

Help to live at Home – Provider Market Consultation Outcomes and Recommendations

Process

Herefordshire Council began an engagement process in November 2015 to gain a better understanding of the challenges that the Home Care market faces within Herefordshire and nationwide. A series of 121 meetings were held with both existing and other providers, this was then followed by a formal 10 week consultation process.

Consultation

The consultation process began on the 22nd June with a launch at the homecare forum. At the starting point of the consultation process twelve 121s had been held as part of the engagement process.

The timetable for consultation was as follows.

| Date | Activity |
|------------------------|--|
| 22 nd June | Launch consultation at provider forum |
| 6-8 th July | 121's for providers to meet with Council |
| 13 th July | Networking event based on feedback to date |
| 3 rd August | Provider forum - update on the consultation |
| 14 th Sept | Provider forum - feedback on questionnaire/present recommended model |

A webpage was established on the council's website to facilitate completion of consultation questionnaires and to also serve as a repository for all related information.

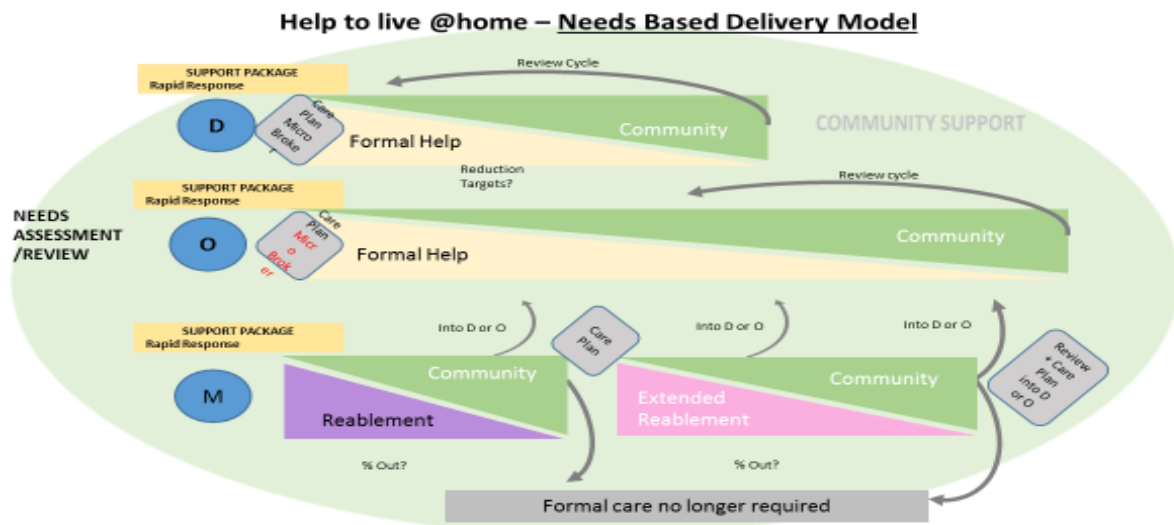
As per the above timetable due to market response the timescales for 121s was extended to span the consultation period to provide greater flexibility for the market to attend and offer the key feedback and input required.

The total number of 121 meetings held at the close of the consultation stood at 34, content of these meetings were noted and resulted in very rich feedback being received to proactively inform and shape the process.

Four maps with proposed zonal options were used for the duration of the consultations these were available at all 121 meetings, networking and forum events, also a key information stream that accompanied the questionnaire online.

The purpose of the options was not to give participants a single preferred option to choose from but to inform discussions around the benefits of each and to reach a moderated conclusion as to the best way forward for provider sustainability, deliverability, staff retention and satisfaction and ultimately the best service provision for eligible citizens for Herefordshire.

The consultation considered each pathway for the new Help to Live at Home service as per below:



Participation

Providers were well engaged with the process and actively engaged
 A total of 34 no. 121 meetings were held spanning November 15 – August 16.
 A total of 17 no. questionnaires were received online before the closing date of 28th August 16.

Results

During each of the 121s held there was consistency of approach around content and discussion. The focus on the 4 zonal options allowed for further options to be produced as a direct result of market input.

Summary of each option can be viewed below:

Option A

Feedback told us that whilst the average hours per lot would provide a stable business the split of the County was not optimal in terms of having an adequate mix of urban and rural delivery.

