



`Help when people need it` – time limited targeted help to support people to remain independent at home

- a commissioning plan



Contents

| | | |
|------|--|----|
| 1.0 | Introduction..... | 3 |
| 2.0 | Purpose of Document..... | 3 |
| 3.0 | National Context..... | 3 |
| 4.0 | Strategic Outcomes | 4 |
| 5.0 | Bristol City Council’s Three Tier Model for Care and Support | 5 |
| 6.0 | Principles of co – production | 6 |
| 7.0 | What people said in the consultation | 7 |
| 8.0 | The Future..... | 7 |
| 9.0 | Outcomes | 7 |
| 10.0 | Measuring Success..... | 8 |
| 11.0 | Expected Numbers and Demand..... | 9 |
| 12.0 | Investment..... | 10 |
| 13.0 | What we want to buy | 10 |
| 14.0 | Purchasing Plan | 12 |
| 15.0 | Estimated Timeline for Commissioning Process..... | 15 |
| 16.0 | Related Documentation..... | 15 |

1.0 Introduction

Bristol City Council currently spends 6.1 million pounds from its health and social care budgets on a wide variety of services that are all looking to prevent people from needing long term care and/or support. In this commissioning plan we will tell you what we currently buy and who for. We will make some suggestions as to how we want to spend this money in the future. We want to spend this money so that it has the most impact for people with care and/or support needs.

2.0 Purpose of Document

This commissioning plan reflects the key principles of the co- production work between Bristol City Council and people interested in housing related support for people with care and/or support needs. It has been written as a result of listening to feedback from people. The feedback has been about what has worked for them and experiences of using and working with what used to be called `Supporting People` services. We have also talked to people about what support they might need in the future to help them become and remain independent where they live.

This draft commissioning plan will form the basis for formal consultation on how Bristol City Council buys the right type of support for people with care and/or support needs in the future.

3.0 National Context

The Supporting People programme was launched in 2003 as a £1.8 billion ring fenced grant to local authorities intended to fund services to help people with care and/or support needs live independently.

The level of the grant was reduced in subsequent years, and in the 2010 Spending Review the Government announced that the Supporting People national funding levels would decrease from £1.64 billion in 2010/11 to £1.59 billion in 2014/15.

In 2009, the ring fence was removed and became part of local authorities' general funds allowing them to spend their Supporting People allocation as they deemed appropriate.

There has been debate as to the effectiveness of the programme and an assessment was undertaken for the Department for Communities and Local Government in 2009. CapGemini calculated that the net financial benefits of the programme were £3.41 billion.

Many local authorities have already recommissioned, re-designed and in many cases decommissioned services previously funded by supporting people grants. In turn, providers have also adapted their services to meet changing contractual and funding requirements.

In 2017/18 the government recently consulted on a new 'flexible funding approach'¹ for the supported housing sector that was due to come in to effect from April 2020 which included housing costs for sheltered, extra care accommodation and for short-term supported accommodation. They concluded though, after this consultation, that they would not make any of the proposed changes and that the costs of supported housing would remain in the welfare system through the distribution of housing benefit.

4.0 Strategic Outcomes

The Bristol City Council market position statement for Adult Social Care outlines the strategic vision for meeting the demand for care and support in Bristol. The document acts as a steer for discussions between Bristol City Council and service/support providers in particular voluntary and community sector organisations, small and medium sized enterprises (SMEs) and entrepreneurs.

BCC Corporate Strategy 2018-23

Empowering and Caring:

Work with partners to empower communities and individuals, increase independence and support those who need it. Give children the best possible start in life.

Fair and Inclusive:

Improve economic and social equality, pursuing economic growth which includes everyone and making sure people have access to good quality learning, decent jobs and homes they can afford.

Well Connected:

Take bold and innovative steps to make Bristol a joined up city, linking up people with jobs and with each other.

Wellbeing:

Create healthier and more resilient communities where life expectancy is not determined by wealth or background.

