

**From:** Graham Gibbens, Cabinet Member for Adult Social Care  
Andrew Ireland, Corporate Director of Social Care, Health and Wellbeing

**To:** Adult Social Care Cabinet Committee – 20 July 2017

**Decision Number:** 17/00062

**Subject:** **OLDER PEOPLE AND PEOPLE LIVING WITH DEMENTIA WELLBEING CORE OFFER**

**Classification:** Unrestricted

**Past Pathway of Paper:** Adult Social Care Portfolio Board – 26 April and 28 June 2017  
Strategic Commissioning Board – 18 May and 5 July 2017  
Commissioning Advisory Board – 14 July 2017

**Future Pathway of Paper:** Cabinet Member decision

**Electoral Division:** All

**Summary:** This paper sets out the proposals regarding the commissioning of a new community wellbeing service for Older People and People living with Dementia. It is proposed that current funding arrangements end and the new services are commissioned through an outcome focused contract. The new contract will improve outcomes for people whilst making best use of resources. It will also help shape the voluntary and community sector services ensuring organisations are brought together as a delivery network(s) and can consistently evidence the impact they are having in improving people's lives.

**Recommendation:** The Adult Social Care Cabinet Committee is asked to:

- a) **COMMENT** on the consultation;
- b) **NOTE** the further opportunity for committee members to comment on the recommendations once this report is published; and
- c) **AGREE** the Cabinet Member will take the Executive Decision at the end of August 2017 and this is reported as a "for information" item at the Adult Social Care Cabinet Committee meeting on 29 September 2017.

## 1. Introduction

- 1.1 This paper sets out proposals regarding the commissioning of a core offer of community based wellbeing services for Older People and People living with Dementia and is intended to provide members of the Adult Social Care Cabinet Committee with an opportunity to engage in the consultation process.

- 1.2 Services are currently funded through a range of historic annual grants to voluntary and community sector organisations.
- 1.3 Commissioners have identified the opportunity to improve outcomes for people, and support better demand management in order to reduce spend in other areas of adult social care through the more effective use of these community based services.
- 1.4 Following an extensive period of engagement and co-production with providers of services (current and new), Older People, People living with Dementia and their carers, this report sets out a proposal to end the current annual funding arrangements and commission wellbeing services through a new outcome focused contract.
- 1.5 Public consultation on the proposal started on 12 June 2017 and is due to close on 23 July 2017.

## **2. Financial Implications**

- 2.1 The Older Person and Physical Disability (OPPD) Division currently invests a total of £5,131,459 in grants for Older People and People living with Dementia (£4,328,215 for Older People and £803,244 for People living with Dementia).
- 2.2 This allocation of funding is historic and is distributed through a range of different grants which have been used to fund a range of different services across the county. There is a lack of equity of funding which does not reflect what is known about the profile of communities or the demand for support.
- 2.3 Under this proposal, funding will be re-allocated across geographic lots using a funding formula which takes into account the number of Older People and People living with Dementia, levels of deprivation as well as other economic factors related to delivering services. This means that, in comparison to current spend, funding in some areas will decrease while in others it will increase. This will lead to greater equity in spend for wellbeing services across the county.
- 2.4 It is proposed that funding be allocated within geographic lots and the budget will be split in order to:
  - Fund strategic Partner/s to manage the contract, provider infrastructure and support their Delivery Network
  - Fund the Delivery Network for the achievement of the required outcomes within the contract
  - Fund a separate pot to incentivise the achievement of specified outcomes and/or reward exceptional performance
  - Allocate a further amount to grant funding of new innovative projects to help further develop services.

### **3. Policy Framework**

3.1 The Care Act (2014) emphasises that “The core purpose of adult care and support is to help people to achieve the outcomes that matter to them in their life”. It places a duty on local authorities to:

- Promote wellbeing
- Prevent, reduce or delay needs
- Provide information and advice
- Shape the market

3.2 Increasing Opportunities, Improving Outcomes: Kent County Council’s Strategic Statement 2015-2020, Strategic Outcome of “Older and vulnerable residents being safe and supported with choices to live independently.”

