

## Item No. 8

Meeting Date Wednesday 7th November 2018

# Glasgow City Integration Joint Board

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# TENDER FOR A SPECIALIST CARE HOME SERVICE TO SUPPORT PEOPLE WITH LEARNING DISABILITIES REQUIRING COMPLEX CARE

Purpose of Report:	To inform the IJB of the intention to proceed with an open tender for a 15 person specialist care home for adults with learning disabilities requiring complex care.	
Background/Engagement:	The need for a newly procured specialist service to support people with Learning Disabilities who are inpatients in Tier 4 services is referenced in the HSCP's Adult Services  Transformational Change Programme 2018-21.	
Recommendations:	The Integration Joint Board is asked to:  a) note the contents of this report; and b) direct the Council to advertise the requirement for a 15 bed specialist care home to support people with learning disabilities requiring complex care, and once the procurement exercise is complete, award the contract for the specialist care home to the successful bidder.	

#### Relevance to Integration Joint Board Strategic Plan:

The development of a specialist care home for adults with learning disabilities requiring complex care aligns with the aspiration of the Partnership to deliver support at the right time, in the right place, and from the right person, and to provide health and social care services in local communities where possible. It will also enhance GCHSCP's ability to provide alternative pathways to prevent hospital admission and support the Partnership's key priorities of shifting the balance of care and enabling independent living for longer. Improving performance in relation to delayed discharges remains a core priority of the HSCP. Glasgow faces a particular challenge in relation to providing suitable social care alternatives to hospital provision for adults with a learning disability requiring Complex Care.

# Implications for Health and Social Care Partnership:

Reference to National Health & Wellbeing Outcome:	Outcome 2: People, including those with disabilities or long term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community.	
Personnel:	The tender and associated consultation and engagement will be delivered by the HSCP Disabilities Commissioning team. Additional input will be required from Legal colleagues, Corporate colleagues, Care Managers, Finance colleagues and NHS practitioners and planners who are currently involved in the assessment and treatment of NHS tier 4 patients and others with learning disabilities requiring complex care.	
Carers:	Carers, Families and Guardians of adults who are anticipated to	
	access the new care home service are aware that discharge options from Tier 4 services are being explored and will be consulted on the development and design of the new service.	
Provider Organisations:	The project will include engagement with the Learning Disability Provider marketplace including organisations experienced in providing complex care services.	
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Equalities:	An Equalities Impact Assessment has been undertaken. Positive impact has been identified and some of the key points summarised as follows: For adults with learning disabilities and very complex needs who have spent the majority of their lives in institutional care settings or hospital care, the development of a specialist care home in Glasgow offers a unique opportunity to experience living in an alternative environment closer to community connections. The specialist care home will also offer for opportunities for adults to develop skills for independent living with the goal of moving on to even more independent models of support. The full report can be accessed at:  https://glasgowcity.hscp.scot/sites/default/files/media/file_storage/EQIA%20-%20Learning%20Disability%20Specialist%20Residential%20Care%20Home.pdf	
	<u>are %20Horne.pdr</u>	
Financial:	The estimated annual recurring cost of this service is circa £2.7 million. This will be funded from Health Board Resource Transfer available for Long Stay Tier 4 patients, current budget provision for existing service users which will transfer with them, and new demand assumptions.  This financial framework will require service users identified for the service to match these funding assumptions.	
	Non recurring startup costs will require to be identified.	

Legal:	Any procurement exercise for accommodation and care services will be carried out in accordance with the Standing Orders Relating to Contracts 2016 and the Public Contract (Scotland) Regulations 2015 and advice from the Executive Director of Corporate Services.
Economic Impact:	Specialist care home placements of the type being procured are expensive relative to other types of care home placement. Closure of long stay tier 4 hospital wards at Netherton and Waterloo and reconfiguration of learning disability tier 4 assessment care and treatment beds, as articulated in the NHS Board's 2012 'Strategy for the Future' has created the need to develop alternative services to support people with the most complex needs previously assessed as requiring hospital based care. Resource release funding of between £120k and £130k per annum for up to 9 service users has been agreed between East Renfrewshire HSCP and Glasgow City HSCP to part fund the new service models.
Sustainability:	The project will require to be delivered by a provider experienced in supporting people assessed as requiring
	complex care, and which can demonstrate positive experience and commitment to appropriate, person-centred and value based approaches to challenging behavior. In order to be sustainable, the service will require robust, planned and proactive in reach support from a range of Health practitioners. Robust care and contract management will also be key to the success of the service. The contract price will need to reflect market rates for similar services and make provision for void periods in the care home and regular building repairs. Following further analysis it may be advantageous to specify a
	low carbon building for this new service.
Sustainable Procurement and Article 19:	No Issues identified
Risk Implications:	There are a range of risk implications associated with this Tender which are described later in this report. The risks can be categorised as:  • Financial
	<ul><li>Sustainability of service</li><li>Reputational</li></ul>
Implications for Glasgow City Council:	<ul> <li>This project represents a significant opportunity for the Council to work in partnership with key stakeholders to develop a new and strategically important service within our boundaries. The commissioning of this specialist care home offers multiple benefits including:</li> <li>Increasing the range of service models available to people with learning disabilities assessed as requiring complex care in Glasgow.</li> </ul>

