

Item No: 16

Meeting Date: **Wednesday 26th June 2019**

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- UPDATE

Purpose of Report:	To update the Integration Joint Board on the activity undertaken since the previous IJB report in November 2018.
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Background/Engagement:	<ul style="list-style-type: none"> • In November 2018 the IJB gave authority for the Council to proceed with an open tender for a 15 person specialist residential service for adults with learning disabilities requiring complex care. • 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. • A programme of engagement with stakeholders is currently underway – see section 4.
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Recommendations:	<p>The Integration Joint Board is asked to:</p> <ul style="list-style-type: none"> a) note the contents of this update report; and b) note that an updated service specification/service model for the new Specialist LD Care Home will be developed following consultation and engagement activity with key stakeholders. This will be presented to the IJB in September for discussion and approval.
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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:

<p>Reference to National Health & Wellbeing Outcome:</p>	<p>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.</p>
<p>Personnel:</p>	<p>The tender and associated consultation and engagement is being 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.</p>
<p>Carers:</p>	<p>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.</p>
<p>Provider Organisations:</p>	<p>The project will include a formal engagement with the Learning Disability Provider marketplace including organisations experienced in providing complex care services.</p>
<p>Equalities:</p>	<p>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</p>
<p>Fairer Scotland Compliance:</p>	<p>The development of a specialist community based alternative to long stay hospital admission is consistent with the IJB's duty to tackle socio-economic disadvantage, in this case, of adults with complex learning disabilities.</p>

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.
Legal:	The procurement exercise for accommodation and care services will be carried out in accordance with the Standing Orders Relating to Contracts 2017 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 behaviour. 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.
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: <ul style="list-style-type: none"> • Financial • Sustainability of service • Reputational
Implications for Glasgow City Council:	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:

	<ul style="list-style-type: none"> • Increasing the range of service models available to people with learning disabilities assessed as requiring complex care in Glasgow • Allowing some people to move on from specialist Hospital provision • Allowing some complex people placed out of authority the opportunity to return and receive services in Glasgow • Promoting better service user access to family and friends who will have less far to travel to a service within our boundaries • Supporting complex service users to continue to access GCHSCP health services • Enabling proactive care management and professional support to complex service users • Allowing proactive contract/performance management of the awarded provider • ASP/AWI will be within the Glasgow jurisdiction.
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Implications for NHS Greater Glasgow & Clyde:	The successful development of a Specialist Learning Disability 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.
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Direction Required to Council, Health Board or Both	Direction to:	
	1. No Direction Required	✓
	2. Glasgow City Council	
	3. NHS Greater Glasgow & Clyde	
	4. Glasgow City Council and NHS Greater Glasgow & Clyde	

1. Purpose

- 1.1 To update the IJB on the activity undertaken since the previous IJB report in November 2018. <https://glasgowcity.hscp.scot/publication/item-no-8-tender-specialist-care-home-service-support-people-learning-disabilities>

2. Background

- 2.1 The following programme of activity has been undertaken, and is ongoing, in respect of shaping the design of the new service and developing the procurement plan.

3. Service Design:

- 3.1 A multiagency service design group has been coordinated by the Disabilities Commissioning team on a fortnightly basis throughout 2019. The focus of the group had been to develop the draft proposals for the service design, aspects of which will be subject to wider consultation as indicated at section 4 of this report. Stakeholders involved in the service design group include representatives from:

- GCHSCP fieldwork services, including some allocated care managers and MHOs of some of the complex service users in Tier 4 services, out of area placements, and supported living services in Glasgow.
- Locality based learning disability health staff who provide health services in the community to people with complex needs
- Learning Disability Consultant Psychiatrist
- Allied Health Professionals providing services to people with learning disabilities and complex needs
- Nursing staff and managers from the specialist in patient hospital services managed by East Renfrewshire

3.2 The service design group have focussed on the following:

- purpose, focus and desired outcomes of the new residential service
- service standards
- the design of the building
- the experience the provider will need to deliver the support
- the nature of the support to be provided by the new service including the roles of the service provider, locality health teams, social work teams and contract management in the wider service provision
- re-design of the in-patient Greater Glasgow Health Board learning disability services and how the new service fits with wider service provision to people with complex needs
- referral routes for service users into the new service
- the planned routes for service users to transition out of the new service
- developing anonymised case studies and assessment information which can be used in the procurement of the new service.

3.3 Service Outcomes have been drafted and are organised according to the five principles of the “National Health & Social Care Standards 2017”. These outcomes evidence a focus on quality of experience and quality of life for residents. Draft ‘Service’ and ‘Individual’ outcomes for the LD care home can be found in Appendix 1.

4. Consultation and Engagement:

4.1 GCHSCP has worked with The Advocacy Project (TAP) on a proposal for the co-ordinated engagement and involvement of key stakeholders in the development of the residential service.

