

# Home Care Provider Forum

8<sup>th</sup> April 2019

Barton Hill Settlement

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# Welcome

Thank you for taking the time to attend today's meeting.

*We want to share with you key issues of importance currently to BCC homecare commissioners, update on the BCC supported PR campaign for recruitment to care roles, update on the Ethical Care Charter and plans for the Framework. We want to hear how things are for you currently and your plans.*

## Housekeeping:

- No Fire Alarm Test
- Toilet off corridor



# Agenda

Time	Item	Speaker
10:30 – 10:40	Arrivals	
10:40 – 10:45	Agenda – Scope for today	Lucia Dorrington
10:45 – 11:00	Strategic Update	Carol Watson and Lucia Dorrington
11:00 – 11:15	Update on homecare staff recruitment and retention and BCC PR Campaign.	Lucia Dorrington , Lorna Crouch, Jon Vowles
11:15 – 11:20	Provider reviews	Alice Norton and Lucia Dorrington
11:20 – 12:00	Update on forthcoming Framework process	Catherine Martin
12:00 – 12:15	Break - Tea and Coffee	
12:15 – 12:45	Opportunity for provider Q&A	All
12:45 – 13:00	Summary of key messages	All
13:00	Event Closes	

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# Strategic Update

Carol Watson and Lucia Dorrington

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# Our Vision

- Three Tier model - strengths based approach to care
- Fewer people in residential and nursing care homes
- **More people living at home with the care and support they need**
- Demand for homecare/ care at home will therefore increase over time as this vision comes to fruition (albeit with more Tier 2 interventions we should expect some reduction in homecare as we know it now)
- Need to plan now for what homecare of the future looks like and why - commissioners can then strategically plan for this

# Strategic Update

- Committed to maintaining current commissioning model until at least August 2021
- Strategic commissioners are also scoping out what the future model could look like. Aspects may include:
  - Closer working with health
  - Commissioning on outcomes
  - Locality based models - development of “Community Offer”: relationship to community via anchor organisations (who could provide non personal care aspects)
  - Blend with Tier 2 interventions
  - Different contract models – i.e. alliance contracting
- We want to work and shape our plans with providers

# Successes

- **Providers keeping going and delivering in a tough climate**
- **Lowest unable to place list for a long time – 47 people** (33 at home, 9 in hospital, 2 interim placements and 3 for OOH care)
- **Improvements in quality** of homecare in City – only one RI CQC
- **One of best hourly rates in country** - £18.20 as of April 1<sup>st</sup> 2019
- **Increase in main and secondary provider coverage/ supply in City** - hit 50%
- **3 new secondary providers** (Mears, CareFirst and 1<sup>st</sup> Grade Care)
- Importance of rest of the market - Framework process
- Staff in commissioned homecare contractually to be paid national living wage
- Importance of the Ethical Care Charter
- Improved contract management and integrated Homecare Business Relationship Team (HBRT)
- Innovations – piloting provider reviews, recruitment campaign

# Continual Challenges

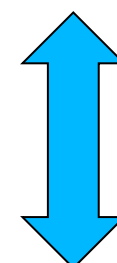
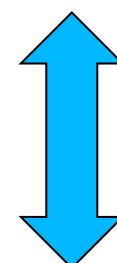
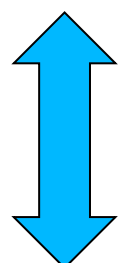
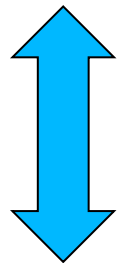
- Retention and recruitment of care staff
- Sufficiency of supply at any one time to meet needs
- Taking packages from re-ablement (North area focus)
- Hospital discharge focus v community focus
- EMS/ CM2000 – use of this and compliance levels
- Improved use of Assistive Technology
- Night time care contract – review
- Sustainability of the provider base

