

Supported Living and STAC Engagement Event

12.05.23



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Welcome and Introductions



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Single Framework - Adult social care spend

Overarching Service Specification, Terms & Conditions, Pricing Schedule & Quality and Performance Framework

LOTS

Residential & Nursing Care Homes

Supported Accommodation

Extra Care Housing

Home Care

Support to Access the Community, Day Opportunities & Help When You Need It

Direct Payment Support & Individual Service Funds

Carers Support

Advocacy

Innovation

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The One Page Business Case: ASC Single Framework

At present...



- Adult Social Care currently purchases care from c. 480 providers at a cost of c.£170M per annum.
- The current purchasing mechanism comprises of 4 large frameworks: Care Homes, Home Care, Community Support Services, Sheltered Housing & additional spot contracts.
- Each contract and framework has a different structure, layout, terms and conditions, approach to financial rates and uplifts.
- The administration of the framework for commissioners, procurement and care providers is very resource intensive
- BCC spent over £8M off framework in 2021/22
- Out of date commissioning models
- Siloed contracting stifling innovation across the care ladder

This results in...



- **Confusion and frustration** for stakeholders and a **negative impact** on collaboration
- Inconsistent approaches to **price which is difficult to benchmark**
- **Diverse led and VCSE organisations struggling to engage** with the frameworks
- **Ineffectual use of resources**, diverting staff time from more value adding transformation work
- Inflexible purchasing model, **stifling innovation** in commissioning which could transform and reduce third party spend

Goal...



To procure a single financial, procurement and contract management compliant framework for the majority of ASC third party spend.

Key objectives...



- Financially, procurement and contract compliance
- Stakeholders report that new mechanism is easier to engage with
- Reduction of off-framework spend
- Reduction in internal staff time spent on administering frameworks
- Reduction in contract enquiries
- A mechanism to allow BNSSG ICB partners to jointly purchase with us

Desired outcome...



- Simpler, consolidated contractual arrangement
- Enables flexible & innovative commissioning
- Enables robust financial management across care ladder
- Easier for VCSE and diverse led organisations to work with BCC

Benefits....



- More staff time available for value adding transformation, innovative commissioning and quality assurance activity
- Improved procurement compliance
- Clearer relationships with providers and stakeholders
- A mechanism for integrated commissioning

STAC – Previous feedback on current challenges



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Previous feedback

Service user needs

- Feedback that providers are seeing people present with more complex needs, who often need more time and 1:1 support.
- Feedback on the challenges with meeting some Mental Health community packages where needs are unpredictable or very bespoke, and are only for a couple of hours, which can make them hard to deliver / rota for.

Staffing

- Recruitment can still be a challenge
- Easier to recruit in the South than the North of the City?



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Previous feedback

Cost pressures

- Feedback that providers and service users are struggling with transport costs, with access to the community becoming more expensive
- Feedback that supporting people in the community with complex needs increasingly requires more skilled staff, time and resourcing
- Impact of Covid and Cost of Living

Housing

- Feedback around the challenges of access to affordable and suitable housing for service users, which can delay meeting some outcomes.



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Supported accommodation – Feedback from previous engagement



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Previous feedback from engagement

Service user needs

- Often complex – fluctuation in needs e.g. MH or substance.
- Complexity – can lead to issues with compatibility (particularly in a shared environment – having own front door preferable)
- Compatibility assessments – variable and need to share good practice
- Challenge to get timely community support from other services in a crisis or to prevent one



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Previous feedback from engagement

How we buy/commission services

- Need more flexibility in the way that we buy support - to enable providers to increase/decrease support when needed.
- This needs to be planned for at outset of someone moving in
- Improve transition planning required (costed in) – improve collaboration between providers when people move or to prevent placement breakdown
- Commissioning for outcomes / not hours of support



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Break Out Session 1

- **Current challenges and opportunities for change**
- **CSS framework – what do we want to keep and what do we want to change?**



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BREAK



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Our Analysis has shown:

- While the primary need of most service users is Learning Disabilities support, there is an increasing and growing demand for Mental Health support.
- Most people waiting for STAC have Mental Health needs.
- There is an increase in service users presenting with more complex needs, who often need more time and 1:1 support.
- As the number of older people continues to grow, there is likely to be a significant need (and demand) for more older person's focused STAC provision, including those with dementia. Some of these people will also have learning disabilities.



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STAC – Future possible models

Continue with Support to Access the Community focus but:

- Consider increased emphasis on employment / work experience and skills development support (where possible).
- Consider more integration with ‘Day Opportunity’ type services to offer more choice and flexibility for service users.
- Look at the option to commission more packages in specific localities to meet local needs and help meet demand – this may also benefit providers.
- Look to ensure there is stronger emphasis on transitions and timely move on from STAC services to better meet outcomes and free up capacity.
- Encourage the use of more direct payments and ISFs so service users can co-produce the support they want with providers to meet their assessed needs.



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Supported Accommodation – Meeting Needs

Our Analysis has shown:

- Mental Health and Learning Disability are the largest primary need cohorts.
- Demand outstrips supply (still although some improvement recently and despite increase in capacity) – due to move away from use of residential and housing crisis.
- Placement breakdown high- analysis showed 19% of SU's in Supported Accommodation had 3 or more placements within a 3 year period.
- Market gaps - complexity and when specialist support required/ Assuring transformation/forensic issues Low support. Accessible housing
- Need for housing/ housing crisis influences choice



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Supported Accommodation – possible models

Current service specification remains similar but:

- Consider integration with STAC services to offer more choice and flexibility for service users.
- Consider a pathway lead approach for each 'support need'- with responsibility of managing flow in and out of the pathway- strategic partner/share best practice/become self managing.
- Specialist providers for known protected characteristics such as black led MH support – over representative S117, female targeted support/services.
- Consider block contracts- market sustainability and economies of scale.
- Consider alternative models e.g. hub and spoke- locality approach and blocks for low, medium and high levels of support.



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Break out Session 2

- **Meeting need and improving outcomes**
- **Future service models**



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Group Feedback and Next Steps



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