3.3 Your life your well-being is the Council’s Strategy for Adult Social Care (2016-2021) and sets out the vision “To help people to improve or maintain their wellbeing and to live as independently as possible.”

3.4 Kent County Council’s Voluntary and Community Sector policy describes the Council’s relationship with the voluntary sector, including detailing a consistent approach to grant funding across the organisation. This includes specific guidance that “grant funding is not used for the delivery of services that should be provided under contract.” The OPPD division has been directed to end historic grant funding arrangements in order to comply with this policy.

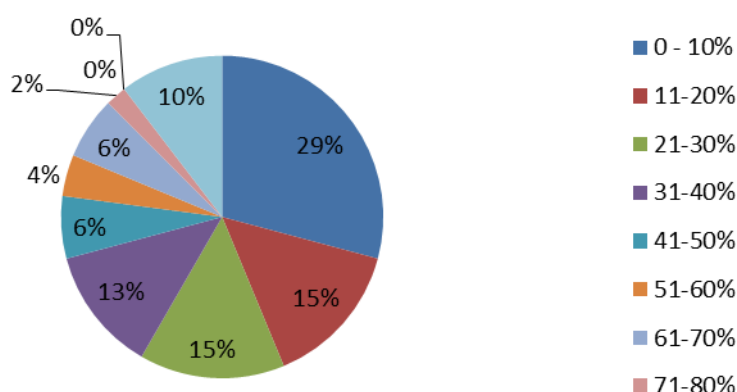
### **4. The Report**

4.1 The OPPD division currently invests £5,131,459 in grants for Older People and People living with Dementia.

4.2 This funding is currently distributed across 48 voluntary and community sector organisations who deliver a range of services to Older People and/or People living with Dementia. Funding is historic and some organisations have received funding for in excess of ten years via rolling grants.

4.3 Organisations receiving grants vary in size and the grants that they receive contribute towards their overall income to different degrees.

## Percentage of total income that KCC grant represents



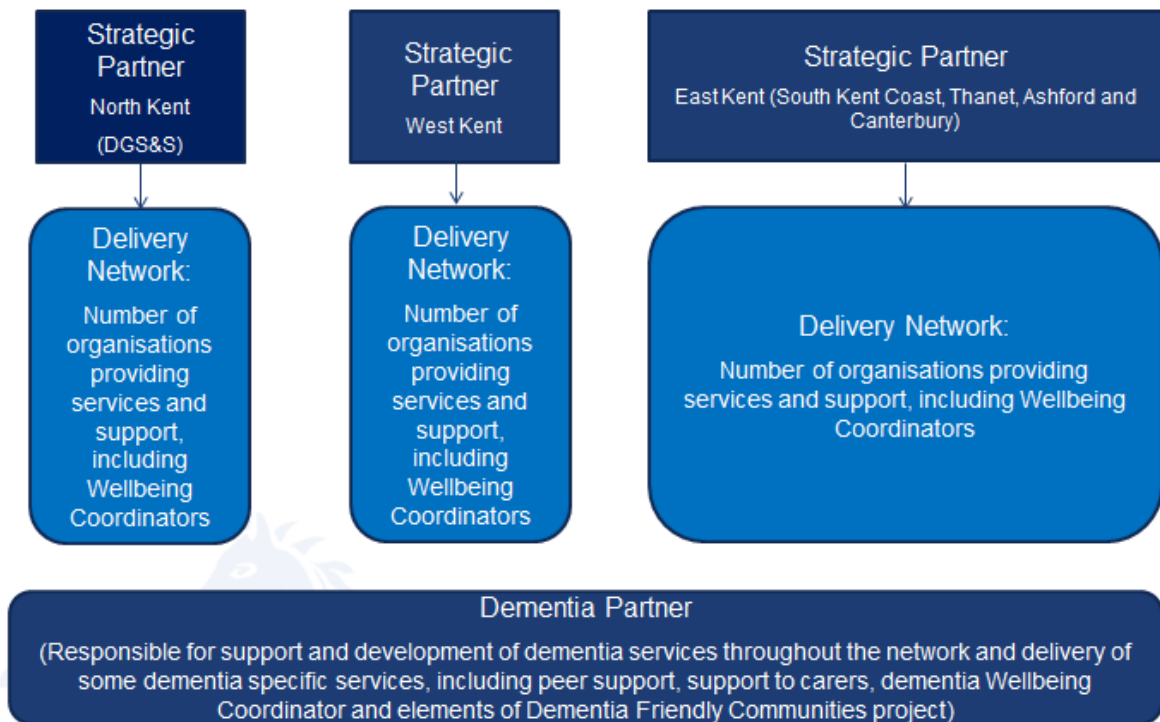
4.4 Services currently provided using this funding include: day services, care navigators, befriending, voluntary transport schemes, dementia cafes and peer support groups and bathing services.

