



## Report to Policy Committee

### Author/Lead Officer of Report:

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Commissioning and Partnerships

**Tel: 07824 361924**

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

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

**Date of Decision:** 21st September 2022

**Subject:** Approval to Recommission Supported Living, Respite and Day Services provision for Working Age Adults

|   |     |                                     |    |                                     |
|---|-----|-------------------------------------|----|-------------------------------------|
| 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? 1211   |     |                                     |    |                                     |
| Has appropriate consultation taken place?                   | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/>            |
| Has a Climate Impact Assessment (CIA) been undertaken?      | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/>            |
| Does the report contain confidential or exempt information? | Yes | <input type="checkbox"/>            | No | <input checked="" type="checkbox"/> |

### Purpose of Report:

The purpose of this report is to secure approval to commission the delivery of care and support services for adults who have a disability. It is proposed to commission a **Working Age Framework** to include Supported Living, Activities Outside the Home (day services) Short Breaks/Respite services

The current Supported Living Framework is due to expire in March 2023 and commissioning provides us with an opportunity to make changes that will enable a more sustainable & flexible suite of services to meet people's needs and to incorporate Supported Living, Day Services and Respite services into a new Working Age Framework.

This report will also highlight the risks faced by Sheffield City Council regarding its statutory duty under the Care Act, to provide an effective and efficient market for the delivery of services to people with disabilities.

**Recommendations:**

It is recommended that the Adult Health and Social Care Policy Committee:

- Approves the commissioning of the Supported Living Service (which includes Supported Living, Short Breaks/Respite and Day Services provision for Working Age Adults) by way of a Framework/Dynamic Purchasing System with a term of 10 years and an estimated value of £500m, as set out in this report.
- Notes and endorses the South Yorkshire Market Position Statement – Housing with Support for People with a Learning Disability and/ or Autism

**Background Papers:**

Appendix 1: 2022 Market Position Statement- Housing with Support for People with a Learning Disability and/or Autism

Appendix 2: Delivery Action Plan

Appendix 3: 'Golden Threads' document

Appendix 4: Summary of Consultation and Engagement with professionals and providers

Appendix 5: Equality Impact Assessment 1211

Appendix 6: Financial options for the supported living services

Appendix 7: Climate Impact Assessment

| <b>Lead Officer to complete:-</b> |  |
|-----------------------------------|--|
| 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: Richard Marik   |
|                                   | Equalities & Consultation: Ed Sexton   |
|                                   | Climate: Jessica Rick  |
|                                   | <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>   |
|                                   | Alexis Chappell  |

|   |   |   |
|---|---|---|
| 3   | <b>Committee Chair consulted:</b>   | <i>Councillor Angela Argenzio<br/>Councillor George Lindars-Hammond</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><br>Caroline Stiff |   | <b>Job Title:</b><br>Commissioning Officer                              |
| <b>Date: 7<sup>th</sup> September 2022</b>  |   |   |

## 1. PROPOSAL

- 1.1 The purpose of this report is to secure approval to commission care and support services for adults who have a disability. We propose to commission a **Working Age Framework** to include Supported Living, Activities Outside the Home (day services) and Short Breaks/Respite services with a term of 10 years and an estimated value of £500m. The Supported Living, Day Services and Respite services are all currently delivered under separate contractual arrangements, and it is proposed that each service is incorporated under one framework agreement (Working Age Framework).
- 1.2 The current Supported Living Framework is due to expire in March 2023 and commissioning provides us with an opportunity to make changes that will enable a more sustainable & flexible suite of services to meet people's needs.

