

Decision Pathway – Report



PURPOSE: Key decision

MEETING: Cabinet

DATE: 12 July 2022

TITLE	Recommissioning of Care and Support Services in Extra Care Housing		
Ward(s)	City Wide		
Authors: Amanda Chappell, Richard Hills	Job title: Strategic Commissioning Manager (Older People) Health and Care: Interface Partnerships Manager, Hospitals and Front Door		
Cabinet lead: Councillor Helen Holland, Cabinet Member for Adult Social Care and Integrated Care System	Executive Director lead: Hugh Evans, Executive Director People		
Proposal origin: BCC Staff			
Decision maker: Mayor Decision forum: Cabinet			
Purpose of Report: <ol style="list-style-type: none">1. To seek approval to recommission Care and Support services in Extra Care Housing Schemes (ECH) in Bristol.2. To demonstrate the vision and emerging developments for Extra Care Housing as a realistic alternative to residential and nursing care homes placements, where appropriate.			
Evidence Base <ol style="list-style-type: none">1. This report focuses on the recommissioning of the care and support contracts in 12 of the 13 Extra Care Housing (ECH) Schemes in Bristol, for a period of 5 years until 31st March 2028 with the option to extend for a further 2 years until 31st March 2030.2. The 12 current contracts in scope are listed in Appendix A. A decision to extend these contracts to continue from 31 March 2022 to 31 March 2023 was approved at Cabinet in January 2022. The current timeline plans for new contracts to be in place from March 2023.3. BCC Adult Social Care commissions more bed based (Residential and Nursing) placements for older people than comparator Local Authorities. The transformation and commissioning strategy for older people services in Bristol is to reduce the number of these placements, where appropriate, and to grow and develop non bed-based care and support for older people, such as ECH, Day Opportunities and Homecare. These forms of alternative care and support will enable older people to remain living well and independently at home and in their local communities.4. As part of the efforts to reduce bedded placements, a Tier 2 ECH offer (funded by the Clinical Commissioning Group-CCG) will be strengthened to enable step-down from Discharge to Access (D2A) pathways with a clear exit strategy for the person to return home, working alongside Voluntary Community and Social Enterprise (VCSE) Partners throughout the citizen's journey from hospital to home. In addition, there will be BCC funded ECH short stay offers (e.g., respite or assessment) to avoid increasing dependency through more traditional and high cost care home offers.			

5. The developing ECH offer (i.e., balancing levels of need with more complex thresholds) will provide an alternative to nursing and residential placements, through use of technology enabled care (TEC), upskilling ECH care and support workers (to include health skills e.g., early warning scores, catheter, and wound care etc and wider skills, to include supporting citizens with poor mental health and alcohol and substance misuse) and integration with the locality partnership community health teams and other home care providers (offering flexible place based and outreach support).
6. The recommissioning of the care and support contract for ECH is necessary to ensure the continuation of these services within existing schemes. ECH can be a suitable alternative for move-on from other forms of housing such as general needs and sheltered accommodation. The council has a vision for ECH to work more closely with the locality partnerships to build on existing resources, and assets.

Procurement Route

7. Each scheme will be reviewed in terms of the appropriate procurement approach for that scheme and the regulations will be applied accordingly

Budget and Pricing Options

8. The council will use the most suitable combination of block and spot purchasing to pay for planned/ unplanned care and support.
9. Other factors that may influence the contract value for ECH in the future will be incorporated within the Council’s Medium Term Planning process, such as an increase in the number of commissioned ECH tenants and levels of support through the better utilisation of units, new ECH schemes, the adult transformation programme, and the targeted reduction in residential/bed-based care.

Cabinet Member / Officer Recommendations:

That Cabinet:

1. Authorise the Executive Director People in consultation with Cabinet Member Adult Social Care and Integrated Care System to take all steps required to procure and award the contract(s) necessary for the implementation of care and support contracts in Extra Care Housing from 31 March 2023 for 5 + 2 years at a cost of up to £6.7m per annum in-line with the procurement routes and maximum budget envelopes outlined in this report.
2. Authorise the Executive Director People to invoke any further extensions as well as any variations specifically defined in the contract(s) being awarded, up to the maximum budget envelope outlined in this report.
3. Authorises the Head of Strategic Procurement & Supplier Relations to approve appropriate procurement routes to market where these are not yet fully defined in this report, or if changes to procurement routes are subsequently required.

Corporate Strategy alignment:

1. BCC Corporate Strategy 2018 – 23: The aim to create healthier and more resilient communities will be enhanced by the provision of ECH, which supports older people to remain independent in their own homes and communities.

