adult social care services in the county. The focus is on early intervention and prevention thereby reducing expensive costs in residential care and hospital admissions resulting from crisis.

One of the four main themes of the transformation agenda is supporting carers to continue their role. It has been estimated that carer breakdown is responsible for over 30% of residential care and hospital admissions. Consequently, KCC have invested heavily in carer services, both universal support services and crisis support such as respite and advice and guidance.

In April 2012 KCC and their health partners in the clinical commissioning groups of Kent commissioned universal carer support services for the whole county, split into six localities. Carers FIRST in Kent & Medway were successful in winning the tender for two of those localities, South West Kent and DGS.

Strategic context for Carers FIRST in Kent & Medway and our experience of Kent Commissioning

For the seven carers centres (ten including Crossroads) this contract letting represented a big opportunity and a huge threat. Failure to win the contract and not be a 'carer's centre' in Kent would have been a significant blow to the ability to continue to function as a charity. For some, that has unfortunately proved to be the case.

This contract was tendered with quality as the overwhelming criteria for award. When examining our strategic approach to the tender we quickly came to some fundamental conclusions.

Firstly, we had to build a service and model of delivery that would be able to bring many more carers into the system. This required fundamental changes to how we worked to increase the capacity of the organisation and put more money into front line service delivery at the expense of back office costs. We did this through adopting a remote (community) working model.

Secondly, it needed a overhaul of our performance management practices to 'professionalise' what we did and link performance of individuals within the charity to outcomes and outputs for our client base, the carers of Kent.

Thirdly, we had to devise systems that would show good, academically robust evidence that what we did was producing outcomes (mostly positive) for carers.

Fourthly, we had to produce a system that allowed us to show commissioners how we could break down individual interventions into unit cost and again link it to outcomes.

All of this was designed with one aim in mind, to give us the Ability to compete successfully in a commissioning market place with other voluntary sector providers and the private sector. To do so we adopted and imitated commercial sector practices and a business sector approach to how we designed and delivered our services. Using good quality marketing and advertisement techniques taken from the professional private sector, good analysis of cost versus outcome, increased productivity, investment in good equipment and technology, investment in a unique selling point (USP) for carers services, namely a life coaching model (we currently have 20 accredited life coaches who provide a different model of carer support based on empowerment of the carer in their role) and professional, properly costed tender management and procurement.

I now turn to your summary paper to make comment from Carers FIRST in Kent & Medway perspective.

KCC Strategic Context

In your summary paper for members it states "the small to medium sized Kent and Medway third sector organisations are at risk from themselves (a reluctance or inability to adapt to the new commission based environment) from their more commercially minded peers and from commercial competitors with the resources and capacity to secure public service contracts-who appear a more reliable option for procurement staff.

Kent based research shows that frontline organisations are ill equipped to play a prominent role in the delivery of public services without significant intervention".

I agree with the description of the problem for third sector organisations, I fundamentally disagree with the solution. We are in a period of an unprecedented squeeze on public sector budgets, not least in the area of Local Authority spending. Therefore organisations like KCC must provide cost effective solutions to how they deliver more for less and maintain services in a time of diminishing resources. To do that both KCC and the organisations who deliver on their behalf must find new, innovative ways of achieving these aspirations.

This is about changing systems to put more resource into delivery instead of management, it is about being more commercially aware and using the techniques of the private and

commercial sector, it is about being consumer led rather than producer led and it is about being professional and efficient in order to put yourself in a position to compete equally rather than complaining the private sector have in built advantages.

Of course, what commissioners and KCC must do is make sure that the commissioning process is a level playing field and the conclusion to the KCC select committee summary paper is absolutely correct. However, third sector organisations also have responsibilities. If they do want to compete in a highly competitive market place for public sector contracts, they must make changes themselves so that the product they are offering to commissioners is one that meets the service specification, one that provides quality, one that is cost effective and one that does provide social value and outcomes to the tax payers of Kent.