## 2.0 BACKGROUND

- 2.1 Our Adult Health and Social Care Vision is that:
- 'Everyone in Sheffield lives in a place they can call home, in communities that care, doing things that matter to them, celebrated for who they are – and when they need it, they receive care and support that prioritises independence, choice, and recovery.'*
- 2.2 This proposal is in alignment with this vision.
- 2.3 We have developed an Adult Health and Social Care Strategy and delivery plan to set out our Vision for 2022 to 2030. Called 'Living the life you want to live', it is about how we work together to help the people of Sheffield to live long, healthy and fulfilled lives.
- 2.4 The Adult Health and Social Care Strategy has 6 commitments, and this report primarily aligns to:
- Commitment 1: Support people to live a fulfilling life at home, connected to the community and resources around them, and provide care and support where needed.
- 2.5 We have identified several drivers for change in the local offer of community and 'day activities', and how they are accessed so that individuals can achieve personal development, social inclusion, and wellbeing outcomes. These have been identified through engagement with people with a Learning Disability and/or Autism, Carers, Providers, and Professionals.
- 2.6 Through this recommission, Adult Health and Social Care will be further making a shift towards outcomes-based commissioning.

|      |  |
|------|--|
| 2.7  | <p>It is planned that through the recommission, we will embed across all supports commissioned:</p> <ul style="list-style-type: none"> <li>• An outcome focused, strength-based, community connected, and person led approach so that Adults can live the life they want to live and have positive experiences of support and care.</li> <li>• Co-production and co-design</li> <li>• Flexibility, innovation, and choice</li> <li>• Excellent quality, inclusive, socially valued and culturally appropriate support and care.</li> <li>• Support and value of our social care workforce</li> <li>• Best Value</li> </ul> |
| 2.8  | <p>There will be a requirement for all providers to be innovative and develop new, flexible approaches in partnership with Adults with a Disability and their families and wider stakeholders. For example, there are opportunities for providers to develop community hubs in the local area and establish networks between the different supported living and day service settings.</p>  |
| 2.9  | <p>It is our intention that the recommission of services are suitable for people with a learning disability, autism spectrum disorder (ASD), Physical Disabilities (PD) and Sensory Impairment (SI). In addition, that there are appropriate services in place to meet the needs of younger people transitioning from support funded by Children’s services.</p>   |
| 2.10 | <p>We recognise that providers often work in isolation across different types of service provision that an Adult may need to achieve their outcomes. It’s our intention through this recommission to encourage providers to be able to support an individual to achieve their outcomes, across the whole of their lives, and crucially across provision instead of each aspect of someone’s day being delivered by a separate service.</p>   |
| 2.11 | <p>For example, enabling individuals’ greater choice to stay at home or take part in activities in their local community or community of interest rather than travelling to a building-based activity every day. Its our intention to encourage a holistic and person-centred approach, which improves outcomes and promotes continuity of support.</p>  |
| 2.11 | <p>This Commission will involve a transformation of the existing arrangements, to ensure that the Council has the services available to deliver support and care which can improve individuals outcomes, wellbeing and independence as well as increase the diversity of provision to offer more choice to individuals, their families and proxies. Furthermore, which values our social care workforce and brings long term sustainability and stability to the social care market so that individuals and families can experience continuity of care.</p>  |

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### **3 SCOPE OF THE RECOMMISSIONING**

- 3.1 The Council currently supports c1649 people who have a Learning Disability. In addition, there are c1572 people who are supported due to their Mental Health condition, Physical Health or for some other reason (such as early onset dementia or sensory impairment). The budget for services which support the individuals is £76.4 million for 22/23.
- 3.2 Individuals with support needs present to the Council at different ages, although people with a disability do usually transition from Children's Services.
- 3.3 Care and support services can be funded via a Direct Payment (where the individual has an agreement with the provider) or via payment from the Council (subject to the appropriate agreement with the provider).
- 3.4 Sheffield City Council is responsible for supporting around 7600 vulnerable people in care settings or in their own home. This is around 1.6% of the adult population of Sheffield.

