HAMPSHIRE COUNTY COUNCIL

Decision Report

Decision Maker:	Executive Lead Member for Adult Social Care and Public Health	
Date:	28 March 2023	
Title:	Live-in-Care for Community Based Services	
Report From:	Deputy Chief Executive and Director of Adults' Health and Care	

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Purpose of this Report

The purpose of this report is to:

- 1. Provide a short overview of the Adults Health and Care Short Term Services (STS) Programme, both Bed Based and Home Based.
- 2. Seek spend approval from the Executive Lead Member for Adult Social Care and Public Health for spend up to £5 million for the implementation of a new purchasing arrangement for Live-In Care Services through the development of a Short-Term Service Step Up Live-In Care contract over a 2-year period commencing from June 2023.

Recommendation

3. That the Executive Lead Member for Adult Social Care and Public Health give approval to spend up to £5million for a Short-Term Service Step Up Live-In Care tender on a 1+1 basis as set out in this report.

Executive Summary

- 4. This report seeks to
 - Set out the background to the existing Short-Term Services Programme and highlight its impact on the overall performance of the County Council and the lives of Hampshire residents.
 - Consider the financial implications of the new proposed contract for Step Up Live-In Care

Contextual information

 In 2020, as a direct response to Covid-19 and NHS guidance (Hospital Discharge policy), Hampshire County Council was required to support the rapid discharge of individuals from Acute Hospitals, within a targeted 4-hour window. Hampshire County Council commissioned three core services for the residents of Hampshire (Adults over the age of 18 years). The services had clear criteria and requirements for ways of working, longevity of stay and intended outcomes for the individual. All Short Stay Services were non chargeable to the individual for the period of their assessment.

- 6. The Short-Term Services consisted of (and continue to provide) three elements which were funded primarily via the Hospital Discharge Fund:
 - a) **Rapid Support Service (RSS)** home based enabling and reabling domiciliary service for up to 28 days.
 - b) **Live in Care** home based enabling and reabling Live in Carer service for up to 28 days.
 - c) Short Term Service beds (Recovery and Assessment Suites) bed based enabling and reabling service in a Nursing Home for up to 28 days.
- 7. Hampshire Isle of Wight Integrated Care Board and Hampshire County Council agreed that, despite the cessation of the Hospital Discharge Fund in March 22 that the 3 Short Term Services remained an invaluable element of hospital discharge and prevention for Hampshire residents. The ability to support an assessment period, outside of an Acute environment, remains a national priority for the NHS. Funding for services and staffing resources were jointly agreed for 2022/23, with a shared ambition to continue working in a collaborative way and enable further efficiencies and benefits for the wider system and Hampshire residents through a longer term and more sustainable model.
- 8. Through April 2020 to present day, all 3 Short Term Services have continued at varying levels and currently provide over 230 STS beds, more than 3,500 hours a week of RSS and 55 Live in Carers. In 2022 nearly 6,000 Hampshire residents were supported through the Short-Term Services and of those, 64% remained or returned to their own home.
- 9. The outcomes for individuals supported through these services are a clear indicator that there are positive outcomes for Hampshire residents, their families and carers, Hampshire County Council and the HIOW ICB. These outcomes include a positive impact on physical or emotional health, stability in our care market through the managed flow of referrals and supporting our NHS services to meet the needs of those most vulnerable when required. This leads to wider positive impacts for Hampshire residents, enabling them to live well for longer and live safe, healthy, and happier lives.

Short Term Services - Supporting a Step-Up Model of Care

40. Built within the specifications of the Short-Term Services, is the ability for our Community Social Work teams to access the Short Term Services. This has been used regularly as a preventative measure, although hospital referrals will usually take precedence over community referrals.