Mayor's Vision: To ensure life chances and health are not determined by wealth and background. The Mayor has set out his vision for the City in the strategic plan 2018 – 23. In it he talks about how the City needs to be empowering and caring 'working with the city to empower communities and individuals, increase independence and help support those who need it.'

One of the main ways the strategy sets out to achieve this is by 'providing 'help to help yourself' and 'help when you need it' through a sustainable, safe and diverse system of social care and safeguarding provision, with a focus on early help and intervention'.

The strategy says that we will know if this objective has been successful if we can measure 'an increase in the proportion of service users being supported in their own homes and reducing the number of people in institutional care'.

¹ Funding for Supported Housing Government Response to Two Consultations

Better Lives programme: This is a programme of work in Bristol City Council's adult social care department that aims to maintain quality services with people at the heart of what we do and make cost savings whilst holding our ambition to improve outcomes.

Adults Social Care Strategic Plan 2016-2020: People can get the right help at the right time to promote independence and to prevent, reduce or delay the need for long-term support.

The proposals in this commissioning plan will help Bristol City Council to meet these strategic objectives.

5.0 Bristol City Council's Three Tier Model for Care and Support

Bristol City Council is using a new way to help people work out what support they need. We call this our 'strengths based approach'. This means we will ask people about what they can do for themselves; this approach starts with working with people to make the most of their own strengths, those of the people who support them, and the wider community around them.

The Three Tiers of support in the model are:

Tier 1 – Universal support for all Bristol citizens 'Help to help yourself'.

Tier 2 – Targeted support for citizens who have care and/or support needs to get 'Help when you need it'.

Tier 3 – Longer term services for people with needs that are eligible under the Care Act – people who are always likely to need support to "Help to live your life well."

The key principles behind this are:

- It will not be assumed that the provision of long term formal services is the only or best way forward for everyone with support needs. Many people can be supported to achieve the outcomes they aim for with informal support through family, community and neighbourhood, for example if someone is feeling lonely or isolated then attending a local group in their community might help them to feel more connected with other people (Tier 1).
- Some people will need periods of intense support to achieve an outcome. For example if someone has been in hospital and needs help when they first come home, a young adult with learning difficulties may need help to access employment or longer term but very low level support to help them maintain their independence in their home (Tier 2).
- Others will require longer term formal support such as home care or residential support (Tier 3). This support should always focus on maximising the person's independence and offer support from the other tiers in addition to this support where this will help someone to achieve the outcomes that they want to achieve.

We will always consider whether we can meet a person's 'eligible needs' under the Care Act in the least intrusive and most empowering way that we can by

signposting or introducing them to universal community services (Tier 1) or by providing an outcome focused shorter term service (Tier 2). We will only buy very long term services (Tier 3) for people who have had a Care Act assessment by a social worker and that assessment says they need support to help them live their lives well.

6.0 Principles of co – production

The Adult social care commissioning team and other colleagues in Bristol City Council have taken what we call a co-production approach to our plans for the future. We recognise that in order to get the right support for people we need to ask the people who might need this support and people who provide this support what they think.

At the beginning of this co-production work we asked people how we can work together to do this. They agreed that we should work with the following principles in mind.

Honest /open/transparent

- ❖ Openness/open minded to ideas
- ❖ Transparency and honesty

Involve Service users/customers

- ❖ Service user involvement throughout
- ❖ Accessible
- ❖ Strength based approach

Responsive

- ❖ Easy flow of information
- ❖ Consult all stakeholders
- ❖ Listen to others

Collaborative

- ❖ Joined up funding
- ❖ Sharing good practice and knowledge
- ❖ Self-evaluation of services/flexible to change
- ❖ Work together/design together
- ❖ Non-competitive and collaborative

Positive

- ❖ Can do approach
- ❖ Innovation

7.0 What people said in the consultation

To be added to after the formal consultation period.