#### **3.5 Supported Living**

- 3.5.1 This describes support that is delivered in a person's own home. The types of accommodation, and support which is offered varies greatly.
- 3.5.2 A key variation is the type of accommodation-based service/scheme. There are supported living 'schemes/services' where a group of individuals share the support and staff team. This can be in a large 'group home' or in a block of self-contained flats. A supported living service can also be delivered in a person's own home.
- 3.5.3 Providers of supported living services are registered with the Care Quality Commission (CQC), for homecare/personal care or supported living. As part of the CQC registration, these providers will state that they provide support to people with a Learning Disability.
- 3.5.4 The CQC and the Adult Health and Social Care Quality and Performance team monitor the quality of these services.
- 3.5.5 The Supported Living Framework for people with a learning disability and/or autism as it is currently commissioned has been in place since 2017 and is due to expire in March 2023.
- 3.5.6 There are 32 providers on the Framework, 21 of whom are currently 'active', or providing support. These providers deliver services in supported living 'schemes', and in people's own properties as well as providing community outreach. They deliver services in an integrated way, working with multiple professionals, and enabling people receiving support to meet individual outcomes.

- 3.5.7 The Framework providers deliver around 21,024 hours of 1:1 support to 590 people per week; and around 7,707 hours of 'shared' support to 302 people per week.
- 3.5.8 We will aim for existing supported living providers to continue to be able to deliver the support to people they already support, if they are not successful in the tender process to enable continuity of provision for individuals involved, but seek to instead ensure a focus on individuals outcomes through a review of support arrangements in place.

### **3.6 Activities Outside the Home - Day Services**

- 3.6.1 As an alternative, to support provided in the home, on average 850 people receive support from a day service provider.
- 3.6.2 These are services which are delivered outside of the home and are typically delivered during the daytime. These services are delivered in varying situations, including building based and on a more 'outreach' basis.
- 3.6.3 These services provide vital carer respite, as well as care and support for the individual and opportunities to engage in activities and meet with friends. For these services, providers typically charge on a sessional basis, for a day or half-day, or on a 1:1 basis.
- 3.6.4 There are approximately 40 providers from the independent sector who deliver these services outside of people's homes.
- 3.6.5 The quality of day service provision has not been monitored by the local authority in the past and providers are not required to be registered with the CQC. Through implementation of the Adult Health and Social Care Change Programme, its planned to monitor the quality of provision through the new framework.
- 3.6.6 The Council currently has several individual rolling contracts in place with providers delivering day services, and there are also several services being funded by Direct Payments. It is intended that all new arranged contracts for day services will be sourced through the new Working Age Framework on its commencement.
- 3.6.7 The Council wishes to be able to support day activities which meets the outcomes of individuals it supports and enables individuals to live independent fulfilled lives. The Council wishes to have in place an arrangement to enable it to fulfil its obligations to shape the market, and ultimately ensure that there is a choice of excellent quality and appropriate support for people with a range of disabilities to choose from.

### **3.7 Activities Outside the Home - Respite/ Short Breaks**

- 3.7.1 Respite provision is typically provided on a nightly basis, generally in a building. This provision can be on a planned basis (for example, to enable family carers to go on holiday or take a break) or emergency basis (where family carers are having a crisis).
- 3.7.2 Building based (where an individual goes to a building for a stay) is typically based in a registered care home. These services are monitored by the CQC and the Council's Quality and Performance team.
- 3.7.3 The market for Respite/ Short Breaks provision for people with learning disabilities has remained unchanged for several years, with six providers, three of whom provide a service within a residential setting, the other three using a Supported Living model. We know that there is a gap in the market for younger people with autism.
- 3.7.4 Respite services are currently used by c168 individuals.
- 3.7.5 The arrangements for payments are varied with two providers as Council Arranged Services and four which are paid via a Direct Payment. All six providers are registered as non-standard short-term residential services and are monitored by the CQC and Quality & Performance team.
- 3.7.6 The Council currently has several individual placement contracts in place with providers delivering respite services and there are also several services being funded by Direct Payments. It is intended that all new council arranged contracts for respite services will be sourced through the new Working Age Framework on its commencement.
- 3.7.7 We intend to engage with the market to ensure we have sufficient quality and choice for individuals and their families as is required under the Care Act.
- 3.7.8 As well as these services detailed above, the Council is considering how to engage with Housing Providers, in response to the Market Position Statement at Appendix 1.

