# Agenda Item 13



Author/Lead Officer of Report: Christine Anderson, Commissioning Service Manager

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**Report of:***Executive Director, People Services* 

Report to: Co-operative Executive

**Date of Decision:** 20/4/2022

Subject:

Enhanced Supported Living Framework

Is this a Key Decision? If Yes, reason Key Decision: -	Yes X No	
- Expenditure and/or savings over £500,000	X	
- Affects 2 or more Wards	X	
Which Cabinet Member Portfolio does this relate to? Health and Social Care		
Which Scrutiny and Policy Development Committee does this relate to? <i>Healthier Communities and Adult Social Care Scrutiny and Policy Development Committee</i>		
Has an Equality Impact Assessment (EIA) been undertaken?	Yes X No	
If YES, what EIA reference number has it been given? 84		
Does the report contain confidential or exempt information?	Yes No x	
If YES, give details as to whether the exemption applies to the full report / part of the report and/or appendices and complete below:-		

## Purpose of Report:

The purpose of this report is to seek approval for the development of procurement strategy for the establishment of a local Enhanced Supported Living Framework.

The proposed local enhanced supported living framework will offer a range of services which support disabled people to live in the community and will have 4-year term, with an estimated value of £7.5m. The Enhanced Supported Living Framework would be part of a spectrum of service models to meet the needs of people who are eligible for social care support in future.

Enhanced supported living is an enhanced version of the current local supported living framework. It will be designed to support the needs of individuals who are perceived as complex by services and require support and/or accommodation.

# Recommendations:

It is recommended that the Co-operative Executive:

1. Approves the procurement strategy for providers to deliver enhanced supported living services for individuals with needs relating to complex Learning Disability /Autism as detailed and set out in this report.

2. Delegates authority to the Director of Adult Health and Social Care, in consultation with the Director of Finance and Commercial Services and the Director of Legal and Governance to agree the terms of the framework contract and award the framework contract and any subsequent call-off contracts to the successful tenderers.

3. Where no current authority exists, delegates authority to the Director of Adult Health and Social Care, in consultation with the Director of Finance and Commercial Services and the Director of Legal and Governance, to take such steps to meet the aims and objectives as detailed and set out in this report.

## Background Papers:

(Insert details of any background papers used in the compilation of the report.)

Lead Officer to complete:-			
1	I have consulted the relevant departments in respect of any relevant implications indicated on the Statutory and Council Policy Checklist, and comments have been incorporated / additional forms completed / EIA completed, where required.	Finance: Liz Gough/Ann Hardy	
		Legal: Richard Marik	
		Equalities: Ed Sexton/Bashir Khan	
	Legal, financial/commercial and equalities implications must be included within the report and the name of the officer consulted must be included above.		
2	EMT member who approved submission:	Alexis Chappell	
3	Cabinet Member consulted:	George Lindars-Hammond	
4	I confirm that all necessary approval has been obtained in respect of the implications indicated on the Statutory and Council Policy Checklist and that the report has been approved for submission to the Decision Maker by the EMT member indicated at 2. In addition, any additional forms have been completed and signed off as required at 1.		
	Lead Officer Name: Christine Anderson	Job Title: Commissioning Service Manager	
	<b>Date:</b> 7 April 2022		