4.5 Commissioners have worked with the market, Older People and People with Dementia as well as colleagues from health and understand that more people could benefit from these services, but that there are some issues which prevent this. These include the following:

- Services are not consistently networked together which means that people might need to approach a number of different organisations before finding the support that is right for them.
- It is difficult for health and social care professionals to refer people to the voluntary sector for support as they are required to have a broad knowledge and understanding of what is available at a local level.
- The grants are historic arrangements that were set up on a district basis. Spend is not linked to demography, levels of need, type of need or demand. This has created gaps in the market.
- Grants, unlike contracts, do not enable the Council to monitor and ensure that the outcomes of grants are met or that the investment delivers value for money.
- The grants are awarded annually, which means that organisations find it difficult to plan or invest in developing services with funding provided on an annual basis.

4.6 Extensive engagement has helped commissioners identify the outcomes that matter most for people which the new service must meet and how this service should be commissioned.

- 4.7 To date, there have been thirteen engagement workshops which have been attended by over a hundred people representing both current and potential providers. Providers have been asked to comment and feedback on a range of issues including;
- outcomes of the proposed contract
  - options for future funding of services
  - different contracting models
- 4.8 Commissioners have also spoken to over two hundred Older People, People living with dementia and their carers to understand what is important to them.
- 4.9 Based on this feedback, it has been clear that people want a range of community based services which support their independence. Therefore the outcomes of the contract will focus on connecting people to their communities and using community based assets to support people, rather than purely a service driven model.
- 4.10 It is important however to recognise that a portion of people with higher levels of need may require and prefer traditional models of care and there will need to be a place for these within the new contract.
- 4.11 The engagement process has also recognised the role of the Care Navigator in enabling people to maximise benefits and identify services, resources and activities that meet their needs. Following a design process the Care Navigator role has been expanded to include the development of community based assets as well as supporting people to access the services and support that will help them continue to live independently. The new name for this role will be Wellbeing Coordinators and this will be a specified service within the contract, recognising the value of this role in enabling people to find the right support for themselves in their community.
- 4.12 Following on from this engagement, the final proposal is to have a contract which is let across three geographic areas and comprises of three lots. This is illustrated below:



- 4.13 In this model, a Strategic Partner will hold a contract with the Council and be responsible for the delivery of the outcomes and services identified within the service specification. They will sub-contract, grant fund or spot purchase from a range of organisations within the Delivery Network in order to deliver services. Contracts will be awarded following a competitive process and providers can apply for, and potentially be awarded up to, all three lots.
- 4.14 The proposal to have three geographic lots has been informed by discussions with Clinical Commissioning Groups (CCG) and reflects the future alignment of Accountable Care Organisations. This has resulted in combining Ashford and Canterbury with South Kent Coast and Thanet areas. However, market engagement is being undertaken to ensure that there are organisations within the market that are able to undertake the Strategic Partner role across an area of this size.
- 4.15 The Delivery Network will consist of a range of organisations that will be funded to deliver services and support to individuals. Organisations will participate in a tendering process which will enable the Council to ensure that any provider delivering direct services to individuals' meet a set quality standard and ensure that there is a fair and transparent process for how the Strategic Partner recruits its Delivery Network. This is a key feature in ensuring that small and medium sized organisations have a place within the contract.
- 4.16 Feedback from the market highlighted that people living with Dementia (including younger people with Dementia) often require specialist support. Recognising this, the proposal is that there will a separate lot for the more specialist Dementia services across the county. In addition to providing some services, this partner will advise other providers within the network on how to

ensure that their services are 'Dementia Friendly' and develop best practice across the network for people with Dementia.