### **3.8 Direct Payments and Direct Awards**

- 3.8.1 Direct Payments are paid to the individual receiving care or their proxy. Adult Health and Social Care arrange the payment. The individual receiving the care or their proxy uses the payments to organise the care required to meet their statutory needs.
- 3.8.2 This care could include day services, employing their own carers or paying a care provider. Direct Payment arrangements between providers and service users will not form part of the Working Age Framework.
- 3.8.3 There is currently £15 million budgeted for Direct Payments for services in use by people of a working Age with a disability.

3.8.4 Currently, there are supported living services and day services which are funded by Direct Payment. Although this Direct Payments will not be included in the Working Age Framework, we intend on working with individuals and providers to ensure the Direct Payments are delivering an individual's personal outcomes and resolve any quality issues arising.

### 3.9 Demand for Services

3.9.1 According to National Indicators which Sheffield reports on, the demand for services for people with a Learning Disability remains mostly stable. Weekly costs for services have been gradually increasing. The most recent figures are for 20/21.

3.9.2 Gross expenditure (long term care £000s) in 20/21 per 100,000 18-64 population:

| Service                         | Sheffield      | Core Cities    | CIPFA Group    | Y&H            | England        |
|---------------------------------|----------------|----------------|----------------|----------------|----------------|
| Nursing Care                    | £985           | £352           | £373           | £305           | £174           |
| Residential Care                | £2,623         | £4,380         | £3,780         | £4,274         | £5,105         |
| Supported Accommodation         | £73            | £1,796         | £1,364         | £356           | £1,031         |
| Community: Supported Living     | £5,203         | £5,679         | £6,577         | £5,956         | £4,894         |
| Community: Home Care            | £1,007         | £725           | £669           | £988           | £1,095         |
| Community: Direct Payments      | £4,491         | £1,548         | £2,167         | £2,338         | £2,174         |
| Community: Other long term care | £81            | £1,468         | £1,347         | £1,539         | £1,685         |
| <b>Total</b>                    | <b>£14,462</b> | <b>£15,948</b> | <b>£16,276</b> | <b>£15,755</b> | <b>£16,158</b> |

### 3.10 Proposed New Model – Supports for Working Age Adults

3.10.1 The proposal is to commission a framework for services for Working Age people with a Disability, with Individual Lots for Supported Living and Activities outside the home - Short Breaks/Respite and Day Services.

3.10.2 There will also be a Lot for 'Innovation' – to enable the Council to develop new ways of working, for example, with young people who will transition to support from Adults Services and to allow the Council to be responsive to upcoming changes in policy. The Council is also considering ways to engage with Recognised Housing Providers to address the demand for supported living services.

3.10.3 It is proposed that the framework will have a term of 10 years (7+2+1) and an estimated value of £500m.

3.10.4 The proposed commissioning approach will bring all the services involved in an individual's support into the same arrangement with a shared focus on the individual's outcomes, quality of service and experiences.

3.10.5 In addition, the proposed commissioning approach will also seek to value our social care workforce by building in the same supports to our workforce as was agreed on 15<sup>th</sup> June in relation to the Care and Wellbeing Service<sup>1</sup>.

3.10.6 This will involve:

- Developing the existing supported living service offer- to improve the uptake of smaller packages of care.
- Developing the existing supported living services by ensuring that providers can meet the needs of a range of individuals, with a particular focus on younger people and people from the BAME community
- Promoting stability in the market, by moving to a longer contract term while also ensuring the Council has sufficient flexibility to changes in needs and demand during the term of that contract.
- Engaging with providers to develop service specifications to meet emerging needs- e.g., for younger people transitioning from Children's services; to explore employment support options
- Promoting stability and choice in the day activities/activities outside the home market
- Developing the Council's offer for short breaks and respite services, which can be delivered within and outside the home.
- Developing the market for day services/activities outside the home to ensure there is sufficient quality and choice to meet people's needs and aspirations

3.10.7 Benchmarking, reference to best practice guidance, such as the Alders Commissioning practice and ongoing engagement with Adults, families, providers and partners will also be used to complete the accompanying specification and information to the sector.

### **3.11 South Yorkshire Market Position Statement**

3.11.1 To support Market preparation for the new commissioning approach, a South Yorkshire Market Position Statement (MPS) for accommodation for people with a learning disability and/ or autism was launched on 27<sup>th</sup> July 2022.