Re-ablement to homecare

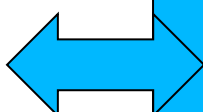
Hospital discharge

Night time homecare

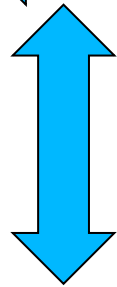
Day time homecare



Supply

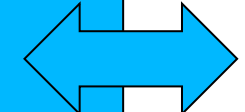


Pricing strategy



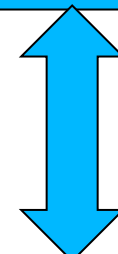
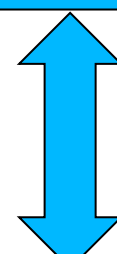
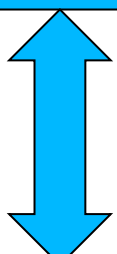
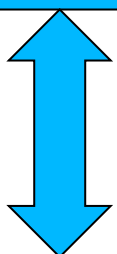
*The various components of commissioning homecare*

Quality



Safeguarding

Recruitment & retention of carers



Time and task commissioning/  
DPs

Brokerage

Service user charging

Strategic Commissioning EMS



# BCC Supported PR Campaign

Lucia Dorrington, Lorna Crouch, Jon  
Vowles

# PR Campaign

- As discussed at the last Provider Forum, BCC has invested in a PR and Marketing campaign which promotes employment in homecare jobs.
- Campaign will run from April – June 2019 – campaign has started !
- The campaign includes:
  - Promotional posters on buses and bus shelters
  - Radio adverts and interviews (Heart, Ujima)
  - Press articles in the Bristol Post
  - Social Media advertising on Facebook, Instagram and Twitter

# PR Campaign (Cont.)

## Approach

- Promotion to Proud to Care website
- Photographs of real care workers
- Video's of real care workers – I'm proud to care because...

## Measure

- We want to know whether the campaign has a positive impact for providers – where providers see an improvement let us know – any ideas?



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# Provider Reviews

**Alice Norton and Lucia Dorrington**

# What is a Provider Review?

- The Care Act 2014 enables Local Authorities (LA) to authorise others to conduct a review.
- Reviews should be a positive opportunity to take stock and consider if the plan is enabling the person to meet their needs and achieve their aspirations.
- There are occasions when a relatively minor change to a plan is required but there has been no change in the levels of need. In these circumstances, LAs should respond in a proportionate and reasonable way.
- Provider reviews can therefore be seen in this context of a proportionate response.
- We are aware Providers already do reviews on a regular basis – This pilot is to accelerate this process and connect into BCC formally.

# Review Process

1. The Provider identifies package(s) of care that are suitable for review.
2. The Provider reviews the identified package(s) using the Provider Review Form. This must be done by a suitably qualified / competent member of staff.
3. The completed Provider Review Form is sent to the BCC Brokerage Team for Validation. This must be sent to [support.brokerage@bristol.gov.uk](mailto:support.brokerage@bristol.gov.uk) using the Secure Mail system.
4. If the review is accepted by BCC, the service user's support plan will be updated by BCC and the amended service will continue. If BCC decides that a Full Reassessment of the Support Plan is required then we will ensure this is completed.
5. Providers are able to take on new packages of care where capacity is freed up.

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# Completing the Provider Review Form

- As it is anticipated that provider review will be in the context of relatively stable needs and situation, the form is designed to be proportionate to reflect that.
- As stated it is not a re-assessment, and therefore it does not aim to cover or revisit a person's eligibility for support.

# Home Care Framework Tender

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# Rationale for Framework

- BCC directly awarded existing providers a 12 month contracts under new terms and conditions
- These expire from Oct 2019
- A Framework needs to be established in order for BCC to continue working with you and also enables BCC to commission a future home care model.
- Once the framework is establish BCC will no longer commission providers under old contracts

# What to expect

- New contract and service specification (though largely based on last years variation)
- Pre-Tender support from BCC
- Tender Process
- Implementation Process – dependent on tender outcome

# Open Framework

- An open framework is a contract that allows BCC to offer work to a range of providers that meet our quality standards.
- An open framework does not guarantee providers work and vice versa
- The framework is 'open' as providers can apply to join the framework periodically throughout the contract term.
- If provider apply and fail, they can reapply.

