



## Report to Policy Committee

### Author/Lead Officer of Report

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**Tel:** 0114 205 7142

**Report of:** Director of Adult Health and Social Care

**Report to:** Adult Health and Social Care Policy Committee

**Date of Decision:** 15<sup>th</sup> June 2022

**Subject:** Commissioning and Procurement of Temporary Care Home Beds

Has an Equality Impact Assessment (EIA) been undertaken?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
If YES, what EIA reference number has it been given? <b>986</b>				
Has appropriate consultation taken place?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Has a Climate Impact Assessment (CIA) been undertaken?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Does the report contain confidential or exempt information?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
If YES, give details as to whether the exemption applies to the full report / part of the report and/or appendices and complete below: -				
<i>"The (<b>report/appendix</b>) is not for publication because it contains exempt information under Paragraph (<b>insert relevant paragraph number</b>) of Schedule 12A of the Local Government Act 1972 (as amended)."</i>				

### Purpose of Report:

The purpose of this report is to seek Health and Social Care Policy Committee approval for the re-commissioning and procurement of a number of Somewhere to Assess Pathway Beds and Short-Term Beds.

The current contracts expire on 11<sup>th</sup> September 2022.

**Recommendations:**

That the Adult Health and Social Care Policy Committee:

- Approve the commissioning and procurement of the contracts detailed in this report, noting the budget provision, as set out in the financial implications section of the report.
- Delegate authority to the Director of Adult Health and Social Care in consultation with the Director of Legal and Governance Services and Director of Finance and Commercial Services to approve the procurement strategy, conduct the procurements and award the resulting contracts

**Background Papers:**

The Sheffield City Council Short-Term Care Strategy for Older People including the engagement report can be found at Appendix A.

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: Ann Hardy
		Legal: Tim Hoskin
		Equalities & Consultation: Ed Sexton
		Climate: <i>(Insert name of officer consulted)</i>
	<i>Legal, financial/commercial and equalities implications must be included within the report and the name of the officer consulted must be included above.</i>	
2	<b>SLB member who approved submission:</b>	<i>John Macilwraith</i>
3	<b>Committee Chair consulted:</b>	<i>Councillor George Lindars-Hammond and Councillor Angela Argenzio</i>
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 Committee by the SLB member indicated at 2. In addition, any additional forms have been completed and signed off as required at 1.	
	<b>Lead Officer Name:</b> Joanne Knight	<b>Job Title:</b> Strategic Commissioning Manager (Dementia and Older Adults)

## 1 PROPOSAL

- 1.1 It is proposed that a commissioning and procurement exercise takes place to source Somewhere to Assess Pathway and Short-Term Care Beds.
- 1.2 In partnership with Sheffield Clinical Commissioning Group (SCCG), 40 Somewhere to Assess Beds (S2A) which:
- Offer a care home bed outside of a hospital setting to assess the longer-term needs of a person.
  - Offer a care home bed when a person is no longer able to safely stay at home until their longer-term needs are assessed
  - Use a dispersed purchasing model so there are more beds available in local areas
- 1.3 In partnership with Sheffield Clinical Commissioning Group a framework of providers who can provide S2A beds on a spot purchase basis, seven respite and emergency beds which:
- Allow an unpaid carer or a representative/care manager to pre book a respite bed for the unpaid carer to take a holiday or break from their caring role
  - Offer a safe and secure place for a person to stay in an emergency where they cannot stay in their usual place of residence
  - A framework of providers who can provide respite and emergency beds on a spot purchase basis

## 2 BACKGROUND

- 2.1 Many care homes in Sheffield provide accommodation with care to people over the age of 65. Most provide a range of permanent placements, and some provide temporary accommodation both on a private basis and via contract with the Sheffield Clinical Commissioning Groups and Sheffield City Council (SCC).
- 2.2 These differ slightly from the arrangements for working age adults, who have a different range of options open to them. The provision of temporary care home beds to this group are therefore not included in this report.
- 2.3 Temporary or short-term accommodation is provided for several reasons including to support hospital discharge, to facilitate an emergency at a person's home, for rehabilitation or to facilitate a break for an unpaid carer.