3.11.2 The Market Position Statement identifies a range of pressures in relation to the provision of supported living accommodation. The MPS identified the indicative demand for services over a 10-year period and identifies that there is a demand for self-contained 'core and cluster' model of accommodation.

3.11.3 This Market Position Statement is included at *Appendix 1* to this report.

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<sup>1</sup> [\(Public Pack\)Item 9 - Recommissioning Homecare Services Agenda Supplement for Adult Health and Social Care Policy Committee, 15/06/2022 10:00 \(sheffield.gov.uk\)](#)

### **3.12 Market Position and Adult Health and Social Care Target Operating Model**

- 3.12.1 An Adult Health and Social Care Market Position Statement is proposed for approval at Committee on 21<sup>st</sup> September 2022. This provides providers with our intentions and standards and supports the implementation of the recommissioning of supports for working age adults.
- 3.12.2 It is intended that further partnership and engagement activity is undertaken with Adults with a Disability, providers and partners to enable a further dedicated Strategic Outcome Delivery Plan and Market Shaping Statement to be co-produced and considered for approval at Committee by February 2023.
- 3.12.3 Through implementation of our Adult Health and Social Care Strategy, a new target operating model is being developed which will enable practical realisation of the strategy. It's intended that providers successful through the recommissioning exercise are enabled to co-design the Adults with a Disability part of the model along with Adults, Families and wider partners so that our model reflects and deliver improved outcomes for people of Sheffield.
- 3.12.4 Progress with implementation of the recommissioning exercise will be reported to Committee by way of the DASS report and through the change board, to ensure effective oversight and governance in relation to the recommissioning exercise.

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

- 4.1 This proposal meets the four ASC outcome/s that are set out in the ASC Strategy in several ways:
- Safe and well - The recommissioning of these services will enable people who have long-term disabilities and health conditions to live as safe and well as possible.
  - Active and independent -The recommissioning of these services will enable people to be as independent as possible.
  - Connected and engaged - With the support of commissioned providers, people with long term disabilities can relate to their local community and engage with mainstream activities.
- 4.2 This proposal also supports a broad range of strategic objectives for the Council and city, and is aligned with existing policies and commitments, including: -
- Our Sheffield: One Year Plan – under the priority for Education Health and Care, enabling adults to live the life that they want to live
  - Conversations Count: our approach to adult social care, which

focuses on listening to people, their strengths, and independence.

- Our new ASC Operating Model - this aligns to that new arrangement by ensuring that all working age adults who have long term health conditions have access to appropriate care and support services.
- Team around the Person: where professionals work together to find the best solutions when someone's needs have changed, or a situation escalated.
- ACP Workforce Development Strategy: a vision of 'developing our people in a joined-up way to deliver holistic, person-centred and integrated care'.
- Unison Ethical Care Charter: signed up to by SCC in 2017/14, the Charter 'establishes a minimum baseline for the safety, quality and dignity of care'.
- Ethical Procurement Policy: driving ethical standards and increasing social value for the city through procurement.

4.3 *Appendix 2* details the Delivery Action Plan for the recommissioning project, including the key milestone dates.

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

### **5.1 Disability Sheffield/ Healthwatch**

5.1.1 Disability Sheffield/Healthwatch have been commissioned to assist the Council in developing a sustainable co-production model for engaging with people with a learning disability.

5.1.2 Their initial focus is to identify and establish a network of groups and individuals who will be able to be involved in the project which has been named 'Chance to Choose'.

5.1.3 They are reaching out to people who access all services, and family carers, capturing their feedback in a variety of creative ways – via drama, art, and writing.

5.1.4 The people who are involved in the 'Chance to Choose' project will also be invited to take part in the development of method statements and the evaluation of tender submissions.

5.1.5 Disability Sheffield has produced a draft 'Golden Threads' document, which has highlighted key aspirations that people want from services in the future. This document is attached at *Appendix 3*.

