Forward Plan reference number: 'Not applicable'

Report title: Winter pressures support

Report to: Nick Presmeg, Executive Director for Adult Social Care

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Date: 20 October 2021 For: Decision

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County Divisions affected: All Essex

## 1. Everyone's Essex

- 1.1 Thousands of Essex residents rely on the care and support that the county's adult social care workers are able to provide. Whether they are in their own home, or in a residential or nursing setting, at Essex County Council we have a profound duty to ensure that vulnerable and frail people can access the care they need in a timely and safe way.
- 1.2 To support with this over the coming winter period, this report proposes to award a contract to Newton Europe for consultancy services via Bloom Procurement Services Ltd to work with Essex County Council (ECC) to understand and address current pressures in the care market and to provide support over the winter period to the end of March 2022 to help the health and care system maintain resilience.
- 1.3 This decision helps deliver the commitment of ECC in the strategic plan Everyone's Essex to promote independence, including through provision of efficient and effective reablement and homecare (domiciliary care) services.
- 1.4 Pressures in the care market are currently leading to capacity challenges and blockages in the system, which are contributing to an increase in delays of accessing care; leading to longer lengths of stay in some types of care than is desirable; and is limiting the capacity of reablement services to support more people. Addressing these challenges which are being experienced across the country in recent months would lead to improved outcomes for residents.
- 1.5 With winter fast approaching, there is a need to undertake rapid work with partners and the market to understand the nature of the issues. As Newton Europe have already been working with ECC and NHS partners over the past twelve months, the Council believes they are best placed to undertake the work quickly and to the necessary quality.
- 1.6 This decision is carbon neutral and will therefore have no adverse impact on the county's focus on tackling climate change.

#### 2 Recommendations

- 2.1 To award a contract worth £1.1m (£1,030,000 plus expenses capped at 7%) to Newton Europe via the NEPRO3 Procurement Framework with Bloom Procurement Services Ltd.
- 2.2 To fund this contract via the overall Better Care Fund pooled budget in line with the Cabinet decision dated 15 September 2020.
- 2.3 To enter into a deed of variation to make changes to the BCF county wide s75 agreement to reflect the funding from the BCF Pooled Fund for the consultancy services.

## 3 Background and Proposal

#### Context

- 3.1 In September 2020, Cabinet approved to award a contract to Newton Europe Limited, to provide consultancy services to support ECC in the design and implementation of the Transforming Community Care Programme. It also allowed NHS partners to subsequently join this arrangement, which Mid and South Essex Acute Trust agreed to join and contribute funding in October 2020.
- 3.2 A programme called *Connect* has since focused on improving the efficiency and effectiveness of reablement services; developing new ways of working for social care teams in localities that support people to be more independent; and improving discharge outcomes from hospital. *Connect* has successfully brought partners together over the last year to transform outcomes for older people:
  - Discharge outcomes have introduced early identification and multidisciplinary working to support a 20% reduction in placements to bedded settings post discharge from acute;
  - Supporting independence work has aligned social work teams to Primary care Network footprints, with new ways of working helping 25% of people be supported more independently;
  - Developed new ways of working with ECL (reablement provider), which in the South West Essex pilot has shown a 20% reduction in length of stay and a 20% increase in effectiveness, lowering onward demand for care. These ways of working are currently being scaled up county-wide
- 3.3 However, the health and social care system continues to be under immense pressure as a result of the pandemic. In particular, the care sector continues to experience high levels of staff unable to work due to infection and self-isolation requirements, workforce supply issues due to mandatory vaccination requirements and inability to recruit and retain staff in the face of competition from other sectors such as hospitality. These pressures are across the care sector and are being experienced across the country.

- 3.4 As a result, and in line with national trends, since June/July the health and care systems across Essex are facing unprecedented pressure on discharge pathways and homecare, resulting from workforce and capacity challenges in the homecare market. The Council has been operating at level 3 (out of 4 possible levels) in terms of its system pressure escalation approach.
- 3.5 The homecare market has responded admirably and is delivering more hours of care than it has ever done and 16% more hours than it was doing prepandemic. But despite this, the domiciliary care market is unable to satisfy current levels of demand. Workforce pressures mean that the ability of the Council to further buy capacity in the market is now highly constrained and market capacity has reached a tipping point. There has been an increasing number of care "handbacks" where the provider is unable to provide care and hands the case back to ECC to source an alternative provider.
- 3.6 This is creating problems in the system including:
  - a) The service placement team (which sources care) is now dealing with queues that have grown significantly in recent months (for example, they have trebled in Mid Essex since May)
  - b) It is proving harder to source care for some types of need. In early June, 110 hours of care a week were proving difficult to source but this has now grown to over 1,900 hours a week across the county.
  - c) With domiciliary care proving difficult to source, people are staying longer in reablement services (now an average of 46 days vs 32 days in June), which reduces reablement capacity to take on new starts.
  - d) The number of people starting reablement per week has dropped, exacerbated by workforce capacity challenges. This is important because we know that reablement has a significant and positive impact on people's independence by reducing ongoing care needs.
  - e) There has been a recent trend for more people to be discharged to residential care beds, in the absence of being able to access domiciliary care services.
- 3.7 These pressures are expected to continue through winter and could become worse as new national requirements on mandatory vaccination are introduced in November for care homes (where over 720 workers will not be able to work in a care home from 11 November).
- 3.8 It is also anticipated that local authorities will receive further national winter planning guidance from the Department of Health and Social Care. Once this is received, officers will undertake a gap analysis which may highlight additional areas where our winter preparations (and those of partners) need to be strengthened.
- 3.9 To help address these problems, and building on the work that has been done to date with Newton Europe as part of the *Connect* programme, ECC is direct awarding a contract to Newton Europe via Bloom Procurement Services Ltd to:
  - a) Provide countywide support throughout the winter period (through to end March) to support system resilience and support system flow by

