

Decision Maker: Executive

**With pre-decision scrutiny from Adult Care & Health Policy
Development and Scrutiny Committee on 22 January 2020**

Date: 12 February 2020

Decision Type: Non-Urgent Executive Key

Title: Contract Award: Domiciliary Care for Discharge to Assess

Contact Officer: Deborah Cole, Integrated Strategic Commissioner
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Chief Officer: Kim Carey, Interim Director, Adult Social Care.

Ward: Not Applicable

1. REASON FOR REPORT

- 1.1 The Discharge to Assess (D2A) service commenced in October 2017 on a pilot basis funded through the Better Care Fund. The Domiciliary Care delivery element of the service was procured by the Bromley Clinical Commissioning Group (CCG) on an interim basis on behalf of the London Borough of Bromley (LBB).
 - 1.2 In July 2019 (Report No. CS18146), Executive agreed continuation of the pilot and to proceed to procurement for the Domiciliary Care element of the service for a one year contract to commence from August 2020, following which the requirement would be included within the broader procurement process for all Domiciliary Care provision from August 2021.
 - 1.3 In September 2019, it became apparent that the procurement timetable had to be brought forward due to ongoing quality and value for money issues with the CCG interim contract. Following consultation with the Portfolio Holder for Adult Care and Health Services and the Leader, with an update given to Adult Care and Health Policy and Development Scrutiny Committee in November 2019, a tender process for a LBB framework contract for D2A Domiciliary Care commenced in November 2019.
 - 1.4 This report details the outcome of the tender process and seeks award of contract to multiple providers on a call off framework to meet this requirement from March 2020 to August 2021.
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2. RECOMMENDATION(S)

2.1 Adult Care and Health Policy Development and Scrutiny Committee are asked to note and comment on this report.

2.2 Executive is recommended to:

- i) Award a Domiciliary Care for Discharge to Assess Framework contract to the providers detailed in Part 2 report paragraph 5.1 for an eighteen month period, commencing 1st March 2020 until 27th August 2021. The framework contract will operate on a call off basis with an estimated contract value of £810k per annum and whole life value of £1.215m.**

Corporate Policy

1. Policy Status: Existing Policy.
 2. BBB Priority: Supporting Independence.
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Financial

1. Cost of proposal: Estimated cost £810k per annum (estimated)
 2. Ongoing costs: recurring Cost. £405k (estimated) for 2021/22 until August 2021
 3. Budget head/performance centre: D2A Domiciliary Care
 4. Total current budget for this head: £600k in 2019/20(Para 12.5 budget overspend)
 5. Source of funding: 2019/20 revenue budget
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Staff

1. Number of staff (current and additional): N/A
 2. If from existing staff resources, number of staff hours:
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Legal

1. Legal Requirement: Statutory Requirement
 2. Call-in: Applicable
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Customer Impact

1. Estimated number of users/beneficiaries (current and projected): 754 D2A episodes of care relating to 621 service users.
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Ward Councillor Views

1. Have Ward Councillors been asked for comments? N/A.
2. Summary of Ward Councillors comments: N/A

3. COMMENTARY

- 3.1 The Discharge to Assess (D2A) service commenced in October 2017 on a pilot basis funded through the Better Care Fund. The Domiciliary Care delivery element of the service was procured by the Bromley Clinical Commissioning Group (CCG) on an interim basis on behalf of the London Borough of Bromley (LBB). The contract was with a single care provider, BeeAktive, and operates on a call off basis.
- 3.2 In July 2019 (Report No. CS18146), Executive agreed continuation of the pilot and to proceed to procurement for the Domiciliary Care element of the service for a one year contract to commence from August 2020, following which the requirement would be included within the broader procurement process for all Domiciliary Care provision from August 2021.
- 3.3 In September 2019, it became apparent that the procurement timetable had to be brought forward due to ongoing quality and value for money issues with the CCG interim contract requiring early termination of the contract and alternative providers put in place. Following consultation with the Portfolio Holder for Adult Care and Health Services and the Leader, with an update given to Adult Care and Health Policy and Development Scrutiny Committee in November 2019, a tender process for a LBB framework contract for D2A Domiciliary Care commenced in November 2019.
- 3.4 See Part 2 report for detail.
- 3.5 In bringing forward the procurement for this requirement, a Framework contract approach (similar to the current Domiciliary Care arrangements) was adopted. This has the advantage of both developing the market in advance of the broader Domiciliary Care tender expected to commence in 2020, and provides breadth and choice of provision in the interim period.