2.4 The current range of contracted short-term beds for older people in Sheffield are as follows (those highlighted are the subject of this report): -

<b>Type of arrangement</b>	<b>Nursing/residential</b>	<b>Funded by</b>	<b>Purpose</b>	<b>Current Contract Arrangements</b>
Somewhere else to assess beds (S2A)	Nursing and residential	Jointly funded by SCC/SCCG	Assess the longer term needs of a person outside of the hospital/crisis situation	Block contract for 40 beds which expires in September 2022
Intermediate care beds	Nursing	Sheffield Teaching Hospitals NHS Foundation Trust (STH)	Provide temporary accommodation for rehabilitation and recovery following illness or crisis	Block contract for between 88-108 beds, this is midway through a tender exercise
Respite beds	Residential	SCC	To facilitate a break for an unpaid carer either prebooked or when required	Block contract for 4 beds which expires in September 2022
Emergency beds	Residential	SCC	To accommodate a person in a crisis situation who cannot stay safely at home	Block contract for 3 beds which expires in September 2022
Community beds	Residential	STH	To accommodate people from hospital to wait for an independent home care package or short-term intervention service	Block contract for 47 beds which expires in May/June 2022

- 2.5 The impact of COVID on the care home market has been significant and this has brought further attention to many of the issues that already existed such as recruitment and retention, high staff turnover and increasing numbers of vacancies. The market is being supported through these issues by the care homes teams in both organisations.
- 2.6 This procurement now offers the whole market an opportunity to develop business models to accommodate temporary arrangements alongside the permanent care beds they have always offered.
- 2.7 In the longer term we aspire to jointly commission, with health colleagues, all the temporary bed arrangements and create a more flexible, outcomes focussed and cost-effective approach. However, this will require further scoping, planning, co-commissioning across partner organisations, and investment sharing agreements along with further engagement with individuals, family members and carers to ensure individuals and carers views inform a longer-term approach.
- 2.8 In the interim, therefore, there is a need to make some provision in the medium term so that we have an offer of short-term beds in the City as the current contracts referred to in this report expire in September 2022.
- 2.9 This medium-term arrangement will also offer time to understand the outcome of other initiatives that are being introduced and the impact these have on the need and demand for short term care home beds. These initiatives include the development of the NHS virtual wards, the introduction of the enablement service in social care and the development of the care and wellbeing home support service.
- 2.10 The proposals in this report do however start to work towards the joint ambition of aligning all short-term arrangements by bringing together some of the beds into one procurement exercise and aligning the contract ends dates. This will help create further flexibility and enable the care home market to understand the types of support required, begin to redevelop their business models, and create capacity which can meet the demand for this range of temporary services.

### **3 THE NEED FOR CHANGE**

#### **3.1 Somewhere Else to Assess (S2A)**

- 3.1.1 The [Hospital discharge and community support guidance - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/guidance/hospital-discharge-and-community-support-guidance) was published in March 2020 (last updated 31<sup>st</sup> March 2022) and set out around 4 clear pathways with an intention to support more people to be discharged to their own home

1.

- 3.1.2 It is clear from the guidance that the default pathway should always be home, however, there is also a recognition that there are circumstances where another community setting is more appropriate to be able to assess the longer-term needs of a person.
- 3.1.3 SCC and SCCG commissioned S2A beds for this purpose and these beds have been in place since 2019. During this time there have been various iterations of the model of provision, they have however always been a joint arrangement with Sheffield CCG (SCCG)
- 3.1.4 A review of S2A was undertaken in March 2022 and found that although the assessment outside of hospital remains a valid and needed option, there are circumstances where undertaking this at home is not an option and there is a need for a place where people can recover and be assessed for their longer-term needs which is away from home but outside of an acute setting
- 3.1.5 The review concluded there was very little evidence that the current model and specification needs major development. Some amendments are required to ensure the specification reflects recent national and local planning and operating guidance; however, the purchasing model does need change to better reflect the needs of both individuals using this and the health and social care system. This procurement will address the issues identified
- 3.1.6 The review concluded the four principal areas where further development is needed, are as follows.