City Benefits:

1. The provision of good quality, and inclusive care and support services and activities, that meet people’s identified needs, will contribute to equality of opportunity in supporting people to live independently in ECH services, particularly for older people and disabled people. The aims stated in the Commissioning Plan, to

focus on a service that will aim to strengthen the support provided for people with dementia, strengthen support for people with mental health issues, strengthen support to carers, and increase the level of assistive technology, will help achieve this.

Consultation Details:

1. 177 people responded to the public consultation which closed on 18 July 2021. The results of the consultation show agreement overall with the key areas of focus for the Commissioning Plan, and agreement overall with the main types of care and support activities we propose to commission. ‘Strong agreement’ is the most favoured option in all cases. Details in Appendix B1.
2. A follow up mini survey was circulated to current ECH care and support providers in April 2022, to gain their views of the most recent vision for ECH which has an increased emphasis on complexity, integration, and flexibility. Key headline findings are included within Appendix B2
3. Engagement event underway (May 2022) with BCC Care Management to ensure that ECH is considered as a realistic alternative to bedded placements

Background Documents:

1. **Care Act (2014):** The Care Act (2014) places a duty on local authorities to facilitate and shape our market for care and support; to ensure sustainability, diversity, and continuously improving and innovative services. It includes the promotion of strength Based Approaches and a focus on Prevention and Wellbeing.
<https://www.legislation.gov.uk/ukpga/2014/23/contents/enacted>
2. Previous Cabinet decision: [Extension of contracts for Care and Support services in Extra Care Housing](#)

Revenue Cost	£6.7m per annum	Source of Revenue Funding	General Fund
Capital Cost	N/A	Source of Capital Funding	N/A
One off cost <input type="checkbox"/>		Ongoing cost <input checked="" type="checkbox"/>	
		Saving Proposal <input type="checkbox"/>	
		Income generation proposal <input type="checkbox"/>	

Required information to be completed by Financial/Legal/ICT/ HR partners:

1. Finance Advice: This report seeks cabinet approval to undertake a tender exercise to recommission care and support services in extra care housing schemes in Bristol. This will be funded by Adult Social Care from the £6.7m budget envelope for ECH. ECH is considered to be a more cost-effective form of care than residential care, with significantly lower average weekly unit costs. For example, residential care costs on average £913 per week in comparison to £232 per week in ECH. However, future levels of care and support costs are expected to rise in ECH settings as more people with complex needs, choose this as an alternative to residential care.

As set out in the report, there may be other factors that influence the contract value for ECH over the contracts life time (potentially up to seven years) and these will need to be incorporated in the Council’s Medium Term Financial Planning process including any assumptions in relation to the cost of care, inflation assumptions and prevailing market conditions.

Finance Business Partner: Denise Hunt, Finance Business Partner, 1 July 2022

2. Legal Advice: The procurement process must be conducted in line with the 2015 Procurement Regulations and the Councils own procurement rules. Legal services will advise and assist officers regarding the conduct of the procurement process and the resulting contractual arrangements.

Legal Team Leader: Husinara Jones, Team Leader, 20 June 2022

3. Implications on IT: I can see no implications on IT regarding this activity.

IT Team Leader: Gavin Arbuckle, Head of Service Improvement and Performance, 5 May 2022

4. HR Advice: The report is seeking cabinet approval to undertake a tender exercise to recommission contracts for commissioned Care and Support Services in Extra Care Housing Schemes (ECH) in Bristol and to delegate authority to the Executive Director of People to award contracts to the providers who are successful in the tender exercise / procurement process as appropriate. There are no significant HR implications arising from this proposal.

HR Partner: Lorna Laing, HR Business Partner – People, 5 May 2022

EDM Sign-off	Hugh Evans	11 May 2022
Cabinet Member sign-off	Cllr Holland	23 May 2022
For Key Decisions - Mayor's Office sign-off	Mayor's Office	13 June 2022

Appendix A – Further essential background / detail on the proposal Appendix A – ECH Commissioning Plan	YES
Appendix B– Details of consultation carried out - internal and external Appendix B1 ECH Consultation Report Appendix B2 Provider Survey Headline Findings	YES
Appendix C – Summary of any engagement with scrutiny	NO
Appendix D – Risk assessment	NO
Appendix E – Equalities screening / impact assessment of proposal	YES
Appendix F – Eco-impact screening/ impact assessment of proposal	YES
Appendix G – Financial Advice	NO
Appendix H – Legal Advice	NO
Appendix I – Exempt Information	NO
Appendix J – HR advice	NO
Appendix K – ICT	NO
Appendix L – Procurement	NO