

COMMISSIONING AND PROCUREMENT SUB COMMITTEE 13/01/16

Subject:	Commissioning of Enhanced Care Support and Enablement		
Corporate Director(s)/ Director(s):	Candida Brudenell (Assistant Chief Executive)		
Portfolio Holder(s):	Alex Norris		
Report author and contact details:	Sharon Bramwell Commissioning Manager Sharon.bramwell@nottinghamcity.gov.uk 0115 8763490		
Key Decision	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Subject to call-in	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Reasons: <input type="checkbox"/> Expenditure <input type="checkbox"/> Income <input type="checkbox"/> Savings of £1,000,000 or more taking account of the overall impact of the decision			<input checked="" type="checkbox"/> Revenue <input type="checkbox"/> Capital
Significant impact on communities living or working in two or more wards in the City			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Total value of the decision: Nil			
Wards affected: ALL		Date of consultation with Portfolio Holder(s): 16/12/15	
Relevant Council Plan Key Theme:			
Strategic Regeneration and Development			<input type="checkbox"/>
Schools			<input type="checkbox"/>
Planning and Housing			<input type="checkbox"/>
Community Services			<input type="checkbox"/>
Energy, Sustainability and Customer			<input type="checkbox"/>
Jobs, Growth and Transport			<input type="checkbox"/>
Adults, Health and Community Sector			<input checked="" type="checkbox"/>
Children, Early Intervention and Early Years			<input type="checkbox"/>
Leisure and Culture			<input type="checkbox"/>
Resources and Neighbourhood Regeneration			<input type="checkbox"/>
Summary of issues (including benefits to citizens/service users):			
<p>In response to the Winterbourne View report 2014, Nottingham City Council in partnership with Nottingham City CCG needs to increase the number of providers who have the ability to deliver robust, high quality community provision. This will enable people with a learning disability and/or autism who have previously been placed inappropriately in hospital, because they present challenging behaviour and/or complex mental health problems to live safely in the community, with the right level of support and enablement to manage and reduce their risks appropriately.</p> <p>To enable this, a Framework Agreement of appropriately qualified and experienced providers will be procured and established. Individual placements can then be called off, on a case by case basis using a mini competition process, to establish the most appropriate provider to meet their needs.</p>			
Exempt information:			
None			
Recommendation(s):			
1 To approve the proposal to establish a Framework Agreement for Enhanced Care Support and Enablement, with the capacity of meeting the complex needs of citizens in the community. The framework will run for two years from inception.			
2 To delegate authority to the Director of Procurement and Children's Commissioning to award the outcome of the tender.			
3 To delegate authority to the Head of Procurement and Contracting to award contracts.			

1 REASONS FOR RECOMMENDATIONS

- 1.1 Nottingham City needs to develop a mechanism for swiftly identifying suitable providers with the tenacity experience, skills and robust processes required to deliver Enhanced Care Support and Enablement (CSE), to look after citizens with challenging behaviour and complex needs and respond appropriately when they present a risk. The current framework of CSE providers is unable to meet the high needs of this particular cohort of citizens. It is therefore necessary to develop a bespoke Framework for enhanced needs.

2 BACKGROUND (INCLUDING OUTCOMES OF CONSULTATION)

2.1 Winterbourne

The Winterbourne View scandal, exposed by the Panorama programme, shocked the nation. It led to the Government pledge to move all people with learning disabilities and/or autism inappropriately placed in such institutions into community care. Not only has there been a failure to achieve that movement, there are still more people being admitted to such institutions than are being discharged. Subsequently there has been a cross-government commitment to transform care and support for people with a learning disability and/or autism who display behaviour that challenges, including behaviour that can lead to contact with the criminal justice system. This is focused on building up community capacity and reducing inappropriate hospital admissions.

2.2 Transforming Care for people with learning disabilities

NHS England, the Local Government Association and Association of Directors of Adult Social Services announced on 12 June 2015 that five “fast track” areas were being established that would be the forerunners of transformation of services for people with a learning disability and/or autism and challenging behaviours, or a mental health condition. The fast track areas were asked to submit a transformation plan by 7 September 2015 which described how they would strengthen community services, reduce reliance on in-patient beds (non-secure, low and medium secure) and close some in-patient facilities.

