

Report to Cabinet Member for Health and Wellbeing, Cabinet Member for Children's Services

Decision to be taken on or after 18 July 2019

Decision can normally be implemented at least 3 working days after decision has been signed.

Cabinet Member Report No. CS06.19

Title: Decision to progress with the recommissioning of personalisation services

Date: 10 July 2019

Author: John Everson, SCM Personalisation

Contact officer: Lisa Truett Tel: 01296 387656

Local members affected: All

For press enquiries concerning this report, please contact the media office on 01296 382444

A. Summary

Buckinghamshire County Council is required to recommission a number of Integrated Commissioning Service contracts which are grouped thematically. This has presented an opportunity to recommission and provide seamless integrated services that provide better services for clients and improve value for money. This report recommends progression to recommission these contracts with a view to reduce any duplication of activities and to revisit the service specifications focusing on achieving positive outcomes for the residents of Buckinghamshire.

Recommendation

The Cabinet Members are asked to approve the decision for officers to progress with recommissioning the services outlined in the attached business case recommendation 3.

A. Narrative setting out the reasons for the decision

Following the integration of the Children's, Health and Adult Social Care commissioning functions there are a number of contracts that will be expiring within the next 12 – 18 months. The purpose of the attached report is to propose options for the reconfiguration of personalisation services that analyses the key functions contained within contracts expiring in 2019/20.

The objective of the Adult Social Care transformation programme is to support asset based care planning and provision within Buckinghamshire. The Council acknowledges that the contracted services being delivered within the personalisation agenda need to support individuals to ensure their voices and values are heard within the care planning process. Any recommissioned services should be responsive to the evolving priorities of communities, support independence and inclusion and evidence that investment in these services provides value for money whilst meeting identified needs.

Recommendation 3 details the option of realigning a number of contracts that fall within the Personalisation agenda include statutory advocacy services for Adults, Children's and Health NHS complaints, Healthwatch and Community Engagement Services. Given the changing focus of Health and Social Care and the need to provide services to increasing numbers of service users whilst ensuring value for money, consideration has been given to aligning key activities within current contracts into a smaller number of new contracts, this will provide increased oversight from providers and ensuring people are receiving the right level of support.

Analysis of current activity has been undertaken to formulate the 5 proposed options and this has been benchmarked against other similar contracts being delivered in other authorities. (Benchmarking data attached in appendix1) and this paper requests agreement to progress with the proposed option 3.

B. Other options available, and their pros and cons

There are no further extension options available within the current contracts to extend.

Options explored within the paper included the following:

1. Doing nothing. This option would result in contracts reaching natural expiry but would result in the Council not meeting its statutory requirements and significant gaps in service provision.
2. Decommission non statutory services – Community Engagement services are not statutory, however it is best practice for Councils to offer opportunities for users of services to feedback experiences and be engaged in the co-production of strategies and recommissioning/ decommissioning of services. The proposed option ensures that residents have clear pathways to engage with the Council regarding Health and Social Care services.
3. Recommission 5 Contracts - All current service specifications for Healthwatch, Advocacy and Community Engagement are to be reviewed, creating 5 new contracts that focus on clarifying activity and reducing duplication. The proposal seeks to create two Advocacy contracts, a Healthwatch contract and 2 Community Engagement contracts.
4. Recommission 4 Contracts reviewing the specification to ensure no duplication of activity. This option looked to merge Children's and Adults advocacy contracts into one single point of access. Merge Health Complaints Advocacy and Healthwatch and recommission current community engagement contracts.

5. Proceed to recommission contracts as is but move the community engagements into Grants and decommission the Enter and View Contract. However analysis of this option identified that there are potential overlaps in activities being delivered and that increased oversight could be achieved by merging activities into a single contract. Therefore this was not identified as the preferred option.

C. Resource implications

The revised Personalisation contracts will allow for resource to be used across Buckinghamshire to engage with people wanting to feedback in their experiences of Health and Social Care. Access and capacity of advocacy services will remain at current levels. The Council will not be reducing the activities available within these services and the revised contracts will continue to deliver the core activities currently being provided.

The commissioning activity will need to be competitively procured under the Public Contracts Regulations 2015 and a number will require an OJEU advert to be placed. The project team will require procurement, finance, commissioning and operational staff.

D. Value for Money Self-Assessment

An open and competitive tender process will be followed and the successful providers must submit a tender that meets the requirements of the specification and a financial submission that is competitively priced within the financial envelope available for the service.

E. Legal implications

A competitive process will be followed in accordance with the Council's Standing Orders and Legal Services will advise on future Terms and Conditions.

The Adults Advocacy service will meet the Council's statutory duties under sections 67 and 68 of The Care Act 2014. The service will provide advocacy to meet the Council's duty under sections 67 and 68 of the Care Act to arrange an independent advocate to represent and support an individual for the purpose of facilitating the individual's involvement in:

Carrying out a needs assessment - Care Act section 9(5)(a) and (b)

Carrying out a carer's assessment - Care Act section 10(7)(a)

Preparing a care and support plan - Care Act section 25(3)(a) and (b)

Preparing a carer's support plan - Care Act section 25(4)(a) and (b)

Revising a care and support plan - Care Act section 27(2)(b)(i) and (ii)

Revising a carer's support plan - Care Act section 27(3)(b)(i) and (ii)

Carrying out a child's carer's assessment - Care Act section 61(3)(a);

Safeguarding enquiries and reviews - Care Act sections 42 and

The Local Authority has a duty to provide Advocacy services to Children in care under Section 22 (4) of The Children Act 1989

The Children Act 1989 - Guidance and Regulations, Volume 2:

The Care Planning, Placement and Case review, (England) 2010.

The Adoption and Children Act 2002.

The Local Authority must appoint an independent visitor for any child they are looking after if the authority thinks it would be in the child's best interests (Children Act 1989).

An Equalities Impact Assessment has been completed for the project; no groups have been identified as being adversely affected due to any protected characteristics.

F. Property implications

One incumbent provider currently operates from a Buckinghamshire County Council owned building, the revised specification will confirm the availability this benefit for the next contract period.

G. Other implications/issues

Key risks have been identified and appropriate mitigation is in place. These can be found in attached confidential appendix 1.

With any recommissioning exercise there can be implications for the current provider including risks associated with their ongoing viability.

H. Feedback from consultation, Local Area Forums and Local Member views

Commissioners have held a number of engagement groups with users of the current service and key stakeholders. Feedback received during engagement will be used to develop the outcomes required for the service.

Cabinet Members will be engaged throughout the tender process and will receive updates post tender award.

I. Communication issues

Communication will be managed using a robust plan, prepared in partnership with the current providers and the Council's communications team.

As there are a large number of service users and stakeholders impacted, communication will be tailored accordingly.

Your questions and views

If you have any questions about the matters contained in this paper please get in touch with the Contact Officer whose telephone number is given at the head of the paper.

If you have any views on this paper that you would like the Cabinet Member to consider, or if you wish to object to the proposed decision, please inform the Democratic Services Team by 5.00pm on 17 July 2019. This can be done by telephone (to 01296 382343), or e-mail to democracy@buckscc.gov.uk