# 1. PROPOSAL

- 1.1 It is proposed that the Council procures for a 4-year period a local enhanced supported living framework with an estimated value of £7.5m.
- 1.2 Enhanced supported living is for young people (aged 16 and over) and adults, with needs relating to complex Learning Disability/Autism. The individuals will be displaying behaviours that challenge services and may also:
  - have complex histories (including 'forensic' and/or offending histories) and risky behaviours.
  - have spent a long time in secure hospital or other restrictive / institutionalised settings.
  - be living in other restrictive and/or high-cost settings including out of city settings.
  - be at risk of admission to hospital, or breakdown in their current support.
  - experience complex sensory needs arising from autism.
- 1.3 Enhanced Supported Living provision must be highly resilient, able to provide intensive and skilled person-centred support that is sustainable in the long term. Providers need to foster a culture of positive values, attitudes, and ways of working, and build trust and resilience in their workforce.
- <sup>1.4</sup> Higher levels of 'non-contact' staff time are required, for training, reflective practice, staff supervision and team working. Higher ratios of management to front line staff are required, with strong and visible leadership. There is a need to retain experienced staff as part of the core team and to assist with the development of less experienced staff.
- 1.5 Enhanced supported living, differs from basic supported living, in that the staff training and experience is of a higher degree. The organisational professional support is also superior for Enhanced Supported Living, such as in house OTs, Positive Behavioural Support practitioners and Psychologists.
- 1.6 The Council has used a its own local Supported Living Framework for people with learning disabilities since 2014. However, there was a recognition that we needed to develop the market to ensure that the offer included provision of support for people with a need for a greater level of *Enhanced* support, and to contract with providers with the appropriate expertise to deliver these services. The Council's original intention was to procure a local Enhanced Framework to complement the existing Supported Living Framework. These plans were superseded by discussions with the Yorkshire and Humber Transforming Care Partnerships and a decision was made to pursue the regional option instead.
- 1.7 In 2019, Yorkshire and Humber Clinical Commissioning Groups, Local Authorities and NHS Specialised Commissioners developed a region-wide framework consisting of 11 providers to provide Enhanced Community Living Services for people aged over 16 years with high levels of complex needs.

- 1.8 The scope of the Regional Framework was to provide enhanced community living services to support people currently in hospital, or who live in the community, who may:
  - display behaviours that challenge
  - pose risks to themselves or others
  - have a history of offending
  - have experienced multiple placement breakdowns in the community
  - have spent a long time in a hospital inpatient setting
- 1.9 This Regional Framework was launched in March 2019. Sheffield City Council have called off the Regional Framework to set up the Supported Living Service at Wordsworth View and to procure bespoke, enhanced supported living packages for two individuals. To date, all the support packages have been awarded to one provider who offers enhanced training and inhouse professional support to both residents and staff. This level of expertise is unparalleled in the supported living market in Sheffield currently.

# Current position

- 1.10 The regional framework currently accessed for enhanced supported living is coming to an end on 31<sup>st</sup> March 2022 by a joint agreement between the Y&H local authorities and CCGs. Our intention is to replace the regional framework with an enhanced offering locally as use of the current regional framework is considered not to have been entirely successful and there are no plans for it to be replaced.
- 1.11 The Enhanced Supported Living Framework is an Enhanced version of the current local Supported Living Framework. It will be designed to support the needs of individuals who are perceived as complex by services and who require support and/or accommodation.
- 1.12 The proposal is therefore the development of procurement strategy for the establishment of a local Enhanced Supported Living Framework. This will offer a range of services which support disabled people to live in the community and will have 4-year term, with an estimated value of £7.5m.
- 1.13 The Enhanced Supported Living Framework would be part of a spectrum of service models to meet the needs of people who are eligible for social care support in future, particularly with a clear enablement, wellbeing and outcome focus aligned to our approach to social care in going forward.
- 1.14 It is recommended that we establish an Enhanced Supported Living Framework which would be via a 3 stage Pseudo Open tender process:
  - Stage 1 Quality and Price
  - Stage 2 Provider Presentation and panel feedback
  - Stage 3 top six scoring providers invited to submit final bid only changing in accordance with feedback.

- 1.15 This will retain the ability to enter into dialogue with bidders and to refine and improve offers ensuring best value without detriment to the quality of outcomes for the supported person. Each provider on the framework would have the opportunity of being directly awarded by rotation. This should attract a diverse range of quality providers including small, local organisations who might otherwise consider it not worthwhile joining a framework as every opportunity is otherwise subject to a mini competition.
- 1.16 There is an ongoing demand for enhanced supported living services to be set up for a small cohort of people with a learning disability and/or autism who display behaviour that challenges including those with a mental health condition. Our attention is also focused on young people coming through the Transitions Service who require specialist support in the community.