2.3 Service model for commissioners of health and social care services

A national service model for those with learning disabilities and/or autism spectrum disorders was published on 30 October 2015 which includes national planning assumptions for re-designing services. All areas of the country will be expected to undertake transformation within learning disability services in line with the new service model and this will be reflected in the planning guidance for 2016 / 2017.

2.4 Nottingham City Enhanced CSE

Citizens who are in hospital setting are funded 100% by the Clinical Commissioning Group, however when they transition to the community the share of financial responsibility will be one of the following: 30/70; 50/50; or 70/30 CCG/LA split. Due to the complexity of citizens needs the cost of care will be expensive. The average cost of care is £2,162 per week based on the cohort who have been resettled over the last year. There are projected to be 7 people requiring a bespoke community placement during 2016/17. The framework will exist for 2 years after which it is proposed that it will be integrated within a revised Care Support and Enablement commissioning process to be developed as part of the Whole Life Disability Strategic

Commissioning Review Outcomes Based commissioning will be intrinsic with the development of the framework with the intention of making savings following effective transitions, management of risks and changing behaviour to live securely in the community.

3 OTHER OPTIONS CONSIDERED IN MAKING RECOMMENDATIONS

- 3.1 Utilise the current CSE framework. This option is not recommended as providers are unable to offer the level of service required within the current CSE Framework.

4 FINANCE COMMENTS (INCLUDING IMPLICATIONS AND VALUE FOR MONEY/VAT)

- 4.1 The purpose of this report is to set up an effective framework for procuring care for citizens with learning disability and/or autism who have complex needs. Previous arrangements are not suitable for the level of needs displayed by the citizens concerned.
- 4.2 The value of work procured through this mechanism in 2016/17 is likely to be around £1.6 million, shared between the City Council and the CCG. However the approval to incur that expense will be subject to further decision processes as there is no provision at this stage in the MTFP.

5 LEGAL AND PROCUREMENT COMMENTS (INCLUDING RISK MANAGEMENT ISSUES, AND INCLUDING LEGAL, CRIME AND DISORDER ACT AND PROCUREMENT IMPLICATIONS)

- 5.1 This framework will sit alongside the existing CSE framework, providing a mechanism for swiftly identifying and appointing an appropriate provider for complex needs CSE cases at a level of provision that is not available under the current CSE framework. A mini competition process can be conducted with all providers for each placement, through the Due North procurement portal, ensuing an open and fair mechanism for securing the most suitable, and greatest value for money placement
- 5.2 The Enhanced CSE framework will be put in place for two years to tie in with end date of the existing CSE framework, this will enable the two services to be procured together in the future under a single contractual mechanism.
- 5.3 The value of the framework requires it to be tendered according to EU regulations under the light touch regime. An EU compliant process will be undertaken.
- 5.4 There are no significant legal issues as a formal procurement will be undertaken.

6.1 SOCIAL VALUE CONSIDERATIONS

- 6.1 Social Value is inherent in the subject matter of this procurement, as a service to meet the needs of vulnerable citizens. However the possibility for creating additional social value (for example generating employment and training opportunities) will be considered as part of the procurement process

7 REGARD TO THE NHS CONSTITUTION

7.1 Not applicable

8 EQUALITY IMPACT ASSESSMENT (EIA)

8.1 An EIA is not required because the purpose of this report is specifically about responding to the national Transforming Care Agenda which addresses the need to increase services in a community setting to meet the needs of citizens who are vulnerable, and have in the past been denied a full and equal life, and to prevent this happening in the future.

9 LIST OF BACKGROUND PAPERS RELIED UPON IN WRITING THIS REPORT (NOT INCLUDING PUBLISHED DOCUMENTS OR CONFIDENTIAL OR EXEMPT INFORMATION)

9.1 None

10 PUBLISHED DOCUMENTS REFERRED TO IN THIS REPORT

10.1 Winterbourne View – Time For Change - Transforming the commissioning of services for people with learning disabilities and/or autism

10.2 Transforming care for people with learning disabilities January 2015

10.3 Ensuring quality services publications gateway reference 01197

10.4 Service model for commissioners of health and social care services October 2015

11 OTHER COLLEAGUES WHO HAVE PROVIDED INPUT

11.1 Kate Lowman – Procurement Category Manager Social Care

11.2 Ian Greatorex – Finance Business Partner Community Services

11.3 Andrew James – Team Leader - Commercial and Contracts Legal Services