4.2 The Advocacy Project is an independent rights based advocacy agency based in Glasgow which promotes the equality, care and human rights of individuals. The organisation provides independent advocacy support to people with complex care needs in inpatient hospital wards and in the community, and is independent of GCHSCP. The organisation also has extensive experience of independently engaging and involving individuals and groups across a number of HSCPs on matters related to care service design and development.

4.3 GCHSCP have requested that TAP seek to include a full range of views and opinions of individuals and stakeholders regarding the proposed new service as follows:

- Individuals directly affected by the development of the proposed new service. These individuals will primarily be people with complex care needs who are inpatients resident with NHS GGC and have a learning disability
- The families and carers of resident inpatients, including those who have Power of Attorney, Guardianship or are known to be meaningfully involved in the care support and decision making of individuals with a learning disability
- Individuals with complex care needs who are or have been placed in residential services out with Glasgow
- The families and carers of individuals who are or have been placed in residential services out with Glasgow
- Individuals who have experience of, or who are at risk of admission to inpatient learning disability services and who are resident in the community
- Key stakeholders and support organisations, including disabled persons organisations and service user groups
- Individuals with a specialist interest in involving people in the design and delivery of care services.

4.4 TAP are planning to use a range of approaches in the consultation including one to one meetings, focus groups, paper based questionnaires and on-line surveys. They can support service users with communication needs and have access to staff who are skilled in using BSL, Makaton, and Talking Mats etc.

5. Draft Service Specification

5.1 The draft service specification details the provision of a service divided into three distinct areas.

5.2 This includes an area for up to 3 people where an 'Enhanced Support Service' can be provided. This will be a short term service aimed at providing additional support to people in crisis and who are at risk of their existing community based support breaking down. The service will be designed as a safe space where people can be supported to manage behaviours which are leading to their placement breakdown, and where further assessments can take place as required. The service will provide a community based alternative to hospital admission. There will be a strong focus on providing support to strengthen the capacity of the existing community based support provider to continue caring for the person at home.

5.3 Provision for up to 8 people to receive support in the medium term. This service will also have a "move on" focus. Each person will be supported by the multi-disciplinary team to maximise their potential for independent living, including developing support in a way which manages behaviours which challenge. The support provided in the service will focus on equipping people with the skills to move on within realistic timeframes to other support models such as supported living. Service users will have their own room and ensuite facilities and share communal areas such as living rooms, dining rooms and kitchen facilities. Service proposals which allow this area to be sub-divided into smaller living areas to allow the flexibility to suit the specific needs of residents will be welcome. This service will suit service users who do not manage well in single services and who prefer to share.

- 5.4 The service will seek to provide 4 single person independent living spaces. This aspect of the service will suit service users who do not manage well in shared services and who are best supported individually. Again the focus of the support will be to maximise each service user's capacity to develop independent living skills and provide a safe space to develop support plans which are robust enough to manage risks to service users and staff and to test these out in a safe environment. Where successful, this will maximise the potential to allow people to move on to other service models such as supported living.
- 5.5 Key features of the new residential service will include access to positive behavioural support, timeous access to specialist health inputs such as psychiatry, psychology as well as support from locality based specialist learning disability teams. A multi-disciplinary approach to supporting service users and to maintaining and monitoring the quality of the service, will apply across all aspects of the new service.
- 5.6 Feedback from the consultation and engagement activity described in section 4 above will be used to review and, where appropriate, develop the proposed service model. A final draft service specification/service model will be developed and presented to the IJB for discussion and approval in September 2019.

6. Procurement Planning

- 6.1 As previously described, an initial outline draft of the service specification for the operation of the residential service has been created. This first draft incorporates the views of the service design group and this will be updated in due course to reflect the views of service users, legal proxies, family members and other stakeholders, once the findings of the engagement exercise are known. See Section 4.
- 6.2 Previous work on benchmarking the costs of similar services elsewhere in Scotland has been revisited using the most up to date information. This indicates that the average cost paid by Glasgow for the specialist residential places it purchases in other local authority areas for people with learning disabilities requiring complex care is very similar to the average cost of such placements agreed under the Scotland Excel National Learning Disability Care Home Framework. This work is contributing to the development of the pricing strategy for the procurement exercise.
- 6.3 Work is also underway to develop the most appropriate price/quality ratio for this tender. The standard price/quality ratio for social care contracts in Glasgow is 60% quality and 40% price. Given the complex and sometimes challenging needs of the proposed service users and the need for the successful service provider to maintain a skilled and confident staff team, it is proposed that this procurement has an increased weighting on the quality aspect.
- 6.4 Recommendations and options appraisals have been completed on issues such as mandatory and discretionary exclusion grounds, the different types of *contract model* to be tendered (block/ cost and volume/spot) and the proposed *length of contract* being tendered for this specialist service. Given the specific nature of this service, and the capital investment required by the successful bidder, the length of contract is likely to be longer than a typical social care contract.
- 6.5 'Fair Work Practices' are a key concern in all social care procurement and will be a fundamental consideration within this tender given the critical importance of a stable and well-motivated workforce for the success of the service. Advice is being sought

on the most appropriate way to reflect this in the procurement strategy and workforce issues are reflected in the project risk register.