Option B

This option provided the most feasible choice aside from zone X which was too broad. This allowed us along with the feedback from the other proposed options to formulate the alternative option for zonal layout.

Option C

Whilst there were some providers who, during the 121 sessions thought this would be a viable delivery route by have the city region as a 'super urban' zone, the general consensus informed that

in order to have a sustainable delivery model the city should be split between some of the more rural areas to allow provider to financially off set against the more difficult to serve patches.

Complex Care

Market feedback predominantly advised that this care need should be a separate lot – due to the type of training staff require, the nature of the carer. Furthermore, this approach will allow for a more flexible and equitable market approach to the tender process, in that providers who provider both types of service may bid for both and those who specialise may bid for the lot that best suits them.

Other topics

Business Viability

The feedback from all meetings have informed that hourly numbers that allow for a sustainable business vary from 700 – 2500+ hours per week. This has been reflected in forming the new lot structure.

Ceiling rates

We have advised as part of the consultation ceiling rates will apply, looking at business viability this rate will be modelling using the UKHCA recommendations allowing for all cost to be covered and adequate operating profit to be achieved. Allowing bidders to achieve more hours and build great business stability the rural and urban distinction may be removed and a flat rate given to providers per zone that allows an off set and management of business across the area.

Incentivisation

In terms of incentivising to ensure providers fulfil packages of care packages, i.e. handing back or not picking packages up from brokerage, in that additional payments whilst the questionnaire responses had a greater support for this approach, there were greater concerns raised via our stakeholder group and through forums and 121s that financial rewards should not be made for delivery of what is contractually required. Furthermore, the new structure and approach of the Framework will negate these issues that cause these problems in the first instance.

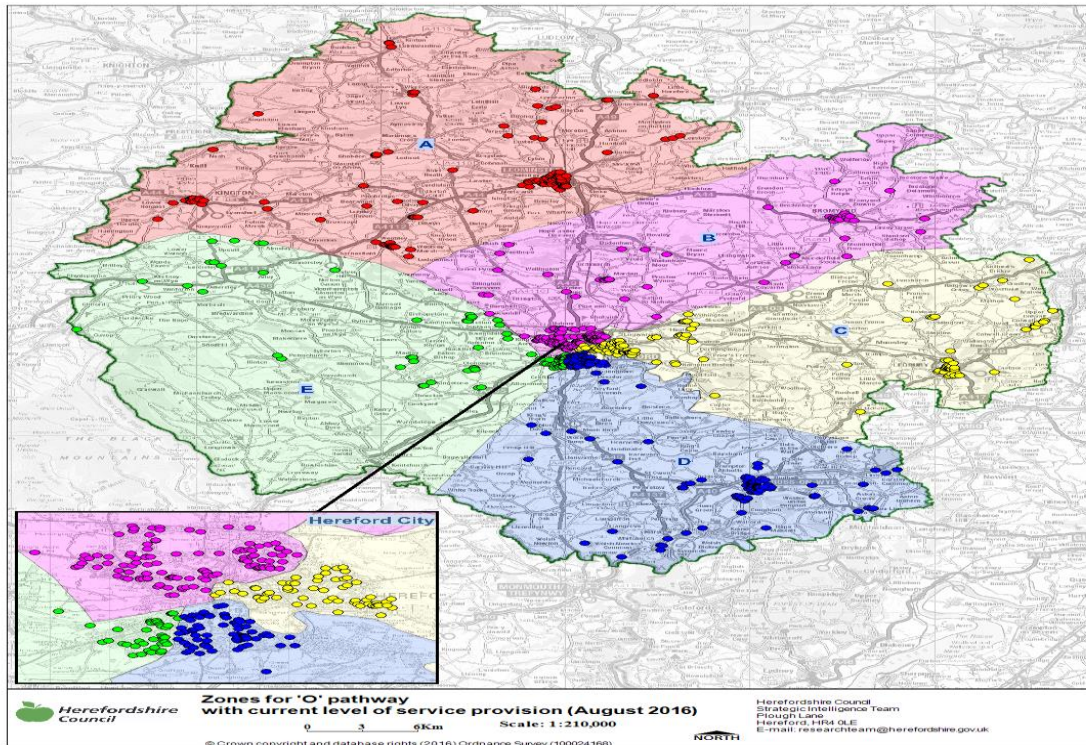
Incentivisation will however be used to recognise providers who are able to assist the Council in meeting its reduction in service demand targets. This will be achieved via enabling service user and reducing the amount of care and support needed or via a shift of care from the provider to the community, in all cases these reductions will need to be appropriate and safe.