- 11. Based on demand and evidenced outcomes, it was clear that a Short-Term Service model could be replicated as 'Step Up', for the Community Social Work teams.
- 12. A recommendation for Step Up beds was agreed and implemented in late 2022 and 30 'Step Up' beds were opened in October under a test and learn concept.
- 13. At present these beds are consistently and appropriately being used, with evidenced positive outcomes for individuals, including more people able to return home with no service required or a domiciliary package of care put in place. Those who have been moved to a long term placement are decided upon after a robust reabling assessment that identified that their care needs can no longer be met in their home.
- 14. The outcomes described above are assisted by the collaborative work that is undertaken with Community Health colleagues to offer a Multi-Disciplinary offer, including GP support, Therapeutic intervention and Community nursing intervention as required.

Step Up Live-In Care Proposal:

- 15. An extension of the current Live in Care (LIC) model to include Community Live-In Care Step Up is the next step towards a longer term, wider strategic position for Short Term Services to be used and accessed prior to any long-term service being put in place. In this way Hampshire County Council are moving towards offering a fully equitable service to all Hampshire residents who require a reablement opportunity as part of an assessment of their eligible needs.
- 16. Across the Directorate, the use of Live in Care in Hampshire has increased significantly since 2018/19. This increase in use is due to a range of reasons: the national and local push to maintain people in their own homes, loss of confidence in the Care Home market during the pandemic and least restrictive practice models emphasising home care over bed-based services. Most of this increase has been for a 'temporary' Live in Care service that is being used as an assessment at home model.
- 17. By replicating the principles, block managed funding and ways of working of the LIC discharge service within a step-up offer, we believe that we can reduce the volume of spot purchases overall, better managed spend and reduce the average length of stay in the service.
- 18. The Live-In Care Step down /discharge service has proved a valuable and cost-effective way to achieve positive and value-based outcomes for individuals and the public purse. In the last 6 months it has enabled 124 discharges with an average length of stay of 27 days and 61% of these individuals have remained at home with no care needs or a domiciliary care package only.
- 19. The new Step Up LIC arrangement would target a stay of up to 28 days through concentrated work in collaboration with our Social Care teams and Live-In Care Providers, support a robust cost avoidance model and would

- seek to provide multi disciplinary links and interventions with Health colleagues.
- 20. The criteria to access the service would remain as per the Step down individual whose needs may improve with the support of a multi disciplinary intervention prior to assessment of long term needs and service delivery.
- 21. Through the use of a Step-Up model for Live-In Care, we anticipate we can achieve:
 - A better financial position for the County Council by adding significant control in relation to initial spend on Live-In Care.
 - A shorter length of stay for residents while assessment of future needs is agreed – our target will be 28 days.
 - A concentrated period of assessment and the allocation of link workers within community teams to support the Step-Up model.
 - Better outcomes and more cost-effective long-term options for individuals.
 - Assurance that any eligibility under the Care Act Assessment is clear and evidenced.
 - Greater control over any long term LIC arrangements and the volume/cost of service provided alongside better market oversight/management.
 - Consistency in the Hampshire approach to sourcing and better quality/equitable service offered to Hampshire residents.
 - A core service model through which to enable closer working and engagement into intermediate care community models.
 - Replicate a model that we already have and we can evidence provides positive outcomes for the individual
 - A managed STS will avoid expensive and suboptimal outcomes for some individuals as it enables early planning for Social Work teams – we have excellent evidence of this in Step Up beds.

Finances

22. The contract value included within this report is an estimate, based on the current pricing model for Live-in Care Services. The final price will be set by the provider (within a set range established by Hampshire County Council).