5.1.6 Our vision is that the individuals involved will continue to be part of monitoring the quality of the tendered services as experts with lived experience. The outcomes of our engagement with individuals will be used to develop the tender documents and procurement process

## **5.2 Existing providers**

5.2.1 Provider events have been held and are ongoing with both supported living and day activity providers. The outcomes of these will be used to develop the tender documents and procurement process.

5.2.2 A summary of these consultations is at *Appendix 4*.

## **5.3 Assessment and Care Management**

5.3.1 Social workers and care managers have also been asked to engage in the development of the specification.

5.3.2 *Appendix 4* contained a summary of the consultation which has been undertaken with professionals.

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

### **6.1 Equality Implications**

6.1.1 Decisions need to take in to account the requirements of the Public Sector Equality Duty contained in Section 149 of the Equality Act 2010. This is the duty to have regard to the need to:

- Eliminate discrimination, harassment, victimisation, and any other conduct that is prohibited by or under the Act
- Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it
- Foster good relations between persons who share a relevant protected characteristic and persons who do not share it

6.1.2 An Equality Impact Assessment has been completed. There is an expected to be an overall positive impact through developing the provider market to meet a wider range of needs. The service specification will ensure that services continue to have a strength-based approach and support people with independence and wellbeing. Monitoring and other actions have been identified to ensure the commissioning arrangement operates in line with these obligations.

6.1.3 The primary impact is assessed as being on people sharing the protected characteristics of Age and/or Disability but the EIA also identifies secondary impacts, including in relation to Sex and Race.

6.1.4 The Equality Impact Assessment can be found at *Appendix 5*

## 6.2 Financial and Commercial Implications

### Financial Implications

- 6.2.1 For 2023/24 a standstill budget approach has been adopted because of the Council's financial position.
- 6.2.2 The current available budget for 2023/24 for Supported Living is c£35m, for Day Services is c£5m and for Respite is also c£5m. This also includes c£1.8m for support provided on a Direct Award basis.
- 6.2.3 Due to the way Respite/Short breaks care are procured and recorded it is assumed for the purposes of this report that no budget pressure exists, and expenditure will remain within the budget envelope.
- 6.2.4 The current estimated delivery costs of Supported Living in 2022/23 are estimated to outturn at £35m so within budget. This is based on average delivery of 3,6000 hours of care per week which includes framework hours, discounted hours, sleeping and waking nights.
- 6.2.5 Day Services is estimated to outturn at £6m in 2022/23 against the budget of £5m an overspend of c£1.2m.
- 6.2.6 Within the recommissioning, it is proposed to review the hourly rate which is currently paid for the supported living services. If the rate increases against the existing activity, this will put additional pressure on the budget. In terms of activities outside the home, we will be able to work more closely with these providers to manage their cost models.
- 6.2.7 Any budget pressures will be managed by:
- Reviewing the rate which is paid for sleeping night support
  - Reviewing supported living services to ensure that packages are meeting the individual outcomes appropriately.
  - Reviewing supported living services which are funded by Direct Payments, to ensure that packages are meeting individual outcomes as appropriately as possible
  - Developing a Trusted Reviewer model with providers.
  - Considering whether other providers could meet some of the needs of the individuals, for example, shopping and cleaning services.
  - Review the packages which are on a Direct Award basis, to rationalise the hourly rate if appropriate
- 6.2.8 *Appendix 6* contains further detail on the financial options which have been considered.

### Commercial Implications

- 6.2.9 There are challenges facing providers in this market area. This procurement will aim to increase stability and strengthen existing provision, as well as ensuring the right providers are in the market to meet all needs. The Council is proposing to enter in to a 10-year contract for these services, with break clauses at years 5 and 6.
- 6.2.10 The procurement will be governed by the Light Touch Regime (LTR) as outlined in schedule 3 of the Public Contracts Regulations 2015, allowing flexibility to draw on provider innovation and collaboration throughout the tender process. The recommendation is to develop a framework, comprising of four individual lots (as mentioned above).
- 6.2.11 Contracts will be developed to build in the ability to flex services in line with demand. We will also use the ability to reopen the framework where necessary to compliantly onboard new providers if necessary. As the existing Supported Living Framework is the only contract in this cohort governed by a definitive end date, the procurement timetable will be driven by this, aiming for contracts go live by March 2023. Consideration will be given to TUPE and mobilisation periods when developing the timeline, to ensure a smooth transition.
- 6.2.12 The contract value over the term of the contract is likely to be in the region of £500million.