Issues identified	How this procurement will address this issue
Further development of a person-centred approach particularly for those with dementia e.g., reducing the number of moves a person must make	Creating more dispersed sites geographically will allow an opportunity for individuals to be closer to home. If their assessment suggests they need ongoing care in a care home, it is more likely their temporary stay could be accommodated longer term in the same place.  A framework of providers will be established which will reduce the number of failed admissions The principles of a person-centred approach will form part of the specification and the standard operating procedure

<sup>1</sup> <https://www.gov.uk/government/publications/hospital-discharge-service-policy-and-operating-model/hospital-discharge-service-policy-and-operatingmodel#:~:text=Discharge%20to%20assess%20model%20%E2%80%93%20pathways,their%20long%2Dterm%20care%20needs.>

<p>Contracts only available in 4 homes which limits availability and choice</p> <p>Home closures due to infection control have meant a significant number of voids</p>	<p>A dispersed model of provision means smaller clusters of beds available in different geographical areas</p> <p>Alongside this will be a framework of providers who will be available to provide S2A support on an as and when basis</p>
<p>Lack of dedicated wrap around support for the individual and family and systems and processes which need further development</p>	<p>There will be a review and redevelopment of the standard operating procedure, which is jointly agreed between SCC, STH and SCCG.</p> <p>This will clarify roles and responsibilities and the introduction of new processes and systems to ensure effective operation of the beds e.g., data collection, brokering the right service and contract management.</p>
<p>Strengthen the relationship with providers</p>	<p>All providers have been notified about the system for registering their interest in future tenders</p> <p>Meet the buyer events will take place before the procurement is live.</p> <p>The ongoing relationship with providers will continue through the quality and performance team in Adult Social Care Commissioning and Sheffield CCG.</p>

## 3.2 Respite and Emergency beds

3.2.1 The respite and emergency beds have been in place since 2015 with one organisation who use a number of their care homes sites to provide this service. They are under contract and funded by SCC.

3.2.2. Over the past 18 months the beds have not been well used, for this reason the number of beds available was reduced from 14 to 7 in April 2022.

3.2.3 The reason for the under usage is likely to be because of multiple factors including the impact of COVID, beds being closed due to infection control measures, and people having limited confidence in care homes (linked to COVID) as well as indicating that they are no longer the type of arrangement that people would like

3.2.4 A short-term care commissioning strategy for older people was developed in 2021, it was developed using consultation with a number of people with lived experience, paid

workers, and unpaid carers. The strategy and engagement report are noted in Appendix 1 and Appendix 2.

### 3.2.5

For respite care it identified the need to provide: -

- a greater variety of respite options
- increased flexibility in delivery
- more capacity and improved confidence in the services that are available
- improved information on availability of respite options

### 3.2.6

The strategy also identified the need to improve the emergency breaks offer by: -

- providing support options that are available and responsive when needed
- offering short term overnight support in a range of settings
- ensuring enough availability of urgent and rapid access options

### 3.2.7

For some people however the traditional support offered by a care home was still important and this is evidenced by the fact that some people still choose to use the current beds and really value them.

### 3.2.8

This procurement will be the first stage in building the model of short-term support by redeveloping respite and emergency options in care homes.

## 4

### **HOW DOES THIS DECISION CONTRIBUTE?**

#### 4.1

As well as responding to the review of the S2A model of support and the Sheffield City Council Commissioning Strategy for Short Term Care for Older People this proposal also assists the council to meet its statutory duties under the Care Act 2014 in the following ways:

#### 4.2

##### **The Care Act 2014 Section 2(1) - Preventing needs for care and support**

- (a) contribute towards preventing or delaying the development by adults in its area of needs for care and support.
- (b) contribute towards preventing or delaying the development by carers in its area of needs for support.
- (c) reduce the needs for care and support of adults in its area.
- (d) reduce the needs for support of carers in its area.