			Minimum Tender cost 12 months	Maximum Tender cost 12 months
Area	Number of proposed LIC packages	Potential increase to flex on demand	£900 per carer per week	£1200 per carer per week
SW	5	5	£468,000	£624,000
SE	5	5	£468,000	£624,000
NE	5	5	£468,000	£624,000
Mid/North	5	5	£468,000	£624,000
			£1,872,000	£2,496,000
Total	20	20	+ 1 year extension: £ 3,744,000	+ 1 year extension: £4,992,000

- 23. The prices indicated would incorporate additional costs such as carer breaks and food, which often are required as 'additional cost' under Spot purchasing, therefore the spend would not change throughout the length of the contract.
- 24. Using a baseline of 20 Live-In Carer's, we would expect capacity for at least 200 individuals to be moved through the Block in a 12-month period. Based on our current spend profile for long term Live-In Care, this could realise a saving of up to £3million against total current spend.
- 25. Even if it is assumed that we cannot improve upon the weekly cost we are paying for Spot Live-In Care, we will achieve a cost saving due to reducing length of stay in the Block service to the targeted 4 weeks.
- 26. The contract will can be applied for tender as a 12 month plus 12 months but also include 6-month review periods and a one-month notice period to ensure the contract can be ceased with speed if it is not proving cost efficient.
- 27. The learnings from this test and learn concept will inform future framework/contract needs for Live-In Care overall.

Charging

28. Where services meet the definition of Intermediate Care, the Local Authority is not able to charge for up to 6 weeks.

Consultation and Equalities

- 29. There has been no formal consultation carried out in relation to Step Up Live-In Care. Previous feedback has been gathered from individuals that have accessed short term services and this feedback back has been invaluable to make improvements to the services. A new STS survey has been developed and every individual who goes through an STS will have the opportunity to provide their feedback. Co-production is planned for late 2023/2024 and ongoing.
- 30. An Equalities Impact Assessment has been undertaken and is included within this report.

Climate Change Impact Assessment

- 31. Hampshire County Council utilises two decision-making tools to assess the carbon emissions and resilience impacts of its projects and decisions. These tools provide a clear, robust, and transparent way of assessing how projects, policies and initiatives contribute towards the County Council's climate change targets of being carbon neutral and resilient to the impacts of a 2°C temperature rise by 2050. This process ensures that climate change considerations are built into everything the Authority does.
- 32. Having reviewed the proposals against the decision-making tools, it has been identified that the service is moderately vulnerable to the impact of climate change, especially with respect to extreme weather be this heat, cold or flooding which may have an impact on the delivery of the STS.

Considerations and Risks

- 33. There are currently no existing framework financial controls in place for long term Live-in Care in Hampshire aside from the Scheme of Delegation actioned by local Social Care managers and the Brokerage process. Therefore, market forces dictate the price on a case by case basis. With continued expected increase in the use of live-in care provisions, comes a potential significant increase in costs. This directly impacts on the Adult Health and Care budget and represents an increasing pressure. Therefore, the Step-Up Live-In Care model provides us with an opportunity to strengthen our relationship with the market and take an element of control and offer stability in relation to costs, as these will be agreed as part of the tender process. This also provides a gateway to ensure a smooth transitional process from STS through to long term provision.
- 34. As Live-in care provisions are currently spot purchased and managed through an individual service contract. This leaves both the individual and Hampshire County Council vulnerable, with no terms and conditions of service that can be enforced. Replicating the tender and due diligence process carried out for RSS and STS LIC will ensure that providers will meet the criteria that Hampshire County Council specify and will be contract managed to do so.
- 35. There are no clear guidelines in place for when live-in care should be used or not. This means there are both short term and long-term live-in provisions, with live-in care also being used for respite and "emergencies". Further

- engagement is needed with operational colleagues to examine clear rationale for the use of Live-In care and further market engagement with providers is needed to look at the service delivery model moving forward.
- 36. It is estimated that by implementing a Short-Term Service Step Up Live-In Care model for Community Teams to access, under a block arrangement this will allow some stability around our spend and enable better outcomes for individuals and Hampshire County Council. This will also help to inform any potential new framework for live-in care alongside evidence from Step Down model already in place.
- 37. Growth in the private live-in care market means a potential for individuals with less savings but who own a property to access equity release on their Home but then require a provision paid for by Hampshire with a potential client contribution. Client contribution and self-funding rules attract a lower income for Hampshire County Council than Care Home placements do.