### **6.3 Legal Implications**

- 6.3.1 Under the Care Act 2014, the council: has a general duty to promote the health and wellbeing of its constituents; a duty to provide or arrange services, facilities and resources to prevent needs for care and support of its constituents; and a duty to meet needs for care and support.
- 6.3.2 In terms of meeting these duties, the Act lists (*inter alia*):
- accommodation in a care home or in premises of some other type;
  - care and support at home or in the community; and
  - facilities
- as examples of what may be provided to meet the duties under the Act.
- 6.3.3 These arrangements are permitted by the Local Government (Contracts) Act 1997 and should ensure the Council can meet their statutory duties.
- 6.3.4 All public contracts must be awarded in accordance with the Public Contracts Regulations 2015 and the Council's Contracts Standing Orders.

## 6.4 Climate Implications

- 6.4.1 A Climate Impact Assessment has been completed and is attached at *Appendix 7*. The assessment has considered how the Working Age Framework providers can have a focus on the impact of climate change and contribute to mitigate against these changes, thereby aligning with Sheffield's aim to become a net zero carbon city by 2030.
- 6.4.2 Provision of a more sustainable and flexible suite of services over a longer contract term will enable the local authority and all stakeholders to explore and develop opportunities to collaborate, share resources and reduce carbon emissions. Framework providers will be in a unique position to influence people they support by raising awareness of climate impact and encouraging them to make changes in their everyday lives that will reduce carbon emissions.
- 6.4.3 We expect all providers to appoint Climate Impact Champions and complete an annual self-assessment to evidence how they are working towards the reduction of carbon emissions. The co-benefits of provider and service user involvement will be:
- Improving health and wellbeing, specifically connecting with the local community, promoting active travel and healthy eating, and learning new skills (e.g., cooking and DIY)
  - Supporting people to manage fuel poverty by raising awareness around energy efficiency
- 6.4.4 The table below shows the full assessment (with Carbon emissions shown in tonnes on the horizontal axis):



## **7. ALTERNATIVE OPTIONS CONSIDERED**

### **7.1 Option One: 'Do Nothing'**

7.1.1 This is not an option. The current framework for supported living is due to end in April 2023 and cannot be extended beyond this time.

7.1.2 If the current arrangement for the day activities remains in place, the Council has limited options to develop this offer further. Day activities providers are indicating that the current fee arrangements are inadequate. This also remains a market where there is no quality monitoring in place without a Framework.

### **7.2 Option Two: Recommissioning of a Supported Living Framework on a Similar Basis**

7.2.1 This will not meet the Council's strategic goals, of supporting people with a range of additional needs to meet their needs and outcomes.

7.2.3 This option will not enable the Council to develop new service offers to meet emerging needs, for example for young people transitioning from Children's services, and for people who require overnight support.

### **7.3 Option 3: Recommission a Working Age Framework (recommended)**

7.3.1 This will enable greater flexibility and for more providers to join the Framework thereby increasing diversity.

7.3.2 It will enable the Council to meet its statutory duty and fulfil obligations to meet a range of needs.

## **8. REASONS FOR RECOMMENDATIONS**

8.1 It is recommended that the Committee approve this report and that the recommended option will deliver the following outcomes:

- The Council can meet its statutory duties under the Care Act 2014.
- Individuals who have assessed eligible social care needs because of their disabilities and long-term health conditions will be supported.
- The market will be stabilised and diversified, with increased provision to meet the needs of the cohort.
- The Council can be assured of the quality of the provision it has commissioned.
- Individuals will have access to support that is appropriate, meets their wishes and is delivered in a timely manner
- Individuals will meet their outcomes as set out in the Support Plans
- Individuals will be supported to live as independently as possible within the community with appropriate support

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