#### 4.3

##### **The Care Act 2014 Section 5(1) - Promoting diversity and quality in provision of services**

- (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

#### 4.4

##### **The Care Act 2014 Section 6(1) - Co-operating generally**

- (a) their respective functions relating to adults with needs for care and support,
- (b) their respective functions relating to carers, and
- (c) functions of theirs the exercise of which is relevant to functions referred to in paragraph (a) or (b).

#### 4.5 **The Care Act 2014 Section 8(1)(2)(3) – Meeting Needs**

- (1)(a) accommodation in a care home or in premises of some other type.
- (2) The following are examples of the ways in which a local authority may meet needs under sections 18 to 20—
  - (2)(a) by arranging for a person other than it to provide a service.
  - (3) “Care home” has the meaning given by section 3 of the Care Standards Act 2000.

#### 4.6 This proposal supports and links to the commitments stated in the **Adult Social Care Strategy, “Living the Life you Want to Live” 2021** in particular

- Commitment 2 - Provide temporary assistance to help people regain some stability and control in their life following ill health or crisis by ensuring that when individuals are assessed they are given an opportunity to maximise their potential before doing so.
- Commitment 3 - Provide care and support with accommodation where this is needed in a safe and supportive environment that can be called home by offering a safe and enabling environment which supports their recovery.

#### 4.7 This proposal has a strong link to the **Local Area Committees** and their **Empowering Communities** work. In particular

- Empowering communities – building community-based resources
- Improving health and wellbeing – supporting the local population to recover and regain skills they may have lost through ill health or crisis and supporting carers to maintain their health and wellbeing

#### 4.8 **Climate Change** - This procurement supports Sheffield City Council in its commitment to be a Net Zero city by 2030. The procurement will support low carbon investment by testing out providers who support the need for climate consideration in their business model. It will also actively seek local community provision to reduce the carbon omissions created by prolonged travel.

#### 4.9 **Financial sustainability** – By improving the way the services are provided and using a dispersed model of support there are likely to be reduced costs in failure demand, in voids and vacancies and improved quality which also reduces cost.

#### 4.10 **Sheffield’s 1 Year Plan** – This procurement will support and help deliver the 1-year plan by investing in Enablement Support, which assists people to live more actively and independently with time to recover, gain, regain or maintain skills, health, and wellbeing.

### 5. **HAS THERE BEEN ANY CONSULTATION?**

#### 5.1 As part of the review of the S2A beds, consultation took place with a wide range of stakeholders, through interviews and surveys. This included providers, SCC and NHS staff and a limited number of people and their carers who had used the service. It was more difficult to gain feedback from people using the service as this is only a temporary arrangement for approximately 28 days.

- 5.2 The Short-Term Care Strategy for Older People included consultation with a wide range of stakeholders who co-developed the recommendations.
- 5.3 A summary of the outcome of these consultations can be seen in the further information section where there is a summary of the engagement report

## **6. RISK ANALYSIS AND IMPLICATIONS OF THE DECISION**

### **6.1 Equality of Opportunity Implications**

- 6.1.1 As a Public Authority, we have legal requirements under the Equality Act 2010. This incorporates the Public Sector Equality Duty, which includes the requirement to have due regard to the need to *advance equality of opportunity between those who share a relevant protected characteristic and those who do not.*
- 6.1.2 The proposal is considered to be supportive of this provision, as it advances equality of opportunity specifically for people sharing the protected characteristics of Age and Disability (as well as other protected characteristics).
- 6.1.3 The proposal is also consistent with the Council's wider equality impact assessment through its support for people with unpaid caring responsibilities.
- 6.1.4 In November 2020, Carers UK released research into carers' experiences during the COVID-19 pandemic which showed that "More than three quarters (78%) of carers reported that the needs of the person they care for have increased recently." The proposal for respite care will support carers and offer the opportunity to pre book a break from their caring role
- 6.1.5 Whilst the provision of care home support does not meet the needs and aspirations of all carers, there are some who prefer this traditional model of support therefore this proposal will ensure this group still have the opportunity to use the type of support that best meets their needs.
- 6.1.6 An Equalities Impact Assessment has been undertaken and there are no adverse effects as a result of this proposal.

