

ADULT CARE AND WELL BEING OVERVIEW AND SCRUTINY PANEL 22 MAY 2023

INDEPENDENCE FOCUSED DOMICILIARY CARE IN WORCESTERSHIRE

Summary

1. The Panel will receive an update on independence focused domiciliary care (care at home), which is part of its Work Programme.
2. The Cabinet Member with Responsibility for Adult Social Care and the Strategic Director of People have been invited to the meeting to update the Panel on developments relating to the commissioning, early stages implementation and future plans for the Independence Focussed Domiciliary Care (IFDC) approach in Worcestershire.

Background

3. In April 2023, the Council purchased approximately 39,000 hours per week of domiciliary care for 2471 people from 142 domiciliary care providers.
4. The Council purchases around half of all domiciliary care hours from the domiciliary care market in Worcestershire. 27 providers delivered 51% of the commissioned hours of care and no provider had greater than 3% of market share. All packages of care are sourced via the Council's Brokerage Team.
5. For homecare for those aged 65+ in 2022/3, the general homecare demand is broadly flat, which indicates an overall reduction in demand or zero increase for 2023. The number of hours of care for people continues to increase from an average of 12 hours per person 3 years ago to an average of 15 hours per person currently, reflecting the needs of individuals requiring the care.
6. The price at which the Council buys domiciliary care in 2023/24 ranges from £20.64 to £25.02 per hour. There are additional payments for bank holidays and for travelling to some rural areas.
7. There are 4800 people working in the Domiciliary Care sector in Worcestershire, and 4100 of those are directly involved with delivering direct care to individuals.

Independent Focussed Domiciliary Care Tender

8. Traditionally, homecare has been purchased on a time and task basis i.e. a carer will arrive as close to a time as possible and deliver a number of tasks for an individual to support them in their home. In 2020, the Council approved a move away from this approach to one which focussed on delivering outcomes and supporting people to maintain, or recover, activities of daily living. The first step of this process is to commission providers with whom the Council will work with on a long-term basis to deliver the change in approach. Independence Focussed Domiciliary Care (IFDC) providers are fundamental in achieving this step change.
9. The Council chose to take an approach in which there are 10 zones across Worcestershire (see map attached at Appendix 1). Each of the zones will have a single lead provider and two secondary providers. The lead provider will deliver 60% of the work and the secondary providers, 20% each. Broadly the zones have a similar number of hours of care being delivered within them. The primary and secondary providers are required to take on new work from the start of the contract, leaving legacy care packages with existing providers and it is predicted the full value of the contract will not be realised until year 2 (2024/25)
10. The approach and length of time to commission the providers is shown below;

Process	Timescale
Advertise Tender Stage 1 Selection Process	March 2021
Receipt of completed Stage 1 submissions	April 2021
Advertise Tender Stage 2	June 2021
Receipt of completed Stage 2 submission	July 2021
Evaluation of Stage 2	July-November 2021
Tender outcome announced & Standstill	November 2021 – March 2022 (in stages)
Contracts signed	April - September 2022

11. The Council offered contracts of 5 years plus a potential 2 further years. The value of the contract is over this period is approximately £219 million.
12. Following the conclusion of the tender, contracts were awarded to 8 care providers who would be primary providers in 7 zones and secondary providers in 15 zones. There remained 3 primary and 5 secondary zones to fulfil, primarily in Malvern Hills and Wychavon. The reasons for the unfilled zones were partly due to the price offered to the providers and the fact that a provider, who had been selected as part of the procurement process then chose not to sign the contract.
13. In April 2023, an additional tender was published for the zones without IFDC providers with a closing date of May 2023. A significant number of providers have submitted bids which are due to be assessed during May 2023, with primary and secondary providers identified and confirmed in June 2023 and contracts awarded in July 2023.

Implementing the Independence Focussed Domiciliary Care approach

14. The period from September 2022 until the IFDC service was launched on 3 January 2023 allowed providers preparation time, as the expectation placed on providers was that they would deliver care to all new people (those people who had not received any domiciliary care previously) from that date forward. This approach was agreed so as not to destabilise the market. The Council was aware of IFDC providers who had recruited either from traditional routes (i.e. local adverts, word of mouth, online job boards etc) or from abroad or via a recruitment and training trial involving the Council/Department of Work and Pensions/Heart of Worcestershire College.
15. The Council is continuing to work with the IFDC providers to further understand any ongoing barriers to delivering care to people and recruitment and retention of staff is still the most pressing issue for care providers. The Council has played a role in supporting the creation of a new course and training material for people who attend Heart of Worcestershire College, and the offer also includes a training suite based in Worcester City. This will be launched in May 2023.
16. Between January and April 2023, the IFDC providers have delivered 39% of all the Domiciliary Care to new people in the zones with full provider coverage.
17. There are already some early benefits of the approach, these include:
 - a. Providers working collaboratively to deal with issues that arise from unforeseen staffing issues. In one example, two providers worked together to ensure a seamless care was delivered when one of the care providers had staff recruited by a health provider.
 - b. One provider has approached the Council to support their development of a falls service within their service and also to ask the Council to support their use of e-bikes to ensure carers were able to complete their care calls more easily. Having a car is a potential barrier to some carers wanting to enter the care sector. which this approach helps to overcome.
 - c. Support in developing the training offer for new staff as offered by the Heart of Worcestershire college.
 - d. Providers developing widening their recruitment practice to include active international recruitment.
18. The Council will co-produce the IFDC approach within the boundaries put in place by the Council's contract and specification with the care providers and people who receive the service. Some of the broad themes to be considered in developing the IFDC approach are detailed below. The IFDC providers identified as part of the second tender will be included within this programme once contracts have been signed.