8.0 The Future

To help us to understand how we should spend some of our money in the future we have completed a `needs analysis`. To do this we looked at data from Bristol's Joint Strategic Needs Assessment (Smith, 2018) and data from the services that are being delivered at the moment - the services that used to be called supporting people services. The services we are talking about are listed in another document that you can find at the end of this plan.

As well as looking at the data we have also asked people who use the services at the moment and the people who provide these services how we should spend this money in the future and what sort of help people need to stay independent for as long as they can.

This is what they said to us - the plan for the future is that the help that people get:

- will align with other support for adults in Bristol to ensure that they form part of a network and agreed pathways of support available to adults with care and/or support needs in the City
- will align with the 3 Tier model and Better Lives programme (see section 4.0)
- are inclusive and accessible making reasonable adjustments to enable diverse people to access them
- are flexible in the support that they offer – people can get the right service for them when they need it and are supported to increased independence
- will work with people in a positive way - people are asked about what they can do and what they want to achieve in life
- are time bound and focussed in the support they offer
- will be simple for people to get support again in the future if they need to
- will have clear pathways in and out of services

9.0 Outcomes

We want services that we buy to support people to take an `**outcome based** approach`. By that we mean that the help that they offer should have a positive impact on a person's life. This can be an action taken or a service delivered. **Outcome based** approaches place the needs of the individual at the centre of service delivery.

Achieving an outcome is a personal thing but we have looked at some of the types of outcomes that we would expect this help to achieve. The service providers that will be asked to do this work will need to first understand the very specific outcomes that individual's

want help to achieve and work with them to do that. The following are some examples of the types of outcomes we would want to see achieved.

- People are living in housing that is well maintained and suitable for their needs
- People are able to look after their health and wellbeing and remain well
- People feel that they are treated with dignity and respect
- People have the opportunity to be involved in work, training or activity that suits their skills and interests
- People are connected with their community and have the social life they want
- People are able to manage their money and financial affairs

10.0 Measuring Success

The City Council has measured the current services through their utilisation and through a quality assurance framework. The majority of the providers of the services have also measured outcomes that they have achieved with service users. The City Council has only required the mental health floating support services to report to us on their outcomes.

There is evidence that services are of a good quality, are well utilised (where they are not funding is returned to the Council) and are achieving outcomes. Services cannot be currently compared or benchmarked on these outcomes as they are being measured in different ways at the moment.

In the future success will be measured through both outcomes and outputs of the services we buy.

Outcomes - services will be measured using an agreed standard of outcome measurement. We will measure success by how effective people are at meeting agreed outcomes with service users as outlined in **Section 9.0. – Outcomes**.

Outputs – services will be measured on a variety of outputs that are relevant to the service provided. These will be:

- numbers of people using the service
- the through put of service users
- inclusivity of services provided (equalities/demographic information)
- number of people who remain independent

Quality – will be measured using the City Council's Quality Assessment Framework

11.0 Expected Numbers and Demand

We want to have help in place for people `when they need it` and in a way that meets their needs where they live or in their community. Help will be time limited and focussed on helping people stay in their own homes and tenancies. We know that Bristol has an ageing population and that this will gradually increase over the next few years.

The current mental health floating support services have seen significant demand and have consistently had a waiting list of people looking to access support. 6.8% of Bristol residents reported a low life satisfaction score, significantly more than nationally (4.8%) 2014/15 and our local data shows 13% have “below average mental wellbeing”, but significantly more in deprived areas (20%).ⁱ

Overall there has been a steady decline in the numbers of adults with learning disabilities living in both residential care and nursing care. More people with learning disabilities are living and being supported in community settings, including supported living. It is therefore likely that the demand for `help when you need it`, for people with a Learning Disability, will grow.