### **6.2 Financial and Commercial Implications**

#### **Finance**

- 6.2.1 The anticipated cost of this proposal is approx. £1.3m per annum, £1.14m for S2A (50/50 cost split between SCC and SCCG) and 200k per annum for respite and emergency beds funded by SCC
- 6.2.2 The funding will be from existing budgets and the existing financial agreement between the SCCG and SCC for S2A will be reviewed and updated as necessary

**Commercial and Procurement**

- 6.2.3 This proposal constitutes a Social Services procurement and as such the service/s can be procured under the Light Touch Regime in accordance with regulation 74 of the Public Contracts Regulations (PCR) 2015. We intend to adopt a bespoke open tender process, in accordance with Council standing orders and fully compliant with PCR 2015.
- 6.2.4 The existing contracts ends in September 2022. The re-procurement and new commissioning are being undertaken in line with advice and guidance from Commercial Services and the procurement team at Sheffield CCG.
- 6.2.5 The contract will be for up to 2 +2 years to allow the bidders some stability but also give time for further development of a city offer for short-term care home beds.
- 6.2.6 The price for the beds will be set at SCC standard rate, the contract will be a block purchase arrangement so providers will be paid for any voids. Temporary beds by their nature have additional administration costs and a guaranteed income arrangement helps to cover these costs
- 6.2.7 All framework providers will be paid on a spot purchase basis and used as and when required
- 6.2.8 Bidders will be selected on quality and geographical location to ensure there is an even spread across the city
- 6.2.9 The changes this proposal brings to the existing arrangements can be seen below

Current Service	Proposed Change
<p>S2A beds</p> <ul style="list-style-type: none"> <li>• 40 beds in 4 care homes.</li> <li>• 3-year contract</li> <li>• Only available from hospital</li> <li>• No framework for spot purchases</li> </ul>	<ul style="list-style-type: none"> <li>• Tender for a 2-year contract block contract with the option to extend for a further 2 years following review</li> <li>• Improve the specification based on the recent review of the S2A model and feedback from stakeholders</li> <li>• Increase the number of sites available from 4 up to a maximum of 20 across a wide geographical area</li> <li>• Open the pathway to facilitate assessments from the community where this is deemed appropriate. (There will be a charge to the individual for this in some circumstances)</li> <li>• Create a framework of providers who can undertake work on a spot basis should capacity be insufficient</li> <li>• Create a framework of providers who can offer enhanced S2A (care needs over and above</li> </ul>

	<p>those which are classed as standard). This will largely be used by the CCG and at a different fee rate</p> <ul style="list-style-type: none"> <li>• Ensure the configuration of the beds is based on demand (no of residential as opposed to nursing beds)</li> </ul>
<p>Respite and emergency beds</p> <ul style="list-style-type: none"> <li>• 7-year contract</li> <li>• Specification which is 7 years old</li> <li>• Currently either respite or emergency</li> </ul>	<ul style="list-style-type: none"> <li>• Tender for a 2-year block contract with the option to extend for a further 1+1 years following review</li> <li>• Ensure there is a geographical spread</li> <li>• Improve the specification based on feedback from carers and social care workers</li> <li>• Create more flexible use of the beds so they can be used for respite or emergencies</li> </ul>

6.2.10 The proposed timescale for undertaking this procurement is as follows

Stage in Procurement Process	Dates
Issue of Invitation to Tender	17th June 2022
Clarification Deadline	4 <sup>th</sup> July 2022
Deadline for submission of tenders	18 <sup>th</sup> July 2022 12pm
Evaluation of tenders	19 <sup>th</sup> July – 5 <sup>th</sup> August
Notification of result of evaluation	8 <sup>th</sup> August
Standstill Period	8 <sup>th</sup> August
Award decision	18 <sup>th</sup> August
Anticipated contracts start date	September 2022

### 6.3 Legal Implications

6.3.1 The Council has the statutory power to make this provision, under the Care Act 2014. The 2014 Act provides the legal framework for the provision of adult social care, and it includes general duties to promote individual wellbeing and to promote integration with health services.