# **Options appraisal**

1.17 The options appraisal considered these options:

## Option One: Do Nothing

This would be problematic as we do not have capacity within the existing Supported Living Framework to meet the demand or with the correct expertise for the support required for people with complex needs either coming through Transitions or moving back to the City from more restrictive settings.

## Option Two:

Include a Lot in the new Framework (start date March 2023) for Enhanced Community Living Services. This would mean that there was a gap in the market for 12 months. The demand over the last 6 months for enhanced services is unprecedented and is thought to be related to the post pandemic crisis in care. We would be reliant on our existing Supported Living Framework, which is already under pressure in terms of the ability to deliver enhanced services. Alternatively, we would be making spot purchases with non-contracted providers or placing people out of city, often into high-cost residential settings.

#### Option Three:

The establishment of a local Enhanced Supported Living Framework - to bridge the gap in advance of the new Framework which will replace the Supported Living Framework. The Enhanced Supported Living Framework would be part of a spectrum of service models to meet the needs of people who are eligible for social care support in future.

- 1.18 It is recommended that we establish an Enhanced Supported Living Framework as outlined in Option 3. This would be via a 3 stage Pseudo Open tender process:
  - Stage 1 Quality and Price

- Stage 2 Provider Presentation and panel feedback
- Stage 3 top six scoring providers invited to submit final bid only changing in accordance with feedback.

# 2. HOW DOES THIS DECISION CONTRIBUTE?

- 2.1 A local Enhanced Supported Living Framework will mean that we improve the outcomes and life chances for people with complex support needs by working with specialist providers to offer them a home with support in Sheffield.
- 2.2 Sheffield City Council adopted its One Year Plan in July 2021.
- 2.3 The Plan contains 4 key areas, and the area which this proposal will contribute towards is Education, Health and Care.
- Under the Adult Social Care Strategy 2021-2030, the Vision for Adult Social Care in Sheffield is that: *'Everyone in Sheffield lives in a place they can call home, in communities that care, doing things that matter to them, and when they need it, they receive care and support that prioritises independence, choice and recovery'*
- 2.5 The Adult Health and Social Care Strategic Plan (2021 2030) outlines in its outcomes that 'Everyone in Sheffield should be able to live independently and have control and choice over decisions that affect their care and support.

# 3. HAS THERE BEEN ANY CONSULTATION?

- 3.1 Recent consultation has not been completed specifically in relation to this procurement. However, there was a robust series of market engagement activities to inform the Cabinet report in 2019.
- <sup>3.2</sup> Members of the Sheffield Transforming Care Steering Group were closely involved in developing, and fully supportive of, this framework. The group included officers from the Council, Sheffield CCG, Sheffield Health and Social Care Trust and representatives of people who use services and family carers.
- <sup>3.3</sup> 'Speak up Rotherham' who facilitated co-production work for the Transforming Care footprint held a workshop in Sheffield where people with learning disabilities and their families shared their experiences and aspirations for housing and support.
- 3.4 Robust regional consultation and co-production took place prior to the implementation of the regional framework. This included market engagement with providers, stakeholder engagement with various carer and professional groups and co-production with experts with lived experience.
- 3.5 The Enhanced Supported Living Services' specification will be closely informed

by the national Transforming Care programme and 'Building the Right Support' documentation, production of which included co-production with people with learning disabilities and their families.