Pete Turner
Chief Executive Officer
Carers FIRST in Kent & Medway

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1. Working Connections

Bring commissioners, procurement staff and frontline organisations closer together. Commit to and resource a single, independent point of access to the sector, which actively reduces the distance between strategic partners and frontline service delivery in order to drive joint-working and mutual support.

2. Impact-based Strategic Framework

Develop an authority-wide impact framework, against which deliverers can measure core impacts and value-adding impact. This establishes impact overlaps, complementary social value and a more cohesive and client-focussed delivery of services.

3. Impact-based Commissioning vs Output-based Procurement

A system where experts are told how best to deliver a service by non-experts seems a nonsense and is the product of a lack of quality co-design. The solution – invest in talking directly to us, not via “infrastructure” partners and move away from the misconception that a single voice can represent the diverse and complex sector. This communication does not always need to be face-to-face – modern technology simplifies mass two-way communication and is a cost-effective alternative.

4. Consortium Leaders

Consortium formation and leadership is being mystified within the sector and because of this viable consortia are not being formed; leaving smaller deliverers to be sub-contracted by larger third sector organisations and public service companies, such as Serco, G4S, Avanta, Interserve etc, who provide a practical opportunity for joining a consortium, ie. being sub-contracted by them. The evidence of the London work programme demonstrates that this model of consortium engagement puts small, vulnerable frontline organisations at increased risk of closure due to: crippling cashflow, prime contractor creaming off the low-hanging fruit and frontline organisations being sub-contracted to only work with the hard-to-reach/challenging/vulnerable.

5. Sector Governance

At a time when strategic minds are needed to steer organisations through the challenges of a commission-based landscape a large number of trustees and board members lack basic commercial sensibilities and drive to make a positive impact. Board development and new trustee recruitment are imperatives. Boards are also highly risk averse and place internal limits on the abilities of organisations to undertake more commercial activities.

6. Business Development Capacity

The majority of the sector does not have access to dedicated business development resource. Building capacity in this area is time-consuming, tender submission is time-consuming and daunting. Many smaller organisations are not able to commit the resource to this as meeting the needs of their clients is always their priority.

7. Intra-Sector Networking & Peer Network Development

Insufficient resource allocated to developing the sector's internal linkages. Infrastructure organisations are putting too little time into sector-led consortium development. Maybe because many of the infrastructure organisations are also frontline deliverers and don't want to foster competition from their peers.

8. Commission-Specific Capacity Development

In 2012 Suffolk County Council invested £150,000 in supporting its third sector public service deliverers to develop their bid-writing, tender preparation and business development capacity; to increase their chances of securing public service contracts and to equip them with the resources to survive if they failed to secure public service contracts.

9. The Match Funding Myth

Third sector organisations do not automatically have access to funds to supplement the value of under-monetised public service contracts. This dangerous myth (allied to the perception that there are armies of capable volunteers willing to give up significant amounts of time and expertise) must be quashed.

10. Market Intelligence & Ongoing Consultation

A recent online survey asked the simple question, "Does your organisation feel connected to its strategic partners?" Over 70% responded with a "No". A small number of well-organised sector engagement events throughout the year, supplemented by more frequent online consultation activities will provide valuable insight into community-level intelligence.

11. Social Value built into contracts?

Ensure that public service companies winning contracts collaborate with frontline third sector organisations by including auditable social impact results in each contract.

12. Ethical Leadership

Some smaller organisations will only get involved in the commissioning agenda if they are led into it by a lead organisation they trust and who manages consortia ethically, without competing for delivery, drives up the quality of service delivery, ameliorates financial risk and seeks to build capacity.

In simple terms, commissioning has created a highly competitive marketplace, which a large number of frontline organisations are ill-equipped to break into. As a result KCC is failing to commission or procure from expert, well-established frontline delivery organisations. The simple solution is to create a commissioning process which targets social value and to invest in dedicated infrastructure services which inform, inspire and lead frontline organisations to more-effectively engage with the commissioning agenda.