
DECISION MAKER:	Director of Adults Wellbeing
DECISION DATE:	
TITLE OF REPORT:	Approval to award a framework in respect of the provision of a Rapid Access to Care Beds service for Herefordshire Council in conjunction with the Clinical Commissioning Group and the Wye Valley Trust.
REPORT BY:	Commissioning Lead

Classification

Open

Key Decision

This is a key decision.

Wards Affected

County-wide

Purpose

To obtain approval to award a framework in respect of rapid access to assessment and care beds to the providers identified in the report below following the conclusion of a successful procurement exercise which was conducted in line with section 4.6.13 of the council's contract procedure rules. Approval is sought to award this framework for the duration of 3 years with an option to extend for a further year in line with the time limits for such a mechanism which are prescribed by the European Union's procurement regulations.

Recommendation

THAT:

(a) That approval is given to award a place on a framework to the providers which are identified in the following report in order to provide a rapid access to assessment and care bed service to residents of the county of Herefordshire.

Alternative Options

None identified due to the fact that the current scheme which was designed to alleviate the effect of winter pressures on NHS services in Herefordshire ended on 31st March 2014; and there is no analogous service for the forthcoming winter period. Therefore, if the recommendations of this report are not followed there will a gap in service provision for vulnerable adults and additional pressure on the Herefordshire NHS which poses an unacceptable risk for the council.

Reason for Recommendations

1. Following the successful conclusion of the rapid access to care pilot scheme in March 2014; the council in conjunction with the clinical commissioning group, wishes to continue this scheme in order to alleviate undue pressure on hospital beds during the winter period by utilising the step down beds which form part of this service. This pilot study demonstrated that this scheme was successful in enabling 59% of service users to return home to continue their recuperation following hospital treatment thereby facilitating a timely discharge when there is no clinical reason for remaining in hospital. Therefore, this scheme enables the council to meet its strategic commissioning objectives of furthering personalisation via maximising the independence of vulnerable adults in Herefordshire; enabling them to return to their usual abode wherever possible.
2. The proposed framework will comprise the following services:
 - Firstly, a step down service in respect of patients who have recently received treatment in an acute or community hospital and have no clinical need to remain as an inpatient; but is unsafe for them to return home without a further assessment of their continuing care needs.
 - Secondly, a step up service whereby a service user requires medical intervention but the requisite treatment can be administered in a community setting and therefore it is unnecessary for the affected individual to be admitted to hospital.
 - Thirdly, an assessment to care service for instances where a service user requires a temporary safe environment to enable an assessment of their continuing care needs to determine the creation of a bespoke care plan in accordance with their assessed needs.
3. The overarching purpose behind this service is to provide access to assessment and care within 24 hours of a referral during a period of up to 14 days. In addition, this service will incorporate an element of assessment and onward care planning to enable service users to remain as independent as possible whilst they receive the requisite level of care to meet their assessed needs and prevent a prolonged hospital stay or cause a service user to become unnecessarily dependent on long term nursing or residential care. Therefore, the council will be able to further its personalisation agenda by adopting this scheme.
4. Furthermore, to facilitate a service user's ability to regain their independence under this scheme; the Wye Valley NHS trust will provide occupational therapists and

physiotherapists who will assist with the creation of individual care programmes in conjunction with the care workers from the affected care home. This will ensure that service users will receive continuity of care during the periods when the therapists are not visiting the care home and enable service users to regain their independence as quickly as possible in line with the council's personalisation agenda.

5. The proposed scheme meets a number of strategic objectives. Firstly, it forms a key component of the local urgent care recovery plan which is designed to reduce avoidable emergency admissions to hospital and facilitate discharge from acute and community hospitals and improve patient flow through the urgent care system. In addition it promotes an individual's return to independence in line with the council's overarching commissioning principle of supporting personalisation and adopting community based support in Herefordshire.
6. In addition, by incorporating the provision of step up beds; this scheme seeks to reduce avoidable admission to hospital and subsequent placement in long term care establishments such as nursing or residential homes or necessitating the utilisation of premium domiciliary care packages.
7. Furthermore, the provision of assessment to care beds within this scheme will enable a dedicated nursing team to create a bespoke package of continued care in relation to a service user's needs in order to assist with their recovery and enable them to return home or transfer to a more appropriate placement if necessary.
8. Moreover, the extension of the current scheme will facilitate the future creation of a managed health and social care pathway in the community of Herefordshire via the provision of assessment to care beds which form part of this service. This pathway will subsequently assist with the creation of an inter-agency, multidisciplinary assessment of a service user's ongoing health and social needs with a view to adopting targeted therapist input where necessary in order to maximise an individual's function and independence; in line with the council's personalisation agenda. In addition, the aforementioned pathway will enable clinicians, nursing staff and healthcare assistants to identify other services which are pertinent to a service user's case and will assist their continued recovery.

