

From: Richard Smith, Corporate Director Adult Social Care and Health

To: Clair Bell, Cabinet Member for Adult Social Care and Public Health

Subject: **Community Support Services for Children, Young People and Adults with Sensory Needs**

Decision Number 23/00045

Classification: Unrestricted

Past Pathway of report: Adult Social Care Cabinet Committee – 17 May 2023

Future Pathway of report: Cabinet Member decision

Electoral Division: All

Summary: This report outlines the current situation in relation to the provision support services available for people with sensory needs, the proposed commissioning and contract model going forward and the timetable for implementing these recommendations.

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

- a). **COMMENCE** formal procurement activity to establish a Framework of providers to deliver Community Support Services for Children, Young People and Adults with Sensory Needs, for a maximum period of four years; and
- b). **DELEGATE** authority to the Director Adult Social Care and Health to award contracts and take relevant action, including, but not limited to, finalising the contractual terms, entering into a contract and other legal agreements, as necessary to implement the decision.

1. Introduction

1.1 This report uses the term Sensory Needs to cover three types of sensory impairment:

- 1) People who are sight impaired
- 2) People who are deaf, deafened or hard of hearing
- 3) People who have a combined sight and hearing impairment or who are deafblind (dual sensory loss)

1.2 In Kent, as with the rest of the country, the number of people (children and adults) predicted to have serious impairments for all three types of sensory needs is predicted to rise in the future (Source: Kent Public Health Observatory, 2017).

- 1.3 This report details the current situation with regards to purchasing support services for children, young people and adults with sensory needs, the options considered for how these services are provided in the future and the recommended option for commissioning going forward.

2. Background

- 2.1 Currently, within both the Strengthening Independence Service (previously the Disabled Children and Young Peoples Service (DCYPS)) and Adult Social Care and Health (ASCH) one-to-one ongoing assistance for the people we support with sensory needs is spot purchased via Individual ('Indi') contracts when this is arranged by the council. This means that there are no clearly defined contract terms or specifications used to ensure consistent outcomes for the people supported. Additionally, there is also no due diligence of providers undertaken ensuring a sufficient Safeguarding Policy, Health and Safety Policy, adequate insurance cover or financial robustness.
- 3.2 The aim of this project is to commission services that support people with sensory needs to live as safely and independently as possible by providing them with the assistance required as identified within their Care and Support Plan and in line with the Adult Social Care Strategy, Making a Difference Every day. The need for 'specialist' support to be commissioned is to ensure that peoples' individual communication needs are met by the support worker helping the person. It reflects the level of communication skills training required for support workers, for example in British Sign Language (BSL) or Sign Supported English (SSE) used by a person who is D/deaf, or block alphabet or hands-on communication used by a person who is deafblind. As well as technical communication skills, support workers have knowledge and understanding of the impact that communication barriers experienced by people with sensory impairments can have on a person, including the isolating nature of diminished access to services and communities and the emotional difficulties that can be caused by reduced social activity, including loneliness and lower levels of self-esteem and confidence.
- 3.3 All support will be person-centred and based on identified needs in a person's Care and Support Plan, but typically the type of support provided assists adults with maintaining and improving their independence by supporting people with activities such as managing finances, shopping, using public transport to attend appointments and social activities.
- 3.4 The market is an extremely restricted one due the very specialist nature of the training required for support workers in the preferred methods of communication for the people they are supporting and the low volume of demand.
- 3.5 The number of adults currently being supported via this type of service is small, with the Adult Social Care Client Information System (MOSAIC) showing that 40 people with sensory needs were being supported with

maintaining their independence through 'Indi' contracts in June 2022. The estimated spend on these services during 2022-23 was £229,000.00.

- 3.6 The service use and related spend in DCYPS was much smaller, at £30,000, mainly due to a higher take up of Direct Payments for children's services. Consequently, this commissioning project is being led by the Adults Commissioning team, working with Children's Commissioning to ensure that the service specification is fit for purpose across the lifespan pathway.
- 3.7 To inform the evaluation of the commissioning options for this service, engagement has been undertaken with other local authorities to ascertain best practice and potential service providers to understand the capacity and capability of the market.

4. Options Considered

- 4.1 Alternative options, as detailed in Appendix 1, have been considered, including:
- Doing nothing, continue to spot purchase the service.
 - Providing a service in-house.
 - Varying an already existing contract.
- 4.2 In summary, the proposal to procure these services externally will allow the authority to take advantage of the highly trained and specialist staff employed by provider organisations to ensure a consistently high quality service for the people we support.

5. Commissioning Timetable

- 5.1 Co-production of the principles of the service with people who have lived experience of sensory impairments is underway.
- 5.2 It is recommended that contractual agreements are put in place with providers via a Framework for a maximum period of four years.
- 5.3 To put these recommended options in place the following commissioning timetable is proposed:

Activity	Dates
Development of service specification and tender documents	1 March 2023 to 31 May 2023
ASC Cabinet Committee	17 May 2023
Tender period	5 June 2023 to 31 August 2023
Award governance	1 September 2023 to 5 November 2023
Award notifications	1 December 2023
Service mobilisation	1 January 2024 – 31 January 2024
Service commencement	1 February 2024

- 5.4 To support the involvement of people in their care and to promote choice and control as far as possible, providers that tender to join the Framework will also be added to an 'approved provider list'. This list will allow people to purchase

their own support should they wish to use a personal budget, at the same cost as when support is purchased on someone's behalf by the Council.