4. DESCRIPTION OF SERVICE AND SUMMARY OF THE BUSINESS CASE

- i) The Discharge to Assess (D2A) service, provides short-term care and reablement/rehabilitation in people's homes. The aim of the service is to facilitate a speedy return home from hospital and allow a full assessment of needs to take place in the home environment. It supports service users to achieve the maximum capacity to live independently through a short term intervention
- ii) The Care Act requires local authorities and partners to ensure 'people do not remain in hospital when they no longer require care that can only be provided in an acute trust'. Where people who are ready to be discharged, awaiting further care and support in the community, remain in hospital, this is referred to as Delayed Transfer of Care (DToC). The integration and better care fund planning guidance 2017-2019 includes a specific grant condition for local authorities to manage transfer of care. The condition states that all areas should implement the "High Impact Change Model" to support system-wide improvements in transfers of care. Discharge to Assess is a significant part of the High Impact Changes required.
- iii) The D2A service has had a number of positive impacts on individuals and has been shown to make a marked improvement on the Delayed Transfer of Care (DToC)

figures for Bromley. In terms of total delays across health and social care, Bromley now has the lowest number of DToC, and therefore the highest performance amongst comparator local authorities, significantly outstripping the average performance across London and England as a whole. Consequently the impact upon service users has been positive with hundreds of Bromley's most vulnerable residents being able to leave hospital without delay and return to a community setting

- iv) The D2A tender has been undertaken as a Framework on a call-off basis. The successful providers are expected to offer support that can be delivered quickly and focus on reablement. To ensure service sustainability there will be wider number of providers involved in the delivery of the service.

5 CONTRACT AWARD RECOMMENDATION

5.1 Recommended Providers for Framework Contract:

See part 2.

5.2 Estimated Contract Value: £810k per annum; £1.215m whole life value

5.2 Other Associated Costs – None

5.3 Proposed Contract Period – 1.5 Year from 1 March 2020 until 27 August 2021

5.4 Market engagement was undertaken on the 7th October 2019.

5.5 The tender was undertaken electronically using the ProContract system with bidders being required to submit both Stage 1 (SQ) and Stage 2 responses together.

5.6 The tender scoring was undertaken using the Council's standard 60:40 price / quality split and the results were fed into the Chartered Institute of Public Finance & Accountability (CIPFA) model to establish the successful bids. The quality marks for each provider are detailed in Appendix One.

5.7 The contract specification set out the requirements upon providers and the intended outcomes for users of the service. Contract performance and service user outcomes will be robustly measured by the Contract Compliance Team in conjunction with Commissioners.

5.8 The specification explained how the provision of the Discharge to Assess service will be delivered and outcomes to be achieved.

6 MARKET CONSIDERATIONS

6.1 Engagement with domiciliary care providers took place on the 7th October 2019, in order to generate interest and discuss our expectations on how we would like the service to be delivered.

6.2 The event was advertised in various media and was very well attended with approximately 18 care providers. The event contained a mix of presentations by key staff from the Council so that providers would understand Bromley's direction of travel and the tender opportunity. The event also gave care providers the opportunity

to ask question concerning the proposed service delivery and outcomes to be achieved. Overall feedback from providers was positive.