<ul> <li>Allowing some people to move on from specialist Hospital provision.</li> </ul>
<ul> <li>Allowing some complex people placed out of authority the opportunity to return and receive services in Glasgow.</li> </ul>
Promoting better service user access to family and friends     who will have less far to travel to a service within our
boundaries
<ul> <li>Supporting complex service users to continue to access GCHSCP health services</li> </ul>
<ul> <li>Enabling proactive care management and professional support to complex service users</li> </ul>
<ul> <li>Allowing proactive contract/performance management of the awarded provider</li> </ul>
<ul> <li>ASP/AWI will be within the Glasgow jurisdiction.</li> </ul>

Implications for NHS	
Greater Glasgow & Clyde:	Care Home with Glasgow's borders is supportive of the Health
	Board's 2012 'LD Strategy for the Future' Policy. It will also
	support the re-design of specialist Learning Disability in-patient
	services which are hosted by East Renfrewshire Health and
	Social Care Partnership.

Direction Required to	Direction Required to Direction to:	
Council, Health Board or	No Direction Required	
Both	2. Glasgow City Council	✓
	NHS Greater Glasgow & Clyde	
	4. Glasgow City Council and NHS Greater Glasgow & Clyde	

#### 1. Purpose

- 1.1 The purpose of this report is to inform the IJB of the intention to go to open tender for a preferred bidder to deliver a specialist 15 bed care home for adults with learning disabilities assessed as requiring complex care. The national strategy for Learning Disability: The Keys to Life (2013) defines complex care as a term to "describe people with learning disabilities who require more intensive support. This includes people with challenging behaviour, autism spectrum disorder, mental health needs, people with profound and multiple disabilities, offending behaviour or a combination of these."
- 1.2 The care home will seek to support people who present severe challenges defined by Emerson (1995) as follows: "...severely challenging behaviour refers to culturally abnormal behaviour(s) of such an intensity, frequency or duration that the physical safety of the person or others is likely to be placed in serious jeopardy, or behaviour that is likely to seriously limit use of, or result in the person being denied access to ordinary community facilities."
- 1.3 For the majority of people who will be considered for the new service, challenging behaviour has been a long-term and chronic issue in their support. In recognition of that fact, 12 of the beds will be used as medium/long stay beds. The care home service will be based on a Positive Behaviour Support approach which uses a range

of pro-active and reactive strategies to address challenging behaviour. It is envisaged that, as a result of the specialist input the care home will provide, some people will be able to move on from the service into less supported/more independent service models such as supported living. This will enable others who require complex care to access the service.

- 1.4 The additional 3 beds in the service will be designated as short stay and will be available for use by people in emergencies or where their usual support is breaking down. The creation of these beds will enhance GCHSCP's ability to support people requiring complex care, and who are in difficulties, to remain in the community and offer a viable alternative to some admissions to specialist in-patient beds. The provision of the 3 short-stay beds will help to mitigate any negative impact of the planned reconfiguration of Tier 4 Hospital Assessment Care and Treatment beds which will result in an overall reduction in the number of hospital beds available to complex adults with learning disabilities in Glasgow.
- 1.5 The creation of the specialist care home service is part of a range of proposals being considered in relation to supporting people with learning disabilities requiring complex care. Other proposals include the further development of single site, robust supported living services (sometimes known as core and cluster services) and increased partnership working with specialist hospital services, hosted by East Renfrewshire Health and Social Care Partnership. This will focus on more flexible use of the in-patient resource to support discharge from and prevent re-admission to specialist hospital beds. Changes to be explored include:
  - Hospital staff offering outreach support to patients who have been discharged to alternative service models. This would help some people to transition and assist the new provider to develop their skills and confidence in supporting the person going forward.
  - In-patient service offering in-reach support to people who have been discharged/or are at risk of re-admission. An example of in-reach support is hospital based day support for people who have been discharged or who may require more intensive day support for short periods to provide an alternative to hospital admission during periods of crisis.
  - Development of alternative pathways to provide provision for short term increased day support within learning disability day services to support people for short periods as an alternative to hospital admission.
  - Development of clearly defined pathways for in-reach support from integrated Community Learning Disability services to prevent hospital admission
- 1.6 The figures available suggest that Glasgow has sufficient existing and projected demand to justify the development of a specialist care home based in Glasgow for people with learning disabilities assessed as requiring complex care. A desktop review found a requirement for alternative robust community based services for around 35 people. The planned care home service will allow GCHSCP to meet some of the demand for community care services for complex service users arising from the following:
  - Closure of 2 learning disability long stay Tier 4 wards resulting in requirement of alternative services for 9 service users.
  - Growing pressure to develop alternative robust services for complex people ready to move on from Tier 4 Assessment Care and Treatment beds – there

