



Healthier Communities Select Committee

Report title: Future Homecare Arrangements (New Model and Procurement Approach)

Date: 01 March 2022

Key decision: No.

Class: Part 1

Ward(s) affected: All

Contributors:

John Bardens, Scrutiny Manager;

Tristan Brice, Associate Director, Community Support and Care, Lewisham Integrated Commissioning Team

Outline and recommendations

This report summarises the new home care model and procurement process

Information included in this report will be enhanced by a short presentation

Members of the Healthier Communities Select Committee are recommended to note the future home care arrangements (new model and procurement approach)

1.0 Summary

- 1.1 The purpose of this paper is to provide Members of the Healthier Communities Select Committee with an update on the future home care model and procurement approach. .
- 1.2 The new model will include:
 - 1.2.1 Personalised set of principles through which care is provided
 - 1.2.2 Embedding the voice of people with lived experience and unpaid carers into the delivery and overview of the service
 - 1.2.3 Four Lead Neighbourhood Providers of Home Care

- 1.2.4 Five specialist advice, support and training providers to support the Lead Neighbourhood Providers
- 1.2.5 Embedding the service within the wider Lewisham Community Offer
- 1.2.6 A career progression pathway for home care workers
- 1.2.7 Compliance with UNISON's ethical care charter
- 1.2.8 A commitment to promote home care as a career of choice for Lewisham residents.
- 1.2.9 A commitment to embedding the LondonADASS Big Promise within service delivery
https://www.youtube.com/watch?v=iZWclcGpwfY&list=PLio1_qJY3EazD4z2SCKGPqUPUhfAfGOYUd
- 1.2.10 A commitment to identifying and nurturing untapped talent within the borough through developing innovative roles delivered through the apprenticeship route
<https://lewisham.referrals.selectminds.com/landingpages/apprentice-opportunities-at-lewisham-council-7>
- 1.3 The procurement process will build on the current delivery model (three Lead Providers of Home Care in the Borough and these contracts have been extended until 31 March 2023).

2.0 Recommendations

- 2.1 Members of the Healthier Communities Select Committee are recommended to note the future home care arrangements (new model and procurement approach)

3.0 Policy Context

- 3.1 The Care Act 2014 had a significant impact on home care providers and commissioners and on people who use home care services and their carers. The majority of the Care Act came into effect in April 2015 and put a duty on local authorities to promote wellbeing and meet needs (rather than requiring them simply to provide services). It also requires local authorities to assess and offer support to address the needs of carers, independently of the person they care for. This is aligned with a range of other carer-specific policies which emphasise the value of carers, and the importance of enabling them to have 'a life alongside caring'.
- 3.2 Under the Act, local authorities have a duty to prevent, delay or reduce the development of people's social care needs, so far as possible, and to work in an integrated, person-centred way, with all other support agencies including those in the third sector. They also have a duty to provide information and advice for the whole population, not just those who are receiving services that they fund. This means that people funding their own home care and support are entitled to guidance from the local authority, including on financial matters. The Care Act 2014 also requires local authorities to stimulate and manage their local market to benefit the whole population, not just those in receipt of local authority funded support.
- 3.3 Engaging people with lived experience is a core element of the Care Act 2014, which states: 'Local authorities should, where possible, actively promote participation in providing interventions that are co-produced with individuals, families, friends, carers and the community'.
- 3.4 The report supports the following Corporate priorities:
 - Delivering and defending: health, social care and support
 - Building an inclusive local economy

4.0 Background

- 4.1 In 2015, Adult Social Care in Lewisham adopted a Neighbourhood Care Team Model as part of the wider initiative to establish health and care services on a neighbourhood footprint. Virtual neighbourhood teams of district nurses and social work staff aligned to GP practices work with other community health and care services including Mental

Is this report easy to understand?

Please give us feedback so we can improve.

