

Report to Cabinet Member for Adults and Health

Date October 2020

Commissioning of Care Provision for Winter 2020 - 2021

Report by Interim Executive Director Adults and Health and Head of Commissioning

Electoral division(s): all

Summary

On 18 September the Department of Health and Social Care published the policy paper "Adult social care: our COVID-19 winter plan 2020 to 2021" in which the requirement for local authorities to put in place their own winter plan is outlined. This report outlines the proposed West Sussex winter plan which has been developed in partnership with the Clinical Commissioning Group (CCG) and in line with the Government's Hospital Discharge Service Guidance. It includes plans for the commissioning of services to support hospital discharge and additional pressures in health and social care over the winter months.

A proportion of the winter plan is to be funded through Council held resources and contracted through the social care market. Initiatives include the extension of existing contracts as well as newly commissioned provision and include a mixture of care to be provided within a person's own home as well as short term beds within residential and nursing care services.

The remaining commissioning activity to deliver the winter plan will be required in close liaison with the CCG and the details of these parts of the plan can only be settled once funding from the Government or NHS is secure and any necessary changes to the agreement with the CCG for commissioning activity are agreed. Approval of authority to undertake those actions is sought.

Recommendations

The Cabinet Member for Adults and Health is asked to;

- (1) approve the West Sussex Winter Plan (October 2020 – March 2021) as described in the report and summarised in the appendix;
- (2) approve the commencement of procurement of initiatives to support additional demands over winter, including the spend of £760k of Winter Pressures Grant to be used to fund the initiatives outlined in paragraphs 2.3.1 and 2.3.2 of the report;

- (3) delegate authority to the Executive Director Adults and Health to extend existing contracts and award contracts for newly commissioned provision as may be required.
 - (4) Delegate authority to the Executive Director Adults and Health in consultation with the Director of Law and Assurance and the Director of Finance and Support Services to settle funding arrangements and agree revisions to the s.75 agreement with the Clinical Commissioning Group for the commissioning of service provision required to deliver the Winter Plan.
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Proposal

1 Background and context

- 1.1 The health and social care system experiences increased pressures during winter months as extreme weather and the prevalence of illnesses such as flu increase. This year the impact of Covid-19 is expected to create an additional pressure and the Government's policy paper "Adult social care: our COVID-19 winter plan 2020 to 2021" has identified a requirement for local authorities to put in place a winter plan. The Council has been working closely with the NHS to ensure that a robust plan is in place to commission provision when and where required to support the additional demands.
- 1.2 The Hospital Discharge Service Guidance which was published by the Government on the 21st August 2020, includes specific requirements on Local Authorities which need to be incorporated into winter planning. These include providing alternative accommodation for people who do not need to be in an acute hospital bed but are required to isolate and are unable to isolate within their own home (either in the community or in a residential service.) In addition the guidance identifies that the Local Authority should act as the lead commissioner unless otherwise determined. In West Sussex, this is a position that the system supports. Lead commissioning by the Council of health and social care services is settled through a formal partnership agreement with the Clinical Commissioning Group (CCG) referred to as a 'section 75 Agreement'. The terms of the current s.75 Agreement will need to be revised to enable the Council to carry out this additional commissioning activity and to manage any risks and associated liabilities.
- 1.3 In 2020/21 the winter plan will be funded through a range of different Government funding streams, including; Winter Pressures Grant, Hospital Discharge Programme, and Covid19 Funding. The report seeks authority to procure specific services funded through Winter Pressures Grant (see paragraphs 2.3.1-2).

2 Proposal details

- 2.1 The full winter plan initiatives are summarised in Appendix 1. This includes infrastructure and resourcing, home first and hospital discharge provision, home based and residential provision, focused campaigns, mental health initiatives and support for people who have tested positive or are isolating due to Covid19. Some aspects of the plan are reliant on funding which has yet to be confirmed, but all aspects have been agreed with the CCG as being the required solutions to support the system to manage demand over winter. Services are reliant on

and will not be commissioned without commitment of funding. The Executive Director will ensure that all commissioning activity to be led by the County Council is undertaken only once funding is secure. Any associated risks and liabilities will be covered through revisions to the s.75 Agreement to be settled with the CCG.

2.2 The winter plan initiatives are intended to complement and extend availability of year round provision of care services. Some of these will require additional services to be commissioned, others will be delivered through existing contractual arrangements.

2.3 The following new contracts require completion of a procurement process to source and require funding through Winter Pressures Grant:

2.3.1 Winter Domiciliary Care rounds; Time limited block contracts to provide domiciliary care in small geographic areas. This is focused primarily on people requiring long term care commencing during the winter and sourced through a competitive process from providers on the Council's main 2015 Care and Support at Home Framework Agreement.