- are currently circa 15 people requiring robust community based services to replace hospital provision.
- Increased ability to provide services in Glasgow City for complex people who have been placed in services out with the City. Currently circa 6 people.
- Increased ability to provide a robust residential service to people whose living arrangements in the community are untenable in the longer term and who seem to prefer to be supported in nursing/residential models of care. Estimated 4 people.
- 1.7 A full range of service options will be considered for all of the above service users: some will move into existing robust supported living services, and GCHSCP will be looking to develop new robust supported living services, as required going forward. However Glasgow currently has no commissioned specialist care home services for people with learning disabilities requiring complex care, within its boundaries. A number of the complex people currently supported in Tier 4 Hospital have not managed to be supported successfully in supported living models previously and seem to better tolerate more institutional models of service such as hospital or residential care. The development of a specialist care home would increase the range of models of care available in Glasgow and allow some of these people the opportunity to be supported within the city rather than being placed out with Glasgow.

#### 2. Procurement Issues (Accommodation and Support)

- 2.1 GCHSCP will seek bids from organisations which can provide well-designed accommodation, supply and deliver/manage care within the accommodation. It is crucial that the accommodation and service is situated within the Glasgow City boundary to enable GCHSCP to take a holistic approach to the support of the service users and retain full responsibility for the provision of health services, fieldwork services (including Adult Support and Protection) and contract management. Where the successful provider will be committing to significant capital expenditure, GCHSCP will look to guarantee revenue funding to the successful provider for a minimum of 5 years, subject to satisfactory performance.
- 2.2 Well designed accommodation which is fully adapted to meet the needs of complex residents, is key to the success of the service as a whole. GCHSCP will consider bids from providers which includes the provision of accommodation which is either new/purpose built or adapted from an existing building and which meets the criteria outlined in the accommodation specification developed by GCHSCP. The period of time from contract award to service commencement will be determined by the length of time it takes to deliver suitable accommodation for the Care Home. Estimated indicative timeframes for delivery of new build accommodation is at least 18 -24 months and delivery of accommodation developed from an existing building 12-18 months. Many of the timeframe variables will be beyond the control of GCHSCP.
- 2.3 GCHSCP is cognisant of the fact that the specialist Learning Disability care home market in Scotland has experienced a number of significant and high profile service failures in recent years. In Scotland over the past 2 years, we are aware of 5 specialist robust care home services which have all experienced poor performance issues and 3 of which closed as a direct consequence. The commissioning of this project by GCHSCP, will be underpinned by a genuine partnership approach

between the key stakeholders to maximise the benefits of the opportunity and reduce associated risks. For example, a *User Involvement Group (UIG)* will be established with key representatives from Health and Social Work and there will be regular engagement with Service Users and Carers.

#### 3. Risks

#### 3.1 Limitations of Service Model/Risk of Service Failure

This service development is seeking to provide a robust and sustainable service to individuals who have previously been assessed as requiring hospital care. There is a risk that the needs of some of the individuals being considered for this service may be too complex for them to be supported in a non-hospital setting and that for a few individuals, ongoing hospital care may be required.

A failure of a service of this type has the potential for negative outcomes for service users and significant reputational damage to both the Glasgow City Health and Social Care Partnership and Glasgow City Council. A service failure would likely cause a sudden and urgent need for NHS in-patient care for the specialist care

#### 3.2 **Cost**

home residents.

It is challenging to accurately predict the cost of commissioning a specialist care home at a time of national turbulence in the purchased social care market. The cost of day time support in Glasgow rose by 6% in 2017/18. The upward pressure on costs will continue over the next two years as purchased providers become responsible for implementing the National Living Wage which will continue to rise incrementally alongside anticipated increases in the Scottish Living Wage.