Go to <https://lewisham.gov.uk/contact-us/send-us-feedback-on-our-reports>

- Health to co-ordinate work at a neighbourhood level. This has included building strong relationships with the lead home care providers.
- 4.2 On 1st April 2016 the Council entered into 2 year contracts (with the option to extend for 1 year) with 4 Providers. The contract replaced the previous Framework Agreement for Domiciliary Care (2010-2016) which included 18 providers.
- 4.3 The rationale for the significant consolidation of contracted home care providers was to appoint one Lead Provider per Neighbourhood who would have the capacity and expertise to lead the delivery of home care in that neighbourhood and work closely with the neighbourhood teams. The Service Specification for the Lead Provider contract was developed to enable Adult Social Care and Health to optimise the home care service to individuals in their own home by facilitating integrated working across health and social care, offering a localised and personalised experience and most importantly delivering the outcomes that are important to the Service User.
- 4.4 Throughout its tenure the Home Care Contract has enabled the Council to discharge its responsibilities to provide care to individuals in their own home in an efficient, structured and timely way.
- 4.5 Adult Social Care Neighbourhood Leads report that there has been an improvement in the provision of Home Care since moving to the Lead Provider model. It has been easier to build relationships with one Lead Provider and ensure that quality concerns are addressed promptly. They have been encouraged by the Provider's willingness to take part in Multi-Disciplinary meetings and pilot new ways of working to benefit their Service Users. Service Users also report benefits from the Neighbourhood Model of Home Care including a more positive experience of service provision and an increase in independence and enhanced quality of life.

5.0 New model – We are Proud to Care

- 5.1 The new model of care will adopt a personalised set of principles through which care will be provided – all providers and staff delivering the new model of home care will embed the following principles in their approach
<https://www.youtube.com/watch?v=i9yGRuLaUuw> :
- We feel no act of kindness is too small
 - We are a family
 - We give people a voice
 - We are making a difference
 - We care for the most vulnerable people in society
 - We are training and developing the future workforce
- 5.2 Embedding the voice of people with lived experience and unpaid carers into the delivery and overview of the service – successful bidders will be required to meaningfully involve people with lived experience and unpaid carers in their service delivery. This will help to further embed the development and delivery of person centred, outcome focused support planning initiatives.
- 5.3 Four Lead Neighbourhood Providers of Home Care:
- 5.3.1 The new model will continue to be embedded within a neighbourhood model. Home Care Workers will be integral members of the neighbourhood teams, working alongside other health and care staff in the neighbourhoods. Neighbourhood Teams will continue to work together to create an integrated health and care service that is focused on the individual to provide a more responsive, person centred service. Clients will be allocated to the same worker(s) wherever possible. Shared training opportunities will be a key element of this. This will be led by the Proud to Care local Lewisham apprentices
<https://lewisham.referrals.selectminds.com/jobs/proud-to-care-lewisham-local-lead-3009>

Is this report easy to understand?

Please give us feedback so we can improve.

Go to <https://lewisham.gov.uk/contact-us/send-us-feedback-on-our-reports>

- 5.3.2 The Neighbourhood Model will continue to improve communication between organisations, reduce duplication and build a support team around the individual to prevent or delay their need increasing and enable wellbeing, choice and independence. This will result in the right level of care and support in the community for all adults requiring services.
- 5.4 Specialist providers to provide expert advice, support and training to the Lead Neighbourhood Providers
- 5.4.1 The procurement will include specialist lots delivered on a borough footprint. This will include:
- Specialist End of Life Care advice, support and training
 - Specialist Mental Health advice, support and training
 - Specialist advice, support and training to support the effective management of individuals with advanced dementia including those presenting with behaviours that challenge
 - Specialist Learning Disability advice, support and training
 - Specialist advice, support and training to enable all those in receipt of commissioned home care to maximise meaningful life roles e.g. enabling community engagement.
- 5.4.2 Lead Providers will also be able to access these specialist agencies that that will offer specific expertise, support and training to Lead Providers.
- 5.5 Embedding the service within the wider Lewisham Community Offer – the service will be an equal member of the Lewisham Community Offer and be integrated in the wider transformational change including the Newton work. It is expected that the branch offices of each neighbourhood provider will become a hub whereby all health, social care and other relevant organisations working in that neighbourhood can hot desk etc.
- 5.6 A career progression pathway for home care workers. The career progression pathway will be developed in consultation with the home care provider forum and overseen by the Home Care Procurement Reference Group supported by colleagues from Skills for Care. This will draw on the work of the London Adult Social Care Academy which goes live on the 01 April 2022. This will be embedded in the ICS commitment to working with social care providers to promote workforce development opportunities and career pathways.
- 5.7 Compliance with UNISON's ethical care charter. Building on the current contractual arrangements, all bidders will need to demonstrate that they are compliant with the UNISON's ethical care charter stages 1 – 3.
- 5.8 A commitment to promote home care as a career of choice for Lewisham residents. All bidders will be required to work collaboratively to promote home care as a career of choice to Lewisham residents through the Proud to Care Lewisham initiative. This will include:
- Visits to schools and Colleges of Further Education
 - Organising and running recruitment fairs
 - Other innovative evidence based initiatives
- 5.9 A commitment to embedding the LondonADASS Big Promise within service delivery https://www.youtube.com/watch?v=iZWclcGpwfY&list=PLio1_qJY3EazD4z2SCKGPqUPUhfAfGOYUd.
- 5.10 A commitment to identifying and nurturing untapped talent within the borough through developing innovative roles delivered through the apprenticeship route