- 6.6 To qualify to participate in this tender, Social Care Providers must commit to being able to deliver a suitable building from which to operate the specialist residential service. The tender evaluation strategy therefore needs to scrutinize both the building proposals as well as the operational skills of all tendering organisations. Commissioning staff have consulted with Scotland Excel Category Managers to seek advice on the building element of the Service Specification. Discussions have focused on the balance between ensuring that the building meets individual's needs and the need to avoid being overly specific about the build elements. The draft building element of the specification focusses on design principles which allow maximum flexibility to change the configuration of the accommodation in direct response to the presenting needs of service users.
- 6.7 The building must be fit for purpose, lie within the Glasgow City boundaries and be fully operational within a reasonable timeframe post-contract award. This timeframe is likely to be within 18 months to 2 years. It should be noted that following contract award there are a number of variables associated with the development of the service which are likely to be outwith the Council's control. Examples include land purchase issues, progress with planning approval, Care Inspectorate registration or unforeseen construction/remodelling issues.
- 6.8 Work is underway to develop the tender evaluation strategy, including how service users and carers can be active participants in the tender evaluation and how their views can influence the evaluation. Ideas such as ensuring that the evaluation covers areas which are important to service users and carers, inviting supported individuals or their proxies onto the evaluation panel. Having service users and proxies involved in the interview of applicants and building in responding to "real life" but anonymised case studies as part of the evaluation. This work will be informed further by the outcome of the engagement activity described in section 4.
- 6.9 The timescale for procurement exercise to begin is dependent upon a range of factors including the timeframe for completion of the planned engagement work.

7. Recommendations

- 7.1 The Integration Joint Board is asked to:
- a) note the contents of this update report; and
 - b) note that an updated service specification/service model for the new Specialist LD Care Home will be developed following consultation and engagement activity with key stakeholders. This will be presented to the IJB in September for discussion and approval.

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

Service Specific Outcomes

The service will aim to achieve, and be able to demonstrate its commitment to, the following service level outcomes. Service Outcomes are organised according to the 5 principles of the “National Health & Social Care Standards 2017” and evidence a focus on quality of experience and quality of life for residents.

- **Dignity and respect**
 - Residents will have privacy
 - Residents potential to move to a more independent living setting is explored appropriately as part of the multidisciplinary review and assessment framework
 - Supported Peoples beliefs are understood and practices respected
- **Compassion**
 - Open and honest communication with residents and families that is transparent and upholds the principles of safeguarding
 - Residents can communicate in non-challenging ways
 - Support will be delivered in ways that avoids stigmatization.
- **Be included**
 - Residents are satisfied with the opportunities available to them to engage in community, leisure and social activity of their choice and subject to appropriate risk assessment engagement, choice and control over the care they receive.
 - Residents personal progress will be measured, evaluated, and celebrated.
 - Residents will have opportunities to contribute to the development of the service and the environment in which they live
- **Responsive care and support**
 - A focus on proactive Interventions and grounded in a positive behaviour support framework.
 - Residents are supported by appropriately trained and competent key workers
 - Support which can decrease and increase in response to fluctuating need

- **Wellbeing**

- Incidence of Hospital admissions is reduced
- Service users mental and physical health is improved or maintained
- Service users levels of independence will be maintained and where possible enhanced

Individual Resident Outcomes

The Provider will work with the Resident and others to ensure delivery of specific outcomes for each resident, which will be specified in the individual support plan and will set out how individual needs will be met, as well as reflect their wishes and choices (Standard 1.15). Outcomes for individual residents of the Service will be developed and delivered in a manner which takes account of the specific communication requirements of each Resident. The Service should be guided by the five **Health and Social Care Standards** outcomes – which determine that all individuals:

- Experience high quality care & support that is right for them
- Are fully involved in all decisions about their care & support
- Have confidence in the people who support & care for them
- Have confidence in the organisation providing their care and support
- Have experience of high quality environments

The basis of engagement with Residents by support staff will be the Provider's support plan which will be specific to each individual and outcome focused. The establishment of individual outcomes for each resident, in collaboration with the resident themselves and other key stakeholders, will be a fundamental element of the Service. The Provider must demonstrate an ethos and practice that reflects a focus on inclusive and responsive care and support, with an emphasis on quality of life improvements and outcome focused service delivery.

The Service will be encouraged to be innovative in its practice and have a readiness to explore alternative ways of working and models of support that support residents to achieve their Outcomes. To this regard the service must ensure it has sought and considered feedback from residents living in the service, and reflect upon practice and where possible integrate these ideas going forward.