From: Penny Southern, Corporate Director of Adult

Social Care and Health

To: Graham Gibbens, Cabinet Member for Adult

Social Care

Decision No: 18/00030

Subject: CARE IN THE HOME SERVICE

Classification: Unrestricted

Past Pathway of Paper: Strategic Commissioning Board – 23 February

and 8 June 2018

Adult Social Care and Health Directorate

Management Team Meeting – 6 June 2018

Adult Social Care Cabinet Committee - 4 July

2018

Future Pathway of Paper: Cabinet Member decision

Electoral Division: All

Summary: Kent County Council commissions a range of services that are designed to provide care and support for people in order that they can safely reside in their own homes or in supported living accommodation. The scope of these services includes: Home Care Services; Extra Care Support (background hours and care and support); Discharge to Assess Services; Supporting Independence Services (SIS) and Supported Living Services

The Care Act 2014, requires Local Authorities to 'promote wellbeing', rather than simply prescribe the type of service a person should receive. Whilst it is acknowledged that there are examples of good practice across the whole provision, there are also areas for improvement, to overcome duplication and to foster greater collaborative working within the provider market, as well as health and social care. This has provided an opportunity to rethink what the Local Authority and the public need from Care in the Home Services and, with approval, commission a new integrated model.

Recommendation(s): The Cabinet Member for Adult Social Care is asked to:

- a) **PROCURE** a new integrated Care in the Home Service for adults and children with assessed needs, to commence from April 2019; and
- b) **DELEGATE** authority to the Corporate Director of Adult Social Care and Health, or other nominated officer to, to undertake the necessary actions to implement the decision.

1. Introduction

- 1.1 There is a mixed provision of services across Kent for older and vulnerable residents with assessed needs, delivered in the home or in the community. These services are often fragmented and predominantly contracted to external providers, through either formal contracts or spot purchasing arrangements. The scope of these services includes:
 - Home Care Services
 - Extra Care Support (background hours and care and support)
 - Discharge to Assess Services
 - Supporting Independence Services (SIS)
 - Supported Living Services
- 1.2 The services in scope all deliver similar tasks within a person's home. There is a significant opportunity to improve both the consistency and quality of provision across the whole market by bringing these services together through a personcentred outcome focused care model.
- 1.3 Aligning services under one contractual arrangement will enable the Council to take a consistent and equitable approach in shaping the market to focus on the personalisation and outcomes agendas. This is to ensure people's needs are met in the most optimal way and support the Council's strategic outcome that 'older and vulnerable residents are safe and supported with choices to live independently'.
- 1.4 The Care Act 2014 signified a shift from pre-existing duties on Local Authorities to provide particular services, to the concept of 'meeting needs'. This is the core legal entitlement, establishing one clear and consistent set of duties and power for all people who are assessed as needing care and support.
- 1.5 Whenever a Local Authority carries out any care and support functions relating to an individual it must act to promote wellbeing. It should consider all aspects in looking at how to meet a person's unmet needs and support them to achieve their desired outcomes.
- 1.6 The concept of meeting needs recognises that everyone's needs are different and personal to them. Local Authorities must consider how to meet each person's specific needs rather than simply considering what service they will fit into.
- 1.7 There is also a duty to work more collaboratively with health partners. There is overlap between the tasks delivered by Care in the Home Service through the Local Authority and Continuing Health Care support and ancillary nursing services funded by the NHS.
- 1.8 Commissioning a new Care in the Home Service offers an opportunity to consider what the public need, as well as reduce duplication and realise efficiencies through partnership working.

2. Strategic Statement and Policy Framework

- 2.1 The proposed decision for an integrated Care in the Home Service links with the following KCC Strategic Outcomes:
 - Outcome 1 Children and young people in Kent get the best start in life
 - Outcome 2 Kent communities feel the benefits of economic growth by being in work, healthy and enjoying a good quality of life
 - Outcome 3 Older and vulnerable residents are safe and supported with choices to live independently
- 2.2 The Care in the Home Service will support the above strategic outcomes by:
 - Supporting those with long term conditions to manage their conditions through access to good quality care and support
 - Enabling more people to receive quality care at home avoiding unnecessary admissions to hospital and care homes
 - Enabling the health and social care system to work together to deliver high quality community services
 - Improving physical and mental health by supporting people to take more responsibility for their own health and wellbeing
 - Keeping vulnerable families out of crisis and more children and young people out of KCC care
 - Supporting Children and young people to have better physical and mental health
 - Support Kent businesses through the development of longer term contracts offering greater stability and better workforce opportunities.
- 2.3 By supporting older and vulnerable residents in Kent with assessed needs, to remain living independently in their own homes, KCC aims to:
 - Tackle disadvantage
 - Reduce avoidable demand on health and social care services
 - Focus on improving lives by ensuring that every penny spent in Kent is delivering better outcomes for Kent's residents, communities and businesses
 - Enable adults in Kent to lead independent lives, safely in their own community
- 2.4 The service will meet the statutory requirements set out in the Care Act 2014 and Children Act 1989 preventing escalation of need to further statutory provision.
- 2.5 Across the county, there are a range of different providers in terms of their size, financial health and their capacity and capability. The new contract will seek to address this variation and enable a more stable market, who will be incentivised to accept all packages of care.