Is this report easy to understand?

Please give us feedback so we can improve.

Go to <https://lewisham.gov.uk/contact-us/send-us-feedback-on-our-reports>

6.0 New model of home care – the procurement approach

- 6.1 Scope - As noted by the Kings Fund (2018), *the term ‘home care’ covers a wide range of activities. The provision of personal care (help with washing, dressing and eating) to people with long-term care needs is the core service provided, but home care also extends to reablement services for people leaving hospital or receiving crisis interventions to avoid hospital attendance in the first place. The term can also include help with household tasks – the ‘mopping and shopping’ activities that many people may need to live independently. However, under the eligibility guidelines applied in England, the requirement for these latter activities alone would not entitle people to local authority help and, in most cases, would need to be paid for privately. Some home care is also provided on a ‘live-in’ basis.*
- 6.2. The re-procurement will include the following commissioned home care activity:
- 6.2.1 Home care provided currently by the three lead home care providers
- 6.2.2 End of life care currently provided by Marie Curie
- 6.2.3 Home care funded through Continuing Healthcare
- 6.2.4 Home care currently commissioned by South London and Maudsley NHS Foundation Trust
- 6.2.5 Home care currently commissioned through enablement
- 6.2.6 Home care funded through the Learning Disability framework
- 6.2.7 Home care provided by home care organisations that are currently commissioned through direct payments.
- 6.3 It is important to note that the following activity is not directly within the scope of this re-procurement:
- 6.3.1 Enablement
- 6.3.2 Direct payments that do not commission CQC regulated home care providers e.g. Personal Assistants
- 6.3.3 Shared Lives
- 6.3.4 Home care funded privately.
- 6.4 Adopting a value based collaborate approach - Building on the Lewisham Corporate Strategy values, the procurement process will adopt the value based collaborative programme managed approach as set out below.
- 6.4.1 Collaboration adds value to local systems by: bringing stakeholders together to make decisions; fostering close operational partnership between commissioners and providers; simplifying financial arrangements; and offering improvement support to providers. In order to oversee the procurement of the new model of home care, a Home Care Procurement Reference Group will be established bringing together representatives from the following areas:
- Enablement team
 - Integrated commissioning team
 - Neighbourhood team
 - Arranging care team
 - Finance
 - Procurement
 - Legal

Is this report easy to understand?

Please give us feedback so we can improve.

Go to <https://lewisham.gov.uk/contact-us/send-us-feedback-on-our-reports>

- People with lived experience of home care
- Carer reference group
- Voluntary sector
- Healthwatch
- Primary care
- Acute Trust
- Mental health trust
- Community health services

6.4.2 The group will be chaired by the Director of Operations - Adult Social Care Community Services, London Borough of Lewisham

6.4.3 The Home Care Procurement Reference Group will meet monthly and will be responsible for overseeing the development and delivery of the re-procurement action plan. The action plan will include the following elements:

- Market engagement
- Development and testing of the service specification including embedding the Multi-Agency Adult Safeguarding policy and procedures within the service specification
- Ensuring the voice of people with lived experience and unpaid carers is embedded in the procurement process
- Agreeing key performance indicators that are outcome focused and person centred
- Agreeing core paperwork and system indicators that will be adopted by the successful bidders
- Agreeing career pathway for home care workers and embedding this within the procurement approach

6.4.4 The Home Care Procurement action plan will be managed by the Associate Director, Community Support and Care, Lewisham Integrated Commissioning Team.