Questionnaire results

Service Provider Consultation results are available on request. However please note free text responses contained within Appendix A cannot be shared due to protecting the confidentiality of the respondent; these have however been used to inform the content of this report.

Recommendations

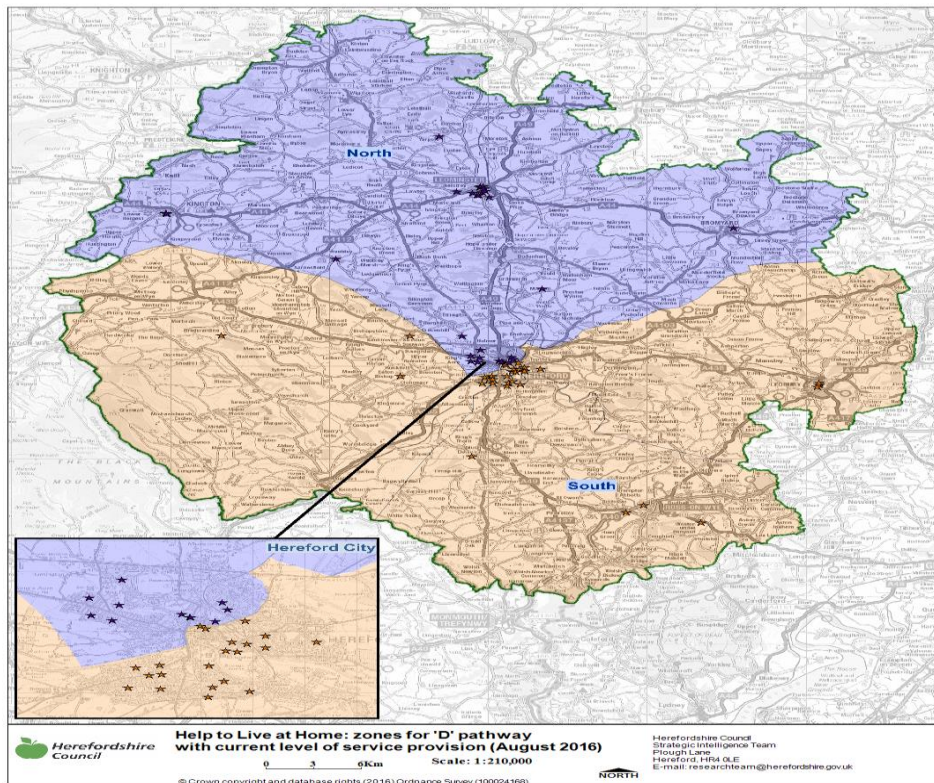
The recommended approach, as a result of this process, is to take a zonal approach forward for the “O” pathway. The zones will be mapped as below giving 5 distinction areas. The approximate hours be contained within are in table A. In terms of providers per zone, there will be between 700 and 1500 awarded per provider per zone.



| Zone | Clients | Hours | Hours2 |
|--------------|------------|---------------|----------------|
| | | Weekly | Annual |
| A | 179 | 2,267 | 117,894 |
| B | 199 | 2,565 | 133,370 |
| C | 169 | 1,711 | 88,982 |
| D | 207 | 2,692 | 139,984 |
| E | 93 | 1,427 | 74,214 |
| TOTAL | 847 | 10,662 | 554,445 |

Table A

The recommendation for the “D” pathway is a North/South split of the county as per the map below. Service user numbers and hours maybe viewed in table B. This options will look to award to between 2 and 4 providers for the whole county.



| Zone | Clients | Hours | Hours2 |
|---------------|-----------|--------------|----------------|
| | | Weekly | Annual |
| Complex North | 31 | 1,373 | 71,386 |
| Complex South | 31 | 1,053 | 54,746 |
| TOTAL | 62 | 2,426 | 126,131 |

Table B