# 4. RISK ANALYSIS AND IMPLICATIONS OF THE DECISION

# 4.1 Equality of Opportunity Implications

- 4.1.1 The proposals are designed to improve the resilience, availability and quality of Supported Living delivered to people who display behaviours that challenge. The resulting improvements will not impact disproportionately on any section of the population of people who require care and support.
- 4.1.2 An Equality Impact Assessment has been completed and is summarised below: Contracts for the provision of Enhanced Supported Living Services will have a positive impact for people using the services and their carers because:
  - The Framework will offer a real choice of supported living options that meets people's needs and aspirations, receiving support in the least restrictive settings that meets their needs. This will enable them to overcome barriers to full participation in their local community.
  - Different models of co-production / collaboration will be used in the procurement of complex needs support involving the individuals and their families and / or circles of support/advocates. This will ensure people have a voice and their individual needs are considered as part of the assessment of needs and support planning of their future care and support services.
  - The Framework will ensure people are supported to live in neighbourhoods where they will be supported to have a connection and feel part of their local community, and where they feel safe and welcome.
- 4.1.3 The Equality Impact Assessment (EIA) has been completed alongside an action plan and will be reviewed on a regular basis.
- 4.1.4 The commissioning of this the service should have a positive impact across all protected groups and particularly on disabled people with a learning disability and/or autism. Potential providers will be asked, in their tender response, to demonstrate how they will create a Diversity Plan, how their staffing and training reflects this process, and their ability to work with other organisations and resources to bring in specific services.
- 4.1.5 To ensure that all protected groups (e.g. BAME communities, people with physical disabilities, sensory impairment or learning disabilities, and lesbian,

gay, bisexual and transgender people) are able to access and benefit from the service equitably, the contract holder will be asked to develop an action plan on how the new service will meet the diversity needs of the clients referred to them.

## 4.1.6

The proposal is an active example of the Council's obligations under the Public Sector Equality Duty to have due regard to the need to reduce inequality between people sharing a protected characteristic (in this instance, as a learning disability) and those who do not, namely to

- eliminate discrimination, harassment and victimisation,
- advance equality of opportunity, and
- foster good relations.

# 4.2 Financial and Commercial Implications

- 4.2.1 Our LD Residential Care Budget in Sheffield for 2022/23 is circa £16.3m. The average cost of a placement for this client group is £95k per annum with our most expensive package on average being £227k per annum. This budget supports 157 clients of which 64 are out of city, costing £6.8m, of the £14.8m estimated expenditure.
- 4.2.2 If we were to move any clients back into the City, to make this contract viable and achieve savings, it would have to be some/all of the most expensive 11 clients. If we were able to bring all 11 back into the City the care cost savings would amount to around £400k (provided 1:1 care is sufficient). Some of the Out of City clients are in settings in our local authority neighbours so if any of them are within the 11 most expensive given their proximity to Sheffield moving them is highly unlikely and could likely face challenge from the families.
- 4.2.3 The other client group we have to consider in this proposal is children reaching the age of 18 who will transition to the adults' budget. The cost of these clients on the adults' budget has been significant and is varied depending on the needs of each young person. If a framework will allow us to place these young people in a less restrictive, care placement within Sheffield, that has to be a positive move for them, but we have to be mindful of the costs attached to that placement. If their needs are so significant that round the clock care and 2:1 support is required, then residential care may prove to be cheaper.
- 4.2.4 There has been a backlog of dealing with these cases because of the pandemic so the costs seen in 21/22 have far exceeded prior years' at £3.72m and are likely to settle around £2m-£2.5m in a normal year.
- 4.2.5 A placement at the higher end of this framework (£23 per hour) where the client requires 1:1 care for 24 hours per day will cost the Council £3.8k per week approx. £200k per year. Any adjustments to the number of carers required

obviously increases this cost...i.e. 2:1 care during the day (12 hours) plus 1:1 care at night would increase the cost to £5.8k per week.

4.2.6 The Councils' current financial situation deems it necessary to ensure that placements seek to reduce expenditure whilst still maintaining the needs of the person are met. In order for this framework to be successful it has to deliver care for Sheffield clients at a lower cost than they do/would cost in a spot purchase out of city residential placement. Any future placements which change the average cost or the number of people supported will increase the expenditure and will therefore not fall within the budget described above thus increasing the pressure on the Councils' budget.

## 4.3 Legal Implications

- 4.3.1 The Localism Act 2011 provides local authorities with a "general power of competence" which enables them to do anything that an individual can do as long as the proposed action is not specifically prohibited. A purpose of the Act is to enable local authorities to work in innovative ways to develop services that meet local need.
- 4.3.2 Section 5 of the Care Act 2014 provides that:

(1)A local authority must promote the efficient and effective operation of a market in services for meeting care and support needs with a view to ensuring that any person in its area wishing to access services in the market—

(a)has a variety of providers to choose from who (taken together) provide a variety of services;

(b)has a variety of high quality services to choose from;

(c)has sufficient information to make an informed decision about how to meet the needs in question.