Values – Lewisham Corporate Strategy	Approach
We put service to the public first	The procurement reference group will be responsible for ensuring: <ul style="list-style-type: none"> • The service specification focuses on delivering a strengths based approach based on person centred outcomes enabling individuals to maximise their physical and mental wellbeing, quality of life and life roles to ensure they are supported to live fulfilling lives • People with lived experience are equal members of the group • Unpaid carers are equal members of the group through the Carer network
We respect all people and all communities	The service specification will commit to ensuring services are accessible and competently delivered to meet the needs of all Lewisham residents through the lens of the nine protected characteristics. The service specification will embed the LondonADASS Big Promise in the operational delivery model. The service will also include a core offer to unpaid carers.
We invest in employees	The service specification will include a clear commitment to developing a career progression pathway for home care workers so that they can develop their knowledge and skills to enhance the outcome of clients. This will improve job satisfaction and retention. This work will be overseen and driven by our Proud to Care local Lewisham apprentice(s)
We are open, honest	The procurement process will be open, clear and transparent with

Is this report easy to understand?

Please give us feedback so we can improve.

Go to <https://lewisham.gov.uk/contact-us/send-us-feedback-on-our-reports>

and fair in all we do.

weekly updates through the Home Care provider forum bulletin and monthly virtual provider forums.

7.0 Financial implications

- 7.1 Forecast spend on home care is £18.6m and the re-procurement will be aligned with the Empowering Lewisham improvement programme as well as the Council's wider savings agenda.
- 7.2 There are no direct financial implications at this stage arising from the implementation of the recommendations in this report.

8.0 Legal implications

- 8.1 There are no direct legal implications arising from the implementation of the recommendations in this report.

9.0 Equalities implications

- 9.1 The recommendations made in this report relate to one specific group - adults who have been identified and assessed as being in need of services in order for them to maintain their independence and remain in their own home. Implementing these recommendations will not have an impact on individual client choice or on the manner in which support is delivered and the quality of that care.
- 9.2 The service specification will include a commitment to embedding the LondonADASS Big Promise within service delivery
https://www.youtube.com/watch?v=iZWclcGpwfY&list=PLio1_qjY3EazD4z2SCKGPqUPUhfGOYUd and ensure the nine protected characteristics are embedded within service delivery
- 9.3 The COVID-19 pandemic has shone a spotlight on the health inequalities experienced by those from Black, Asian and Minority Ethnic communities. Embedding community voice and lived experience, particularly for those from Black, Asian and Minority Ethnic minority communities, into the procurement process of the new home care model will be a critical part of ensuring that any existing equalities are taken into account in developing the new service. The findings of the Birmingham and Lewisham African Caribbean Health Inequalities Review (BLACHIR) due to be reported to the Lewisham Health and Wellbeing Board in March 2022 will also be considered within the procurement process for the service.

10.0 Climate change and environmental implications

- 10.1 There are no direct climate change or environmental implications arising from the implementation of the recommendations in this report.

11.0 Crime and disorder implications

- 11.1 There are no specific crime and disorder implications arising from this piece of procurement. However, contract compliance measures around safeguarding, assertiveness and anti-bullying initiatives will be built into the service specification.

12.0 Health and wellbeing implications

- 12.1 It is expected that the new model of Home Care in Lewisham will focus on increasing Service User's independence by giving them more choice and control in arrangements for their care and allowing Care Workers sufficient time to work with Service Users to

Is this report easy to understand?

Please give us feedback so we can improve.

Go to <https://lewisham.gov.uk/contact-us/send-us-feedback-on-our-reports>

enable them to regain skills and develop strategies that allow them to remain in their own home.

- 12.2 Home Care provision will be an integral part of the Care at Home initiative. As Care Workers begin to work much more closely with Community Nurses, Primary Care and Therapists it is hoped that this will reduce demand on in-patient beds (avoid admissions) and also lead to less delayed discharges.

13.0 Report contact

- 13.1 John Bardens, Scrutiny Manager, john.bardens@lewisham.gov.uk 020 8314 9976

Is this report easy to understand?

Please give us feedback so we can improve.

Go to <https://lewisham.gov.uk/contact-us/send-us-feedback-on-our-reports>