## **5. Equality Implications**

- 5.1 An Equality Impact Assessment has been completed in relation to the proposal to end current grants and re-commission community based wellbeing services through a new contract. This identified a potential high adverse impact on older people due to the ending of current funding, but a potential high positive impact from the re-design of services and the longer term investment in providers that the contract would bring.

## **6. Legal Implications**

- 6.1 TUPE may apply and legal advice will be sought as appropriate

## **7. Next Steps**

- 7.1 The outcomes and procurement model for the proposed contract are currently out for public consultation and this is due to close on 23 July 2017.
- 7.2 Due to two purdah periods happening in close proximity, consultation was unavoidably delayed. As the Adult Social Care Cabinet Committee has fallen during the consultation period, this paper is intended to provide members of the Adult Social Care Cabinet Committee with an opportunity to engage in the consultation process.
- 7.3 In order to allow sufficient time for full and due consideration of the findings of the consultation process it is proposed that the Cabinet Member take an Executive Decision at the end of August and the outcome of this will be reported to the September meeting of the Adult Social Care Cabinet Committee.
- 7.4 So as to ensure an appropriate amount of time to mobilise the new contract, whilst ensuring continuity of services, it is proposed that grants will be awarded, to the existing organisations receiving KCC funding, for a three month period from 1 April 2018 to 30 June 2018 with the new contract coming into effect on 1 July 2018.

## **8. Conclusions**

- 8.1 The OPPD division currently invests a total of £5,131,459 in grants for Older People and People living with Dementia.
- 8.2 Whilst services delivered with this funding provide valuable support to Older People, People living with Dementia and their carers, there are barriers which prevent more people benefitting from these services.
- 8.3 It is proposed that current funding arrangements are ended and that community based wellbeing services for Older People and People living with Dementia are commissioned through a new outcome focused contract.

- 8.4 The new contract will be delivered by Strategic Partner/s working with and through a Delivery Network and alongside a Specialist Dementia Partner.
- 8.5 As a result, more people will be able to access support which enables them to have **“a life, not a service”**, promoting wellbeing, increasing resilience and improving outcomes.
- 8.6 Services will focus on connecting people to the services and support that best meets their needs, connecting people to their communities and developing community based resources.
- 8.7 The new contract will result in longer term funding enabling organisations to invest in developing and modernising services, as well as being able to successfully retain a skilled workforce, including volunteers.
- 8.8 This proposal places at its heart the principle of wellbeing which is detailed in the Care Act (2014) and Your life your well-being, a vision and strategy for adult social care.

## 9. Recommendation(s)

9.1 Recommendation: The Adult Social Care Cabinet Committee is asked to:

- a) **COMMENT** on the consultation;
- b) **NOTE** the further opportunity for committee members to comment on the recommendations once this report is published; and
- c). **AGREE** the Cabinet Member will take the Executive Decision at the end of August 2017 and this is reported as a “for information” item at the Adult Social Care Cabinet Committee meeting on 29 September 2017.

## 10. Background Documents

Older Persons and People Living with Dementia Wellbeing Core Offer consultation

<http://consultations.kent.gov.uk/consult.ti/OPCoreOffer/consultationHome>

## 11. Report Author

Samantha Sheppard  
Commissioning Manager  
03000 415488  
[Samantha.Sheppard@kent.gov.uk](mailto:Samantha.Sheppard@kent.gov.uk)

**Relevant Director**  
Anne Tidmarsh  
Director Older People and Physical Disability  
03000 415521  
[Anne.Tidmarsh@kent.gov.uk](mailto:Anne.Tidmarsh@kent.gov.uk)