- identifying any processes that need redesigning to free-up capacity and improve efficiency.
- b) Undertake a countywide programme of work with ECC (and with NHS partners) to understand and set out:
  - The key causes/drivers of bottlenecks in the system and mapping of capacity vs demand;
  - A review of the discharge to assess process, the outcomes being achieved for individuals, and identify opportunities for improvement;
  - c. Support winter demand forecasting and planning;
  - d. An action plan for addressing pressures in the homecare market in both the short term and the long term, to support the broader winter planning work underway in both the Council and NHS systems.

The countywide work will cost £693,500 (excluding expenses) and will be funded through the countywide improved Better Care Fund winter budget.

c) Undertake a focused piece of work in North Essex to understand the root causes of problems in the system; the outcomes being achieved; support weekly improvement cycle meetings for the system; and review opportunities to make improvements around admission avoidance to hospital for over 65s.

The work in North Essex will cost £337,000 (excluding expenses) and will be funded from the Contribution by North East Essex CCG to the Better Care Fund pool. This will be reflected in the deed of variation to the BCF s75 agreement required to formalise the allocation of funding to be applied to the Newton Europe's consultancy services as described in this report.

#### **Links to our Strategic Ambitions**

- 3.10 The proposed decision accords closely with the council's key strategic themes of 'Equality' and 'Levelling Up', by re-enforcing our capacity to ensure continuity and quality of care in the market for vulnerable residents who depend on our support.
- 3.11 The Council's priorities include:
  - Enable more vulnerable adults to live independent of social care
  - Improve the health of people in Essex

This decision will contribute towards these priorities, by improving our capacity to step in and ensure continued care and support to some of the county's most vulnerable residents; enabling them to live the best-quality life they can.

- 3.12 The decision is consistent with the 15 September 2020 Cabinet decision about the need to improve community care and reablement services, and is also consistent with the scope and purpose of the Better Care Fund plan, which funds reablement, domiciliary care services, hospital discharges, and winter pressures.
- 3.13 This decision is carbon neutral and will therefore have no adverse impact on the county's focus on tackling climate change.

## 4 Options

#### 4.1 Option 1: ECC to resource work internally (not recommended)

This option has been considered and would be the cheapest option. It would require reallocating internal analytical capacity and project management capacity.

However, ECC project management, commissioning and analytical resource is stretched on existing work project. There is also a need for expert advice on health and care systems and for independent advice and support that is trusted by the whole system, and that can bring learnings from other health and care systems in the country.

## 4.2 Option 2: ECC to seek bids from market (not recommended)

This would allow ECC to seek bids from the market and to better assess value for money.

This option has been discounted because of the immediacy of the pressures in the care market and the imminence of winter pressures. It would take time to go through such a process and would also take time for a new partner to come on board, losing vital time in advance of winter. A new partner would need to take time to learn about the system, to build relationships from scratch, to collect data and analysis from scratch, and would require new information sharing agreements to be out in place.

A new partner would also need to form new relationships and understanding within ECC and with NHS partners.

# 4.3 Option 3: ECC to award to Newton Europe via Bloom Procurement Services (recommended)

Newton Europe are already working in the system and have gained a good understanding and knowledge of the Essex health and care market and have established trusted relationships. They also have knowledge from work in other systems that can be applied in Essex.

The September 2020 Cabinet decision has agreed savings targets for the Transforming Community Care work programme (worth £16.9m per annum by year 4) and this work will support the approach to delivery.

The September 2020 Cabinet decision also set a ceiling of £9m for the *Transforming Community Care* programme work and this option is within the £9m threshold set by Cabinet.

Newton Europe brings a combination of data and analytic skills; process engineering skills; design skills; and project and programme management skills that can help us to understand and address the challenges.