6.3.2 In terms of the Council's duties to the individuals concerned, the Council has a duty under section 18 of the Act to meet assessed needs for care and support.

6.3.3 The Council has a discretion not to charge, notwithstanding its normal policy. In this

case, the short-term nature of the S2A arrangement, and the manner in which the Council is deciding to meet the assessed needs, justifies not charging (and any departure from charging policies) for these interim periods only. It is advised that care should be taken to ensure the individuals concerned are clear that any waiving of charges is on a time limited basis and will be revisited when care and support is provided in other ways. The discretion not to charge does not apply to the respite beds which are pre bookable and part of an assessed care need

- 6.3.4 The Director of Adult Social Services will ensure that the arrangements for the recovery of the Council's costs from the SCCG are robust, transparent, and enforceable, before awarding the contracts. If no other suitable mechanism is available, this should be achieved by putting in place a suitable grant funding agreement.
- 6.3.5 The proposed procurement will be compliant with both the Public Contracts Regulations 2015 (PCR) and the Council's Standing Orders for Contracts. Given the nature of the procurement, the 'Light Touch' procurement regime under PCR regulations 74 – 76 is available.
- 6.3.6 The terms and conditions for the S2A contract will be the NHS standard terms and conditions, this is currently the case with the existing contract as advised by SCCG.
- 6.3.7 The terms and conditions for the respite and emergency beds will be the standard terms and conditions used by the Council and as advised by Commercial Services.
- 6.3.8 If there is a change in service provider this will have an impact on the staff providing the service and TUPE may apply although it is unlikely in this scenario. This will be drawn to the bidder's attention so that they can consider the potential impact of TUPE and current providers will be required to share information as appropriate in accordance with their existing contracts and the TUPE legislation.

## **6.4 CLIMATE IMPLICATIONS**

- 6.4.1 *This procurement supports Sheffield City Council in its commitment to be a Net Zero city by 2030. The procurement will support low carbon investment by testing out providers who support the need for climate consideration in their business model. It will also actively seek local community provision to reduce the carbon omissions created by prolonged travel.*

## **7. ALTERNATIVE OPTIONS CONSIDERED**

- 7.1 In making the recommendations two other options were considered and rejected:

- 7.1.1 *i. Continue with the existing services*

This alternative was rejected because:

- It does not respond to feedback gathered
- It does not allow us to update the current service specifications and
- It does not meet with legal and commercial regulations

ii. *End the existing services and invest in other new provision*

7.1.2 This alternative was also rejected because:

- There would be a gap in provision which would have implications hospital discharge
- There would be insufficient capacity for unpaid carers to pre book a break from their caring role

## 8. REASONS FOR RECOMMENDATIONS

8.1 The provision of these beds will: -

- Provide a suitable and locally based provision where individuals can have their long-term needs assessed outside of an acute or unsafe setting
- Support and enable where possible the individual to return home if they can do so
- Support the discharge of people out of acute settings when they are fit for discharge
- Offer a pre bookable respite care option for unpaid carers to plan a break from their caring role
- Offer emergency provision in a crisis or other situation where an individual cannot stay at home
- Offer locally based provision closer to family and friends
- Be more person centred in approach reducing the number of temporary moves a person has

## 9. APPENDICES

### Appendix 1

Short Term Care Strategy for Older People



adult-short-term-care-strategy.pdf

### Appendix 2

Short Term Care Engagement Report



sheffield-stc-engagement-report-21-december.pdf



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