- Older people are living for longer and with the likelihood of being diagnosed with Dementia.
- An increase in mental health disorders locally above the national trend and comparatively (core city comparison).

| People needing support | Current number – snapshot at given time | Future demand – 5 year projection |
|------------------------|---|-----------------------------------|
| | | |
| Older people | 1031 | 1062 |
| | | |
| Working age adults | 1581 | 1660 |

We understand that demand for these services is likely to stay the same or grow in the next few years. We do not anticipate at the moment that we will have any more money to buy this help with unless we are spending less money elsewhere in the system; for example if less people are moving in to higher cost residential type placements then there might be more money available for `help when you need it` services.

We will make this very clear at the start of this work with people who might provide these services in the future and we will ask them, as part of this process and the contracts we agree with them, how they can make their services flexible in the future if demand for them increases.

12.0 Investment

Bristol City Council has a budget of £4,746,801 to spend on external services and a further £1,370,570 to spend on internal services.

Total £6,117,371

Current investment

We currently spend this budget on the following services.

| Service type | Who gets the service | How many current service providers | Number of service users at any one time |
|---|--|------------------------------------|---|
| Sheltered housing | Older people (55+) - residents living in sheltered housing schemes | 7 | 825 |
| Floating support | Adults with care and/or support needs | 16 | 1127 |
| Mental health community support | People with MH issues and carers | 1 | 451 |
| Accommodation based support | People with a learning disability and or mental health issue People with sensory issues | 18 | 164 |
| Welfare rights, advice and money service (WRAMAS) | All above and advice/training to service providers | 1 | N/A |

13.0 What we want to buy

`Help when you need it` for older people – health, wellbeing and housing related support in sheltered housing and in the community.

The help will have City wide impact and will support older people to continue to remain living as independently as they are able to. These services will support the Council's 3 Tier model by intervening and offering help `when people need it` that is time limited and targeted at older people. This help would be for older people encountering some difficulties and might need support to help them to access health care, maximise their finances, budget successfully or access their community.

The service will work with people who are in both/either sheltered accommodation for people 55+ and people living in the community or in their own tenancies/private housing.

The key elements of this/these service/s is that it/they will:

- Focus on outcomes to be achieved with older people
- Be time limited
- Easily accessible if people needed to come back to the service
- Work in an integrated way with other providers and parts of the social care system e.g. GP services/ hospitals
- Maximise independence, finance, health and well being
- Services will be accessed through agreed referral routes but will operate a `no wrong door` policy so that people are re-directed successfully to the service that will best help them when they need it.

`Help when you need it` for working age adults – health, wellbeing and housing related support for people in the community.

This help will have City wide impact for people who have additional support needs that relate to their mental health, physical health and autism and or learning difficulties to continue to remain living independently where they live. These services will support the Council`s 3 Tier model by intervening and offering help `when people need it` that is time limited and targeted to their needs. People who might not yet need care services but do need support to help them to access health care, maximise their finances, budget successfully and access their community.

The key elements of this help is that it will:

- Focus on outcomes to be achieved with people
- Be time limited
- Be easily accessible if people need to return for further support
- Work in an integrated way with other providers and other areas in peoples` lives e.g. GP services/ mental health services/housing services
- Maximise independence, finance, health and well being
- Services will be accessed through agreed referral routes but will operate a `no wrong door` policy so that people are re-directed successfully to the service that will best help them when they need it.

What does City wide impact mean?

This help will need to have a city wide impact but does not necessarily have to be delivered by a City wide provider. Access to this support will be based on need rather than where someone lives. Services that provide this help will be expected to understand the localities that people are living in to ensure they are able to make links with local support networks and `Tier 1` support available locally.

14.0 Purchasing Plan

Bristol City Council is considering the following options in how to buy the help that we need in the future to support adults with care and/or support needs `when they need help.`

We wish to have contracts that are sustainable and meet the needs of services users so we can rely on effective service delivery to ensure people get help quickly and effectively. We would expect to be awarding contracts for at least 3 years with options to extend for up to a further 3 years.