5 Issues for consideration

## 5.1 Financial implications

- 5.1.1 The maximum value of the recommended option is £1.1m including potential expenses incurred by Newton Europe, capped at 7% of fees.
- 5.1.2 The contract costs will be funded via the overall Better Care Fund (specifically the iBCF grant), with up to £742,000 from countywide winter pressures, and up to £361,000 from the North Essex local pot in agreement with North East Essex CCG.
- 5.1.3 As well as improving outcomes for older adults, the *Connect* programme is expected to deliver over £16m in savings already assumed in the Council's 2021/22 budget and MTRS (Medium Term Resource Strategy) if the positive system changes are sustained. The full potential of the benefits to individuals through more independent outcomes and reduced cost of ongoing care needs is currently constrained by health and care system pressures, notably in the domiciliary care market. Through this proposed programme of work, there is the opportunity to identify solutions to unblock the discharge pathway delays, minimise suboptimal outcomes and to respond at pace given the likely demand and operational challenges over the winter period. This will assist in safeguarding and maximising the benefits realised by the new ways of working through *Connect*.
- 5.1.4 Information gathering and analysis alone do not guarantee tangible results, and benefits from the work will rely heavily on ECC internal resource and engagement from system partners. This is mitigated by the advantages of the continuity in appointing Newton Europe as they have worked extensively across the Essex health and care system in recent months including through the Covid-19 pandemic and can build on existing knowledge and established relationships.

#### 5.2 Legal implications

- 5.2.1 We entered into a NEPRO3 Framework Call off contract with Bloom Procurement Services Ltd on 19 December 2019 Framework. This is one of the multi operator frameworks for the provision of professional services to the public sector.
- 5.2.2 Bloom entered into an Enhanced service delivery agreement with Newton Europe (ESDA). Newton Europe was therefore compliantly procured by Bloom to deliver consultancy services to the Council under the Framework. NEPRO3 is an OJEU compliant single supplier managed service framework awarded to Bloom Procurement Services Ltd.

- As part of the NEPRO3 call off contract we placed a work order with Newton Europe (with a commencement date of 5 October 2020 for Part 1 and 3 November 2020 for Part 2 of the Transforming Community Care Programme) and a completion date of 31 August 2021 (then extended to December 2021) with a total value of £7.76m. This was in line with the Cabinet decision dated 15 September 2020.
- 5.2.4 The Council is now seeking a decision by the Executive Director for Adult Social Care to enter into a new contract with Bloom and a new work order with Newton Europe to be awarded via the NEPRO3 framework to commence after expiry of the current work order referred to above, for a value of £1,030,000.
- 5.2.5 The funding mechanism shall remain as approved by Cabinet on 15 September 2020. This funding is already available from the BCF pooled fund hosted by the Council and the services from Newton Europe are in relation to the improved delivery of schemes already included in the BCF s75 agreement. However, there will need to be a variation of the existing BCF s75 agreement to reflect the allocation of the funding for these consultancy services out of the BCF Pooled fund including from the contribution to this fund by North East Essex CCG.
- 5.2.6 The Council also entered into a s75 agreement with Mid and South Essex NHS Foundation Trust to formalise the delegation of the commissioning functions from the Trust to the Council in respect of the commissioning of the consultancy services from Newton Europe. No changes to this is being proposed and the new work order with Newton Europe will continue to be for the provision of these services to both the Council and the Trust.

#### 6 Equality and Diversity Considerations

- 6.1 The Public Sector Equality Duty applies to the Council when it makes decisions. The duty requires us to have regard to the need to:
  - (a) Eliminate unlawful discrimination, harassment and victimisation and other behaviour prohibited by the Act. In summary, the Act makes discrimination etc. on the grounds of a protected characteristic unlawful
  - (b) Advance equality of opportunity between people who share a protected characteristic and those who do not.
  - (c) Foster good relations between people who share a protected characteristic and those who do not including tackling prejudice and promoting understanding.
- 6.2 The protected characteristics are age, disability, gender reassignment, pregnancy and maternity, marriage and civil partnership, race, religion or belief, gender, and sexual orientation. The Act states that 'marriage and civil partnership' is not a relevant protected characteristic for (b) or (c) although it is relevant for (a).

6.3 The equality impact assessment indicates that the proposals in this report will not have a disproportionately adverse impact on any people with a particular characteristic.

## 7 List of Appendices

## 8 List of Background papers

Cabinet decision, *Transforming Community Care*, September 2020.

Cabinet Member Action, Transforming Community Care, January 2021

The 'sign off' boxes below are deleted for cabinet reports but not for CMAs.

I approve the above recommendations set out above for the reasons set out in the report.	Date 21 Oct 21
Nick Presmeg	
Executive Director for Adult Social Care	
Director, Legal and Assurance (Monitoring Officer)	20.10.21
Jennifer Mellani on behalf of Paul Turner	
Director for Finance (section 151 Officer)	21.10.21
Caroline May, on behalf of Stephanie Mitchener	