Conclusions

- 38. This report has summarised the background to the Short-Term Services Programme and outlined the rationale for Hampshire County Council to develop a Step-Up Live-In Care Service for Community Social Work teams to access to carry out care assessment within an individual's home environment.
- 39. The report has considered the potential financial risks and impacts to Hampshire as well as any possible legal and financial implications.
- 40. The report has also provided details of the Equality Impact Assessment (EIA) that has been produced in respect of the proposal.

REQUIRED CORPORATE AND LEGAL INFORMATION:

Links to the Strategic Plan

Hampshire maintains strong and sustainable economic	Yes
growth and prosperity:	
People in Hampshire live safe, healthy and independent	Yes
lives:	
People in Hampshire enjoy a rich and diverse	Yes
environment:	
People in Hampshire enjoy being part of strong,	Yes
inclusive communities:	

Other Significant Links

Links to previous Member decisions:				
Title Rapid Discharge Service and Discharge to Assess Live-in Care	<u>Date</u> 21-09-21			
Direct links to specific legislation or Government Directives				
<u>Title</u>	<u>Date</u>			

Section 100 D - Local Government Act 1972 - background documents

The following documents discuss facts or matters on which this report, or an important part of it, is based and have been relied upon to a material extent in the preparation of this report. (NB: the list excludes published works and any documents which disclose exempt or confidential information as defined in the Act.)

<u>Document</u>	Location
None	

EQUALITIES IMPACT ASSESSMENT:

1. Equality Duty

The County Council has a duty under Section 149 of the Equality Act 2010 ('the Act') to have due regard in the exercise of its functions to the need to:

- Eliminate discrimination, harassment and victimisation and any other conduct prohibited by or under the Act with regard to the protected characteristics as set out in section 4 of the Act (age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation);
- Advance equality of opportunity between persons who share a relevant protected characteristic within section 149(7) of the Act (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation) and those who do not share it;
- Foster good relations between persons who share a relevant protected characteristic within section 149(7) of the Act (see above) and persons who do not share it.

Due regard in this context involves having due regard to:

- The need to remove or minimise disadvantages suffered by persons sharing a relevant protected characteristic that are connected to that characteristic:
- Take steps to meet the needs of persons sharing a relevant protected characteristic that are different from the needs of persons who do not share it;
- Encourage persons sharing a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionally low.

2. Equalities Impact Assessment:

The Service and Change:

Service affected: Short Term Services Programme

Hampshire County Council Older Adults Short Term Services (STS) programme currently offers a safe environment, where dedicated staff work in partnership to enable individuals and their families time to think, recover and maximise independence. The project builds upon this to allow for rapid flow from hospitals to a care setting or support in an individual's own home for assessment of an individual's needs and support to become more independent. This is currently through the use of the Rapid Support Service, Short Term Services Live-In Care

and our bed based services located across 6 HCC Care sites for both hospital discharge and admission avoidance into hospital or placement (where possible).

Please explain the new/changed service/policy/project:

As part of the STS programme, Hampshire County Council now deliver Rapid Support Service, Short Term Live-In Care Service and Step-Down beds to support hospital discharge. We have also implemented Step Up beds that Community Social Work teams can access to carry out care act assessments. We want to provide a suite of options available for the residents of Hampshire, therefore we are looking to implement the Step-Up Live-In Care Service. Step Up Live In Care is currently awaiting approval from Executive Member. We are seeking approval for a 'test and learn' 1 year (with potential to extend) contract for Community Teams to access a block Live-In Care provision as an option to be able to complete a care act assessment within an individual's own home. This is a new service for Community, providing another option to individuals to access in order determine their long-term care requirements and needs.