2.6 The new contract will, through evaluation and monitoring, seek to address the significant variation in staff training, development, pay, benefits and other relevant factors leading to better quality care. In taking this into consideration, the new contract will underpin and support the need for continuity in care through the recruitment and retention of a suitable and stable workforce.

3. Options Considered

- 3.1 Option 1 Do nothing allow the current commissioned services to terminate, when contracts come to an end by June 2019. The main risks of this approach are:
 - The Authority will fail in its duty under the Care Act 2014 in carrying out a care and support function;
 - Older and vulnerable residents with assessed needs will be left unsupported, leading to potential safeguarding concerns;
 - Judicial Review of the lawfulness of the Authority's decision
 - Reputational damage to the Local Authority
- 3.2 Option 2 Extend existing services i.e. continue to fund existing contracted and spot purchasing arrangements:
 - Duplication of services
 - Inconsistency of market delivery and pricing
 - Missed opportunity for cross-referencing of good practice and learning
 - Missed opportunity to work collaboratively with Health
 - May not be able to cope with future demand on services, without intervention to address a need for increased capacity
 - Does not comply with Public Contract Regulations 2015
- 3.3 Option 3 Commission services separately:
 - Duplication of services
 - Fragmented provision
 - Missed opportunity to work collaboratively with Health
 - May not be able to cope with future demand on service
 - Provision specific to particular client groups needs
- 3.4 Option 4 Procure a new integrated Care in the Home Service
 - This will reduce duplication of service provision across the county
 - This will increase consistency of service provision across the county, supporting improved quality of care
 - One contractual arrangement will improve performance reporting, contributing towards an improved service offering
 - This will enable alignment of the Adult Social Care and Health Transformation programmes, in relation to service provision and local care
 - More joined up care in local areas, enabling improved continuity of care and improved workforce conditions
 - Better enables the development of an integrated person-centred outcomebased approach to care and support.

3.5 Option 4 is the preferred option as the development of an integrated Care in the Home Service will support a greater level of consistency, purchasing rigour and transparency in practice, leading to a better client experience. It will also develop a clearer pathway with less handoffs between services and a subsequent reduction in assessment costs and the need for clients to repeat their story. This will enable a consistent and equitable approach in shaping the market to focus on the personalisation and outcomes agendas so that older and vulnerable residents are safe and supported with choices to live independently.

4. Financial Implications

4.1 The planned contract arrangements for the Care in the Home Service is anticipated to run for four years, with an option to extend. The annual value is between £100m and £140m per annum, this variance is due to testing of the transfer of additional responsibilities, such as case holding. The outline business case to be published in late July to appraise these options so that the actual annual value can be finalised prior to contract solution.

5. Legal Implications

- 5.1 The main legislative framework for the Care in The Home Service is the Care Act 2014 (for adults), the Children Act 1989 (for under 18s), and the principles of Mental Capacity Act 2005. These are statutory duties, and the new service will be compliant with both legislation.
- 5.2 Transfer of Undertakings (Protection of Employment) Regulations 2006 as amended by the Collective Redundancies and Transfer of Undertakings (Protection of Employment) (Amendment) Regulations 2014 (TUPE) is likely to apply, and the Council will ensure in the event of a change of employer, that it will undertake necessary arrangements, within its remit, to provide for the protection of employees' rights.

6. Equality Implications

6.1 An Equality Impact Assessment (EQIA) has been completed and will be updated as the work to deliver the new contracts is progressed. The EQIA is attached as Appendix 1.

7. Conclusions

- 7.1 Kent County Council commissions a range of services that are designed to provide care and support for people in order that they can safely reside in their own homes or in supported living accommodation. They will be assessed as eligible and having unmet need(s) in accordance with the Care Act 2014, for adults, and those under 18years, the Children Act 1989.
- 7.2 Each service is currently let to a number of agencies (or 'providers') through a contract arrangement. Contracts are arranged in several ways depending on the type of service provided.

- 7.3 Whilst it is acknowledged that there are examples of good practice across the whole provision, there are also areas for improvement, to overcome duplication and to foster greater collaborative working within the provider market, as well as health and social care.
- 7.4 Aligning services under one contractual arrangement will enable the Council to take a consistent and equitable approach in shaping the market to focus on the personalisation and outcomes agendas. This will support the Council's strategic outcome that 'older and vulnerable residents are safe and supported with choices to live independently'.
- 7.5 All care and support contracts have been aligned to expire at around the same time in May 2019. This is an ideal opportunity to bring together similar services, with improved outcomes for recipients of care and support, and a more efficient and collaborative approach to providing care in the home and community.

8. Recommendation(s)

- 8.1 Recommendation(s): The Cabinet Member for Adult Social Care is asked to:
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- b) **DELEGATE** authority to the Corporate Director of Adult Social Care and Health, or other nominated officer to, to undertake the necessary actions to implement the decision.

9. Background Documents

None

10. Contact details

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