2.3.2 Winter beds; time limited block contracts to provide residential beds for customers with dementia and/or nursing needs. This is focused primarily on people requiring a short term bed whilst awaiting a social care assessment to determine any long term needs which will then be met across usual contracted provision. It will be sourced from contracted care home providers.

2.4 As identified in the Hospital Discharge Service Guidance, the Council will also act as lead commissioner for the broader winter plan with funding and contracting arrangements to be agreed with the Clinical Commissioning Group including any necessary revisions to the s.75 Agreement prior to any commitments being made.

3 Other options considered (and reasons for not proposing)

3.1 The options identified for winter include a range of services and solutions to support the additional capacity required to manage increased demand over winter months. Whilst the Council could focus options on spot purchasing from existing contract frameworks, it is possible that this would not provide the market with sufficient assurance to invest in additional staffing over winter and would not give the health and social care system the assurance of having capacity available as demand increases.

4 Consultation, engagement and advice

4.1 Extensive consultation with the Clinical Commissioning Group has been undertaken through informal routes and through the Joint Commissioning Strategy Group to focus the development of the winter plan and identify the appropriate funding sources and this work will continue to complete the detail of any additional lead commissioning activity and to ensure that associated risks and liabilities are managed through the s.75 Agreement changes.

5 Finance

5.1 In 2020/21 the winter plan will be funded through a range of different Government funding streams, including; Winter Pressures Grant, Hospital

Discharge Programme, and Covid19 Funding. The total winter grant received by the council is £3.3m, of which the recommendation in this report will leave around £0.4m to allocate in response to the pressures that the winter months will almost certainly bring. The Hospital Discharge programme and the Covid-19 funding will be provided by the CCG and will be formalised through revisions to the s.75 agreement.

- 5.2 The WSCC share of the cost of the initiatives for which approval is being sought, per paragraphs 2.3.1 and 2.3.2, is £760k which will be met from the Winter Pressures Grant. The full cost of these initiatives includes a contribution from the West Sussex Clinical Commissioning Group through the Hospital Discharge Programme funding.

	Current Year 2020/21
Cost of proposals for which approval is being sought (2.3.1 and 2.3.2)	£1.155m
Winter Pressures Grant funding allocation	£0.760m
CCG contribution	£0.395m
Net cost	Nil

- 5.3 These proposals form only part of the Winter Plan, the items of which are identified in full in Appendix 1, and includes schemes where:

5.3.1 The Council has already identified funding commitment and commissioned provision.

5.3.2 The Council may act as lead commissioner, but where the budget commitment and potentially some of the contracts may be held by NHS partners. In some of these cases confirmation of funding is awaited, without which the Council will not commission services.

- 5.4 The effect of the proposal:

(a) **How the cost represents good value**

Where there are no current contracts in place, each initiative will be subject to a process to ensure that the costs represent good value. This will include seeking interest from the market and a competitive exercise to determine the most economically advantageous tender or quote. Where current contracts are in place and represent good value from previously completed tendering exercises the Council will work with these providers to ensure delivery of the additionality over the winter months.

(b) **Future savings/efficiencies being delivered**

These proposals seek additional capacity to avoid costs for the health and social care system, including delayed discharges from hospital. The provision of short-term services also seeks to reduce the numbers of people requiring long term care, by undertaking assessments within the community and providing more time to consider most appropriate long-term care options and solutions.

(c) **Human Resources, IT and Assets Impact**

Not applicable

6 Risk implications and mitigations

Risk	Mitigating Action (in place or planned)
Insufficient service provided for winter	Consider contract arrangements with potential to increase and scale up during the winter months as required. Extend block hours as required to provide additional assurance. Commission availability at the outset of winter, and commission further provision as winter progresses.
Winter provision is unable to support Covid19 positive residents	Work with the market to understand how customers can be supported in a range of Covid19 situations. Utilise Public Health guidance on Infection Control.
Funding for Winter provision is not forthcoming from partners	Complete agreement with the CCG on the provision of Hospital Discharge Programme funding and other Covid19 funding sources prior to any contracts being let. Where funding is provided solely by NHS funding sources, agree the arrangements for commissioning, contracting and funding in advance and include changes to the section 75 Agreement with the CCG where appropriate.

7 Policy alignment and compliance

7.1 The proposals are in line with the Hospital Discharge Service Guidance and the Adult Social Care: Our Covid19 Winter Plan 2020 – 2021 which requires a winter plan to be in place and confirmed to the Department of Health and Social Care by the 31st October 2020. This will take place once the plan has been approved.

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Appendix

Appendix 1: Winter Plan Initiatives

Background papers

None