Equality Considerations:

A survey was undertaken of service users from the pre-curser project 'Discharge to Assess' in 2020 and 2021. From the feedback obtained, our Rapid Discharge Service was changed to Rapid Support Service to differentiate the discharge element from hospital to the service provided following. Our new survey moving forward within the Short Term Services programme, has been amended to a simpler format and accessible to all through paper format, digital and also audio a dedicated contact number that someone will run through the questions and capture responses. General feedback gather throughout has provided us with good reasons to look to implement the Step-Up Live-In Care Service.

From a service perspective, Providers and Operational Teams are tailoring care requirements based on the needs of the individuals, both in regard to their care and their cultural needs. Through a stronger working relationship, Providers and Operational teams are communicating changes of need on a daily basis and adapting as and how they need to. One example being an individual that is Nepalese, the Reablement Team are working with translators to ensure that an accurate assessment is completed and understand the true care needs of the individual.

<u>Impact Assessment:</u>

Age:

Public Impact: Neutral Staff Impact: Neutral

The development of Step Up Live-In Care for Community Based Services will have no disproportionate impact on the service user and staff because of their age

Disability:

Public Impact: Positive Staff Impact: Neutral

The inclusion of the utilisation of TEC (Argenti) equipment within the project should improve access to the service and improve individuals journeys through the utilisation of these technological enhancements. An aspect of the programme is to review effectiveness of the Short Term requirements for individuals with dementia. The adoption of improved ways of working of care staff will improve such individuals journeys through the assessment and discharge cycles, either to home or long term care.

Gender Reassignment:

Public Impact: Neutral Staff Impact: Neutral

No disproportionate impact with regards to peoples' gender reassignment identified because of the development of the Step Up Live-In Care Service for Community Based Services.

Pregnancy & Maternity:

Public Impact: Neutral Staff Impact: Neutral

No anticipated changes to current public service user position expected through programme delivery however this is likely to provide a benefit as an aspect of the programme is to investigate the use of COBOTS within RSS/LIC and HCC Care environments. This may well provide a benefit through improved and assisted handling technology and techniques which will prevent less strain on the individual carer.

Race:

Public Impact: Positive Staff Impact: Neutral

No anticipated changes to current public service user position expected through programme delivery however this is likely to provide a benefit as an aspect of the programme is to investigate the use of COBOTS within RSS/LIC and HCC Care environments. This may well provide a benefit through improved and assisted handling technology and techniques which will prevent less strain on the individual carer.

Religion or Belief:

Public Impact: Neutral Staff Impact: Neutral

The development of Step Up Live-In Care for Community Based Services will have no disproportionate impact on the service user and staff because of their religion or beliefs

Sex:

Public Impact: Neutral Staff Impact: Neutral

No disproportionate impact with regards to peoples' gender because of the development of the Step Up Live-In Care Service for Community Based Services.

Sexual Orientation:

Public Impact: Neutral Staff Impact: Neutral

No disproportionate impact with regards to peoples' sexual orientation identified because of the development of the Step Up Live-In Care Service to for Community Based Service.

Marriage & Civil Partnership:

Public Impact: Neutral Staff Impact: Neutral

No disproportionate impact with regards to peoples' marital status identified because of the development of the Step Up Live-In Care Service for Community Based Service.

Poverty:

Public Impact: Negative - Low

Staff Impact: Neutral

Step Up Live-In Care will be accessible for those that have a spare room available for a Live-In Carer to be able to reside in the individual's property.

Mitigation:

If an individual only has 1 bedroom, they may be able to access the Rapid Support Service as an interim measure in order to carry out a care act assessment or be placed in a Short Term Service Step Up bed to determine long term care requirements.

Rurality:

Public Impact: Positive Staff Impact: Neutral

One of the key focus aspects of the programme is to enable individuals to remain within their homes prior to assessment for care needs.

The ability to receive planned Reablement services or Live in Care in their own homes will be a benefit for rurally isolated individuals with little or no access to transport.