# Contract

- Redrafted terms and conditions
- Framework will include 3 types of contract
  - Open Framework Agreement
  - Spot Contract
  - Block Contract
- Same contract for all framework providers
- Issued at point of tender

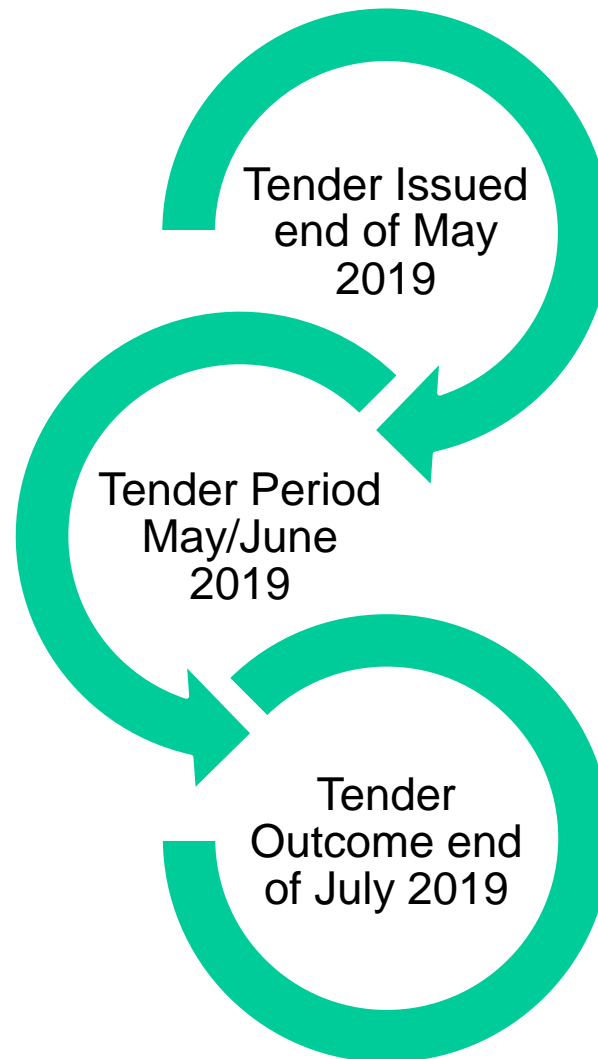
# Service Specification

- Largely based on the specification varied last year, some changes to that spec include:
  - Payment Mechanism – moving to minute by minute
  - EMS – applies to providers with over 100 hours of commissioned care per week
  - Referral Process – via email
  - Quality workbooks and Key Performance Indicators
- Same specification for all framework providers
- Issued at point of tender

# Tender Process

- Tender will be issued on ProContract – <https://procontract.due-north.com/Login>. Providers can sign up now in advance of the tender.
- Pre-Tender Events on 1<sup>st</sup> May and 9<sup>th</sup> May which will provide guidance on the tender process – to book a place at these events visit [www.bristol.gov.uk/tenders-contracts/home-care-commissioning](http://www.bristol.gov.uk/tenders-contracts/home-care-commissioning)

# Indicative Tender Timescales



# Implementation

- BCC wishes to encourage all existing providers to tender for the framework.
- Where an existing provider is successful their existing service users will remain with them
- Where an existing provider is unsuccessful before either:
  - the expiry of the current contract or
  - after the 3<sup>rd</sup> attempt at submitting a successful tender
- Service users will transfer over to a commissioned provider in accordance to the contract preferences (i.e. Main, Secondary, Framework) for the applicable zone.

# Break



# Questions and Answers



# Summary of key messages

- BCC continues to be committed to the home care sector
- Framework tender to be issued late May
- Attend one of the pre-Tender events on the 1<sup>st</sup> May and 9<sup>th</sup> May
- Think about who your organisation will need to be involved in the tender
- Consider implementation and what that means for your organisation.

**Thank you for attending**

**Slides from today's meeting will be  
uploaded to the homecare BCC webpage**