Key Considerations

9. The current scheme which was designed to alleviate the effect of winter pressures on NHS services in Herefordshire ended on 31st March 2014; and there is no analogous service for the forthcoming winter period which would result in an unsustainable risk to both service users and Herefordshire's NHS service. Therefore, the aim of a procurement exercise was conducted to identify a group of suitable providers who could be adopted onto a framework in order to provide an analogous service to the aforementioned pilot scheme.
10. The tenders were evaluated by a panel comprising of the lead procurement officer from Herefordshire council, the lead commissioner for the adults and wellbeing directorate of the council, the clinical programme manager from the clinical commissioning group, the

interim management accountant for the council's adults and wellbeing team, and the east neighbourhood team manager and community lead nurse from the Wye Valley Trust.

11. The evaluation was conducted in line with the criteria that were set out within the tender with a percentage weighting of 40% price and 60% quality applied to evaluator's scores to determine an overall mark for the submission responses.
12. Following the initial evaluation, the scores were collated and a moderation meeting was held with all of the members of the evaluation panel in order to establish consensus scores for each of the tender submissions.
13. The consensus scores for the tenderer's price submissions were combined with the results of the qualitative responses in order to gain an overall total weighted score for each provider. The table below shows the total weighted scores awarded to each provider:

Provider	Score %
Highwells House	58.7
Claridge Homes (Hampton Grange)	58
Coldwells House	55.64
Whitegates Care Home	55.64
Hazelhurst Nursing Home	48.2

14. On the basis of the results of the evaluation and the subsequent clarification responses from providers, the evaluation panel recommends that all of the aforementioned providers are awarded a place on the framework to ensure sufficient provision of a rapid access to assessment and care beds service to the entire county of Herefordshire.

Community Impact

15. The proposed framework for the provision of a rapid access to assessment and care scheme will be available to any vulnerable adult over the age of 18 who resides in the county of Herefordshire and has been assessed as having eligible needs in accordance with the council's service eligibility policy. Therefore, this scheme will offer protection to the community as it ensures that vulnerable residents receive access to the care and support which they require in order to continue their recovery and enables them to live as independently as possible in line with the Council's Commissioning and Commercial Strategy. The focal point of this strategy is to ensure that the needs of residents, service users and community groups are at the very heart of the Council's decision making and the services it provides.

Equality and Human Rights

16. The framework described in the report above will have due regard of the need to:
- Eliminate discrimination, harassment, victimisation and any other conduct prohibited by or under this Act;
 - Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
 - Foster good relations between persons who share a relevant protected characteristic and persons who do not share it in terms of service delivery and in commissioning the service themselves, including contract monitoring and management.

Financial Implications

17. The approved budget for this service as a whole during 2014-15 is £494,280. Of this, a maximum amount of £394,000 has been allocated for the provision of beds. The financial modelling for this service was originally based on a maximum weekly cost £750 for beds in a nursing home and £700 for beds in a residential home and the tendered prices received are consistent with this. The financial model utilised a ratio of 35:65 between residential and nursing placements based on the usage rates from the pilot study; to determine an average weekly cost of £732.50.
18. Furthermore, under the assumption that the placements which are made under the proposed framework will be for a maximum period of two weeks in duration; the inclusion of an assessment fee of £100 per placement which was included in the specification of the service, will add a further £50 per week to the aforementioned weekly bed rate, giving an overall average weekly cost of £782.50. Using an approximate mid-range value for the funding which is available, this will allow for the purchase of 9 beds.
19. The financial model reflects the requirement for the additional specialist support during the maximum two week stay to be factored in to the agreed framework weekly fee. This allows up to 9 beds per week to be purchased within the current financial budget, assuming that the estimated ratio of 35% residential and 65% nursing beds approximates to actual occupancy patterns, and includes fees for one assessment per stay within the overall fees.

Legal Implications

20. Section 21 National Assistance Act 1948 provides that the local authority shall make arrangements for providing residential accommodation for persons aged eighteen or over who by reason of age, illness or disability or any other circumstances are in need of care and attention which is not otherwise available to them
21. The procurement exercise was conducted under an open tendering process in line with section 4.6.13 of the council's contract standing orders; thereby mitigating the risk of any subsequent legal challenge. In addition, the maximum duration of the framework which

will be established as a result of this tender will be for three years with the option to extend for a further year in line with the European Union's maximum duration for such a framework.

Risk Management

22. If the recommendations in this report are not followed there is a risk that vulnerable service users will become dependent upon long term care which is contra-indicated by their medical history which may result in significant deterioration in their health and well-being.
23. In addition, the rapid access to assessment and care forms a key component of the Herefordshire Urgent Care Recovery Plan and is designed to be a robust mechanism to reduce avoidable admissions to hospital and facilitate prompt discharge when there are no clinical grounds for remaining in a hospital bed. Therefore, if this service is not adopted there will be an adverse impact on the local Urgent Care system and recovery plan.
24. Furthermore, this scheme has been formulated as a preventative measure in order to facilitate a service user's return to independent living and hence is an important enabler for the council's personalisation agenda.

Consultees

None

Appendices

1. Evaluation Report
2. Outcomes from the pilot study for the RAAC service

Background Papers

None identified.