6. Financial Implications

6.1 Using the identified spend on this service in 2022/23, the estimated budget requirements for spend over the proposed contractual period are:

- **ASCH** services: £229,000.00 per annum/ £916,000.00 over 4 years, funded by individually commissioned care and support budgets within the ASCH Operations revenue budget.
- **CYPE** Services: £30,000.00 per annum/ £120,000.00 over 4 years.
- **TOTAL**: £259,000.00 per annum/ £1,036,000.00 over 4 years.

6.2 The Framework will not commit the council to a minimum level of spend over the contract period.

6.3 Although savings against the current hourly rates paid by the council are unlikely to be achieved in the future, formal contractual arrangements will enable better forecasting and service demand projections as well as better value for money as service quality requirements are formally agreed.

7. Legal implications

7.1 Legal advice will be sought should it be required.

8. Equalities implications

8.1 An Equality Impact Assessment (EqIA) has been completed (Attached as Appendix 2), having been contributed to by Sensory Team Managers and commissioners. At this stage, no negative impacts on any protected characteristics have been identified. This service will offer flexible and personalised support.

8.2 This commissioning project will support the authority to meet requirements under the Equality Act (2010) and the public sector Equality Duty.

9. Data Protection Implications

9.1 A Data Protection Impact Assessment is in progress and will be updated as the project progresses and further details (e.g., successful providers) are known.

10. Other corporate implications

10.1 The contract will also be used by the Strengthening Independence Service within the Children, Young People and Education directorate. This service has been involved in the development of the requirement.

11. Conclusions

- 11.1 The way support services for people with sensory needs are currently purchased is fragmented and with no formal management in place it is hard to understand or demonstrate the value that they are achieving.
- 11.2 This commissioning project will put in place a purchasing procedure that will ensure high quality and effective services for all of the people we support and also introduce contract management processes that ensure the services are subject to formal review and continuous improvement.
- 11.3 Value for money will be achieved via an element of competition in the market and improved data received from providers will allow for more effective planning of future requirements based on identified trends.

12. Recommendations

12.1 Recommendation(s): The Cabinet Member for Adult Social Care and Public Health is asked to:

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b) **DELEGATE** authority to the Director Adult Social Care and Health to award contracts and take relevant action, including, but not limited to, finalising the contractual terms, entering into a contract and other legal agreements, as necessary to implement the decision.

13. Background Documents

None

14. Report Author

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Appendix 1 – Commissioning Options Considered

Description	Advantages	Disadvantages	Outcome
<p>1. Do Nothing continue to arrange individual packages of support on a spot purchase basis</p>	<ul style="list-style-type: none"> • Avoidance of commissioning/ procurement resources required. • Potential to allocate resource to shape the market and encourage upskilling of workers to increase supply instead of procurement. 	<ul style="list-style-type: none"> • Lack of control over service costs. • Providers not on standard KCC contract terms and conditions. • No minimum service quality defined, risk to KCC meeting our statutory requirements successfully. • Inconsistent service provision. • No processes in place to monitor outcomes for people being supported. • Risk of duplication in Children’s and Adults teams. • In breach of the Public Sector Regulations (2015) Light Touch Regime for health, social and education contracts and KCC’s Spending the Council’s Money. 	<p style="text-align: center;">Rejected</p>
<p>2. Procure services externally</p>	<ul style="list-style-type: none"> • Increased control over services purchased, in terms of quality, cost and allocated risk. • Establishes quality baselines in a market with no regulatory oversight. • Ensures service alignment and promotion with 	<ul style="list-style-type: none"> • Risk that providers will decline to engage with the council or take part in a procurement process, leading to a failed procurement. • Resources required to procure and manage contractual arrangements. 	<p style="text-align: center;">Recommended</p>

	<p>MADE principles and other council strategies through design of service specification.</p> <ul style="list-style-type: none"> • Utilises expert skills and knowledge of local specialist providers. • Supports the development of organisations supporting the D/deaf community across the breadth of Kent. • Allows specialist providers to lead innovation in supporting people to maintain or improve their independence. 		
<p>3. Provide services in house</p>	<ul style="list-style-type: none"> • Control over service delivery and quality 	<ul style="list-style-type: none"> • Cost: Purchasing service via list of providers on agreed terms allows flexibility in the volumes purchased. Resourcing permanently in-house commits to a potentially unnecessary level of resourcing and spend. • Lack of choice: Restricts the choice of people eligible for support to that provided by the council. • Does not take advantage of the specialist knowledge and skills available in provider organisations (often deaf-led VCSE organisations). 	<p>Rejected</p>

		<ul style="list-style-type: none"> • Current social care teams are designed as case management functions. Bringing this provision in-house would not sit functionally alongside the current design of the Sensory Services teams. 	
4. Variation to an existing contract	<ul style="list-style-type: none"> • Reduced resources required to run procurement process. • Utilisation of an existing well performing contract with known provider capability. 	<ul style="list-style-type: none"> • The potential contract to vary has just one year of a three-year term left (with the option for two further 1-year extension periods, at the discretion of the council), so may not offer a long term solution. • With the absence of a competitive procurement process there is less opportunity to demonstrate that value for money is being achieved. 	<p>Rejected</p>