7. STAKEHOLDER ENGAGEMENT

- 7.1 Two service user satisfaction surveys were completed with people who received support through the D2A process.
- One survey was aimed at those who had just left hospital and was designed to pick up on the discharge process and the package of care they were receiving under D2A
 - The second survey took place after the social care assessment, looking at the package of care supplied under D2A but also the assessment process and service user involvement in the process.
 - Many respondents shared the sentiment that they were glad to be home and settling back into a routine.
 - When asked about the discharged process only a few participants faced delays (involving hospital transport). 88% of respondents left hospital with medication, none of them however reported a delayed discharge due to medication.
 - Service users were satisfied with the level of involvement in their care. Most of the participants said that they felt involved with their care, both directly themselves and indirectly through their family members.

8. SUSTAINABILITY AND IMPACT ASSESSMENTS

- 8.1 An Equalities Impact Assessment has been completed in relation to the wider Domiciliary Care Tender (which incorporates D2A).
- 8.2 The service model will ensure that the Council provides its duties in meeting the statutory requirements as set out in the Care Act 2014. It will aim to improve on the current offer by delivering a range of providers that have been subjected to a robust assessment of their financial and business sustainability; complemented by good CQC ratings.

9. POLICY CONSIDERATIONS

- 9.1 The Care Act 2014 promotes assurance that 'people do not remain in hospital when they no longer require care that can only be provided in an acute trust'
- 9.2 Integration and Better Care Fund Planning Guidance 2017-2019 requires health and Social care partners to work together to
- Invest in NHS commissioned out-of-hospital services;
 - Support implementation of the High Impact Change Model for Managing Transfers of Care
 - High Impact Change for – Discharge to Assess, which is described as 'Providing short-term care and reablement in people's homes.'

10. IT AND GDPR CONSIDERATIONS

- 10.1 The tender has been evaluated and undertaken in accordance with current GDPR considerations. There are no internal IT considerations as the service is contracted with external organisations.

11. PROCUREMENT RULES

- 11.1 This report seeks to appoint a number of providers to a framework for the provision of Domiciliary Care services as part of Discharge to Assess provision. The framework will have duration of 1.5 year from 1st March 2020 until 27 August 2021. The total value of the framework during this period is anticipated to be £1.215m
- 11.2 An open process was undertaken for this above-threshold, light touch service. This process has been carried out in line with the requirements of the Public Contracts Regulations 2015.
- 11.3 The Council's requirements for authorising an award of contract are covered in CPR 16. For a contract of this value, the Approval of the Executive following Agreement by the Chief Officer, the Assistant Director Governance & Contracts, the Director of Corporate Services, the Director of Finance and the Portfolio Holder must be obtained. In accordance with CPR 2.1.2, Officers must take all necessary professional advice.
- 11.4 Following the decision, an OJEU Award Notice will be issued and, as the contract value is over £25k, an award notice will need to be published on Contracts Finder. A mandatory standstill period will need to be observed.
- 11.5 The actions identified in this report are provided for within the Council's Contract Procedure Rules, and the proposed actions can be completed in compliance with their content.

12. FINANCIAL CONSIDERATIONS

- 12.1 See part 2 report.

13. PERSONNEL CONSIDERATIONS

- 13.1 There are no internal staffing implications resulting from this tender as it is fully contracted with external organisations.

14. LEGAL CONSIDERATIONS

- 14.1 The Discharge to Assess service assists the Council in discharging its obligations under The Care Act 2014 and delivering according to Integration and Better Care Fund Planning Guidance 2017-2019.
- 14.2 This report seeks to appoint a number of providers to a framework for the provision of Domiciliary Care services as part of Discharge to Assess provision as detailed in Section 5. The framework will have duration of 1 year starting 1st March 2020, with an option to extend the framework for one further year. The total value of the framework during this period is anticipated to be £1.215m.
- 14.3 A tender process has been carried out in accordance with the Public Contract Regulations 2015 and the Councils own Contract Procedure Rules as detailed in Section 11. The Councils contract award requirements are also to be complied with CPR 16 as already detailed in this report.

14.4 The Council can award the contracts as detailed and in compliance with the Councils Contract Procedure Rules.

Non-Applicable Sections:	
Background Documents: (Access via Contact Officer)	Bromley's Discharge to Assess Scheme – Outcome of the Pilot, Executive 10 th July 2019