(2)In performing that duty, a local authority must have regard to the following matters in particular-

• • •

(b)the need to ensure that it is aware of current and likely future demand for such services and to consider how providers might meet that demand;

..

(3)In having regard to the matters mentioned in subsection (2)(b), a local authority must also have regard to the need to ensure that sufficient services are available for meeting the needs for care and support of adults in its area and the needs for support of carers in its area.

4.3.3 By procuring for an enhanced supported living framework, the Council will go some way towards fulfilling its duty to meet the care and support needs of its

constituents under s4 Care Act 2014.

- 4.3.4 The procurement and award of any public contract must comply with the provisions of the Public Contracts Regulations 2015 (PCR). As an above-threshold Schedule 3 service, the enhanced supported living framework will be governed by the light touch regime (LTR) under the PCR. Under the LTR, the Council has the flexibility to use any process or procedure they choose to run the procurement, as long as it respects the mandatory requirements of the PCR: contract notice/PIN; advertisement on Contracts Finder if using a contract notice; making procurement documents available; compliance with principles of transparency and equal treatment; conducting the procurement in conformance with the information provided in the contract notice or PIN; time limits imposed on suppliers must be reasonable and proportionate.
- 4.3.5 The Council has a considerable amount of discretion around the design and structure of the award procedures for above threshold Schedule 3 contracts and may devise award procedures that take into account the specifics of the services. Such award procedure must however be at least sufficient to ensure compliance with the principles of transparency and equal treatment of suppliers and the Council must conduct the procurement and resulting award in conformity with the information in the contract notice or PIN.
- 4.3.6 In order to run a "pseudo-open" procurement procedure, the basics of any wellrun procurement exercise should be respected and the award of contracts under the framework on an "rotation" basis must comply with the principles of equal treatment and transparency. It is therefore imperative that such "pseudo" procurement procedures and award criteria are clearly stated in the tender documents and framework agreement respectively.

# 4.4 <u>Other Implications</u>

- 4.4.1 Typically a package procured through the Enhanced framework will incur higher costs than standard Supported Living provision. The intention is to use this framework for clients coming through the Transitions route (Children once they reach 16 years of age) and clients that we can find provision for who are currently in expensive Out of City provision.
- 4.4.2 It is anticipated that the new Enhanced Supported Living Framework will improve the current offer compared to out of city spot purchases for high cost residential/college/supported living both in terms of the financial impact, progression and quality outcomes for people.

# 5. ALTERNATIVE OPTIONS CONSIDERED

5.1 The other options considered were to do nothing and be reliant on the existing Supported living Framework or to include a Lot for enhanced supported in the April 2023 Working Age Framework.

- <sup>5.2</sup> A local framework can be wider than the regional Framework i.e. include prevention, return from out of city residential care, help with transition and other complex needs. An Enhanced Framework:
  - will facilitate smoother transition from an enhanced service to the standard framework where the same organisation provides both
  - will allow small local organisations with local community-based networks who did not wish to bid to be on the wider regional framework to support people who display behaviours that challenge
  - can be re-opened our discretion, offering more local control over the market
  - will allow closer control over price
  - builds on the success of positive relationships with local framework and current non-framework providers

# 6. **REASONS FOR RECOMMENDATIONS**

- 6.1 It is anticipated that the recommended option will deliver the following outcomes:
  - The Council can meet its statutory duties under the Care Act 2014.
  - The market will be stabilised and diversified, with increased provision to meet the needs of the cohort of people with a learning disability/autism who have complex support needs.
  - The Council will be able to ensure Value for Money by agreeing a ceiling on the hourly rate with contracted providers and entering into a dialogue on a case-by-case basis for each call off.
  - The Council can be assured of the quality of the provision it has commissioned and will monitor the quality outcomes under the terms of the Framework
  - People will be supported to live within their local community with the right level of support