The specialist and robust end of the residential care market is vulnerable to above-inflationary cost increases as supply falls short of demand for placements. Specialist care home facilities have been awarded an increase of 6.34% in 2018 on the Excel LD Care home framework. This compares with an uplift of only 2.4% for less robust LD care homes on the Framework.

Prices advertised for residential 'core' placement fees often mask the final cost to a purchasing body which can rise dramatically when additional hourly support costs are levied on top of the standard 'core' residential fee.

To maintain nomination rights to the care home the HSCP will need to make some provision for payment for void costs when a care home bed is empty.

Three streams have been identified to fund this service: Resource Transfer, budget already allocated to existing service users which will transfer with them, and new demand assumptions. For this service there is a risk that the service users identified for the new service do not match the funding assumptions.

Non recurring startup costs will require to be identified.

#### 3.3 Recruitment and Retention

A contributory factor in the rising cost of social care is the increasing difficulties being experienced by providers in recruiting and retaining staff in the care sector in Glasgow. The inability of providers to maintain a consistent workforce and deliver

management oversight has been a recurring theme in recent Large Scale Investigations in Glasgow.

Despite the fact that we have over 70 social care providers on our Framework it is becoming more difficult to place new business with providers who don't have the staff to expand their market share. This environment creates the condition for a "sellers' market" with some concerning trends: experienced social care staff are exiting the market and moving to less demanding/better paid work or moving between providers.

Providers can become caught in a cycle of recruitment, training and use of agency staff which is ultimately resource intensive, adds to provider's costs and undermines the quality of service user experience. A successful specialist care home of the type being commissioned is dependent on being able to recruit a motivated, stable, experienced and well trained and remunerated staff team to deliver safe and effective outcomes.

#### 3.4 **Meeting Expectations**

It is imperative that all stakeholders, NHS, Social Work, Service Users/Advocates, Providers and Carers understand the model of service being commissioned. This includes the positive service development opportunities and also the limitations of a specialist care home service which is not the same thing as a long stay medical ward in the community. For some adults their presentation in hospital has been less challenging than when community placements have been tested. The structure, routine (and in some cases restriction) in an NHS setting allows for a sense of security for some complex adults.

It is important that the new service maintains an emphasis on working with individuals to prepare them for subsequent placements in less restrictive environments and is based on the ethos that every resident has the potential to move on.

It also needs acknowledging that when tested, some residents of the care home may not be able to be safely supported in a social care setting and might need to return to hospital care.

#### 4. Conclusion

- 4.1 The closure of long stay Tier 4 hospital wards and the reconfiguration of the Tier 4 Assessment Care and Treatment beds, creates a requirement for the development of additional specialist community based services for people with learning disabilities requiring complex care. This would be best met (in part) by a Glasgow based, specialist 15 place care home service.
- 4.2 In addition to the creation of the specialist care home, consideration will also be given to develop more flexible support models in partnership with specialist inpatient and community based health services, as well as exploring the development of specialist robust supported living models for people requiring complex care. This would complement the care home and serve as a 'next step' for those adults who progress to a level of independence that allows them to leave residential care.

#### 5. Recommendations

- 5.1 The Integration Joint Board is asked to:
  - a) note the contents of this report; and
  - b) direct the Council to advertise the requirement for a 15 bed specialist care home to support people with learning disabilities requiring complex care, and once the procurement exercise is complete, award the contract for the specialist care home to the successful bidder.



### DIRECTION FROM THE GLASGOW CITY INTEGRATION JOINT BOARD

1	Reference number	071118-8-a
2	Date direction issued by Integration Joint Board	7 November 2018
3	Date from which direction takes effect	7 November 2018
4	Direction to:	Glasgow City Council
5	Does this direction supersede, amend or cancel a previous direction – if yes, include the reference number(s)	No
6	Functions covered by direction	Specialist Care Home Service for People with Learning Disabilities assessed as requiring Complex Care.
7	Full text of direction	Direct the Council to advertise the requirement for a 15 bed specialist care home to support people with learning disabilities requiring complex care, and once the procurement exercise is complete, award the contract for the specialist care home to the successful bidder.
8	Budget allocated by Integration Joint Board to carry out direction	The estimated annual recurring cost of this service is circa £2.7 million. This will be funded from Health Board Resource Transfer available for Long Stay Tier 4 patients, current budget provision for existing service users which will transfer with them, and new demand assumptions.  This financial framework will require service users identified for the service to match these funding assumptions.  Non recurring startup costs will require to be identified.
9	Performance monitoring arrangements	In line with Glasgow City Council's agreed Contract Management Framework.
10	Date direction will be reviewed	October 2019