Developing the Delivery of IFDC

Outcomes

19. Adult Social Care and Public Health teams will work with providers to identify methods by which outcomes can be better measured for individuals and provide an evidence base of interventions which will support people to maintain their independence for as long as possible. Implementing this approach will require

provider staff to embrace a reablement approach i.e., encouraging people to make best use of their abilities. The aspiration is to enable people to achieve greater independence although for some maintaining their independence will be a significant achievement.

Time and task approach

20. To deliver outcomes the 'time and task' approach to the delivery of care will be reviewed. 'Time and task' is the recognised way of commissioning and delivering homecare as it involves the person requesting the care, often a social worker, identifying what tasks need completing and at which parts of the day or specific times. In delivering outcomes, social workers will need to identify the outcomes people want to achieve as part of the overall care plan and then a three-way conversation will be required between the provider, the social worker and most importantly the person, to identify how the outcomes will be achieved. Flexibility for both the individual receiving care and the care provider will be a component part in supporting people to achieve their outcomes, and this may also require the providers to become trusted assessors. Many providers already deliver care in this way for people who are funding their own care. Time critical care calls i.e., calls which include medication administration will be delivered based on the requirements of the individual and medication administration.

Informal Carers

21. Worcestershire Association of Carers (WAC) have already agreed to offer training to the IFDC care providers, and this programme will be developed to ensure provider staff are fully 'carer aware' and that there are direct links between each IFDC provider and WAC. The aim is to ensure that all carers supporting people at home are identified and offered the support available to them.

Mental Health training

22. It was identified by Public Health through the Joint Strategic Needs Assessment (JSNA) for Mental Health (MH) that there is a skills gap for providers with regards to understanding and working with people with MH conditions. Commissioners are exploring with Public Health colleagues how this funding can be used to the benefit of providers delivering care.

Partnership working with the Council's Reablement Service

23. The IFDC providers will work closely with Reablement Service to facilitate even quicker discharges from hospital and from the Reablement Service itself. By working closely with the Reablement Service, the persons reablement activities can be further built on, delivering even better outcomes for people in receipt of the IFDC service. By building on the knowledge gained of the individual by the reablement service the care delivered will be as seamless as possible. The Reablement team will also support the IFDC providers by helping to share knowledge, skills and behaviours required to deliver a reablement approach, and this will be achieved through a mix of formal and informal training and on the job mentoring and support.

Working with providers to reduce costs

24. Care workers travelling from call to the call is a significant cost to provider and travel time also impacts on the capacity for care staff to deliver hands on care. East Midlands Association of Directors of Adult Social Services (ADASS) surveyed care staff in 2020 and identified that frequently asking staff to travel

more than 6 miles between calls could result in people leaving the care provider. The Council will work with providers to support the delivery of even more efficient care rounds but noting people who receive the care will be consulted should this potentially require a change in care provider. This aim is to reduce the time spent travelling from call to call thereby increasing capacity by maximising the delivery of hands-on care.

Payments

25. Providers currently receive a payment based on the completion of the care they have delivered. Providers confirm work delivered via the Council's provider portal although 90% of care hours do not change from week to week. The Council may wish to engage with providers to review the way in which they are paid. The aim is to reduce some of the bureaucracy for providers and the Council but also engage with providers to support them in offering improved terms and conditions to care workers helping to recruit and retain the workforce.

The Way Forward

26. The Council will, in 2023, complete the process by which IFDC providers are contracted to deliver the care and continue to work with the providers to develop the IFDC approach with a focus on delivering outcomes for people to support them in remaining independent for as long as is possible.
27. The process of change in approach will require considerable engagement and support from the Council and IFDC care providers, and ongoing co-production with people to help design the approach to achieve full implementation of potential benefits. The change will support the Council's Plan for Worcestershire by supporting people to live "*healthily and independently in their own homes for longer and supporting preventative measures to reduce incidents which require NHS or other care services*"

Equality and Diversity Implications

28. A joint impact assessment (JIA) screening has been completed which identified that a full impact analysis was required relating to a full Equality and Public Health, Data Protection Impact Assessment.

Purpose of the Meeting

29. The Panel is asked to:
- consider and comment on the information provided within this report; and
 - determine whether any further information or scrutiny on a particular topic is required.

Supporting Information

Appendix 1 – map to show example of Domiciliary Care zones

Contact Points

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Background Papers

In the opinion of the proper officer (in this case the Assistant Director for Legal and Governance), there are no background papers relating to the subject matter of this report.

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