Option 1 - Purchase from existing framework

Targeted help to older people in the community/working age adults

Undertake a mini competition for block contracts using the existing Community Support Service framework. Block contracts would enable us to purchase help for a number of people at any given time – we would pay for usage of the service and achievement of outcomes - if there is any underutilisation we would require money to be returned to the Council.

Draw up a new specification for the service/s required in line with this commissioning plan and tender or negotiate new contracts.

Targeted help to older people in sheltered housing

The Council has issued a Prior Information Notice (PIN) – we will be holding a market event to test who in the market place of providers would be interested in providing this service. If existing providers only come forward in response to the PIN then the Council will seek to negotiate with them directly.

Draw up a new specification for the service/s required in line with this commissioning plan and negotiate new contracts.

If additional candidates come forward in response to the PIN notice issued the Council will proceed with an open tender process as below.

| Pros | Cons |
|---|---|
| The majority of providers that we currently use are signed up to the framework or could apply to be on it | A full documentation review would be needed to be undertaken to ensure that the Contract is fit for these services. |
| It can be flexible - Mini call offs can be made without advert to respond to demand | Providers not on the CSS Framework will need to apply to get on it |
| It is a compliant procurement process | The CSS framework is explicit that people must be eligible under the Care act. Some people accessing this help will not have been assessed by social care practitioners |

| | |
|---|--|
| Utilises our existing framework – we can therefore focus on the quality questions for the service | |
|---|--|

Option 2 - `Help when you need it framework` - open tender process

Targeted help to older people in sheltered housing, in the community and working age adults

The Council will issue an Official Journal of the European Union (OJEU) Notice – hold a market event to test who in the market place of providers would be interested in providing this service.

Draw up a new specification for the service/s required in line with this commissioning plan. The Council will proceed with an open framework process to access the `help when you need it framework`. We would then block purchase the help needed from this framework. We would pay for usage of the service and achievement of outcomes - if there is any underutilisation we would require money to be returned to the Council.

We could use the framework in the future to buy other services should we need them.

| Pros | Cons |
|--|---|
| The process is transparent | More resource intensive as providers will need to get on the framework and apply for blocks |
| The quality of the providers can be thoroughly tested | Negative impact on the market and relationship with providers |
| Rationalisation of the supplier base can take place | |
| Ensures value for money | |
| If demand increases and resources allow we can purchase additional help in line with the service specification | |
| Eligibility can be expanded beyond Care Act eligibility criteria | |

Option 3 – open tender process

Targeted help to older people in sheltered housing, in the community and working age adults

The Council has issued a Prior Information Notice (PIN) – we will hold a market event to test who in the market place of providers would be interested in providing this service.

Draw up a new specification for the service/s required in line with this commissioning plan and undertake an open tender process and award new contracts.

If additional candidates come forward in response to the PIN notice issued the Council will proceed with an open tender process. This would be a competitive process and the successful tenderer/s would deliver the agreed service specification.

This would be a one off process and no additional work other than that specified could be called off using this approach.

| Pros | Cons |
|--|---|
| The process is transparent | More resource intensive as providers will need to get on the framework and apply for blocks |
| The quality of the providers can be thoroughly tested | Negative impact on the market and relationship with providers |
| Rationalisation of the supplier base can take place | Limited options for future demand growth |
| Ensures value for money | Lack of flexibility as a single process |
| Eligibility can be expanded beyond Care Act eligibility criteria | |

15.0 Estimated Timeline for Commissioning Process

| Milestone | Date |
|--|------------------------|
| Publish commissioning plan | March 2018 |
| Consultation process | March – April 2019 |
| Co – production work to finalise plan and specifications | March – June 2019 |
| Cabinet decision | June 2019 |
| Tender published | August 2019 |
| Contract award | November 2019 |
| Contract implementation period | December 19 – March 20 |
| New services go live date | April 20 |

16.0 Related Documentation

Equalities Impact assessment

Consultation Documentation

i 2016/17 Bristol JSNA