



‘Care and Support in the Home’ Services

Prospectus

July 2018

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1. Introduction

This prospectus signals the intention of Kent County Council to commission a **Care and Support in the Home** service for adults living within Kent (excluding Medway).

The new Contract will bring together under one Contractual arrangement Services which have historically been delivered separately. The Services in scope for this Contract are:

- Home Care Services
- Extra Care Support ('background hours' element only)
- Supporting Independence Service (SIS)
- Discharge to Assess Service (this Service will be subject to further competitions during the life of the contract)

The Services in scope deliver very similar tasks in people's homes and there is an opportunity to improve consistency of delivery and bring Services together under one Contractual arrangement, with the aim to reduce silos, avoid duplication and improve outcomes through consistency of delivery.

Through this prospectus we aim to inform our current and potential Providers of our commissioning approach and the associated opportunities. The Council's ambition is to provide quality Services which meet the needs of Kent residents and support improvements in their outcomes.

Commissioning for adults in Kent has evolved in line with the national drive for local government to provide more effective and high-quality commissioning for public Services which achieve outcomes and demonstrate value for money. The commissioning cycle must be flexible to the needs of residents and provide continued assurance of the effectiveness of Services. Therefore, this prospectus sets out a continuous improvement approach and high level forward plan that allows the Council to remain flexible and agile to meet needs as they change.

The Council is presently going through step changes in the way it wishes to commission, deliver and manage Services, as well as the relationships it holds with Contracted Providers. This includes the realignment of the Older People and Physical Disability Division to enable change in the way the Council works with its Providers to develop and deliver Services. This realignment process will enable staff to work in new ways with Providers to develop practice and support the delivery of outcomes-focused, personalised care. Providers will benefit from improved access to Council practitioners which will support continuous improvement for quality in care and workforce development opportunities.

2. Strategic Context

National Policy and statutory requirements

National Policy and statutory requirements shape our role and response. All local government functions for supporting adults' care, support and public health needs falls within the statutory authority of local directors of Adult Services and directors of Public Health. Within Kent, the commissioning for Adults' Services sits within the Council's Strategic Commissioning Division.

The Council has statutory responsibilities to both our whole resident population and to specific groups of adults. The Council's Adult Social Care and Health Directorate provides support to adults at risk and who may have mental or physical ill health, learning and physical disabilities or those who are frail in their old age. Care and Support in the Home Services may be provided to people who fall within any one of these client groups. We also give help and support to those who are carers, and provide protection for vulnerable adults who may be at risk of or experiencing abuse. Providers who are successful in their bid for a Care and Support in the Home contract will be expected to put their clients at the centre of their service, and also work closely with the family and carers who support them.

The Care Act 2014 includes requirements for Local Authorities to support the care of adults at risk and carers and introduced a general duty on local authorities to promote an individual's 'well-being'. This means that we should always have a person's well-being in mind when making decisions about them or planning services. We also have the responsibility for promoting good health and well-being to our resident population and those people that come to work in the county. As part of the move towards the delivery of more outcomes-focused Services, a core element of the provider role will be to support ongoing conversations with clients about their well-being and the outcomes they wish to prioritise.

Local Policy

[Your life, your well-being 2016 – 2021](#)

'Your life, your well-being' is the Council's strategy for adult social care. Its vision is 'to help people to improve or maintain their well-being and to live as independently as possible'.

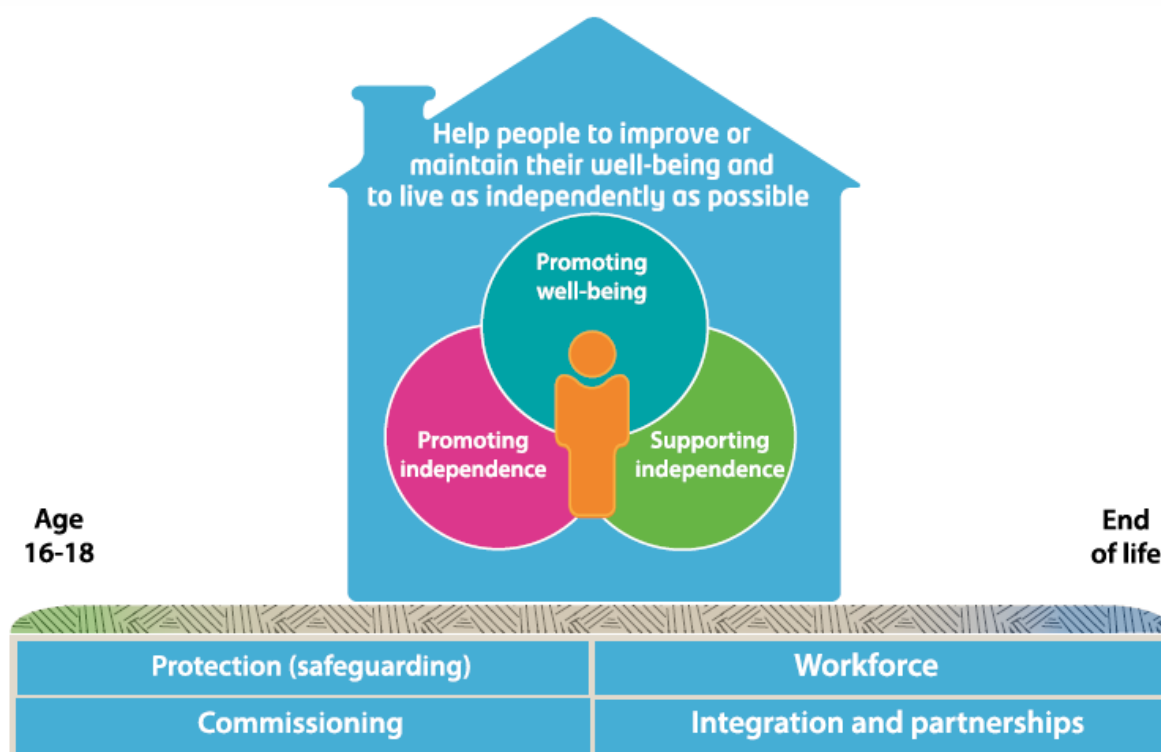
The strategy breaks down our approach to adult social care into three themes that cover the whole range of Services provided for people with social care and support needs and their carers:

- Promoting well-being – supporting and encouraging people to look after their health and well-being to avoid or delay them requiring care and support
- Promoting independence – providing short-term support so that people are able to carry on with their lives as independently as possible
- Supporting independence – for people who need ongoing care and support, helping them to live the life they want to live, in their own homes where possible, and do as much for themselves as they can. Providers who are successful in their bid for a Care and Support in the Home contract will be concerned with the delivery of high quality Supporting independence interventions

The strategy also details what the Council must have in place to achieve the vision:

- Making sure we provide effective management (with partners) to protect adults at risk of neglect or abuse. Keeping people safe is an important part of the legal obligations we must meet, and we take this very seriously
- Developing a flexible workforce with the right skills to work across organisational boundaries
- Commissioning and providing a range of flexible care and support Services
- Improving the way we work with the NHS through integrated commissioning and provision

Through these models of care and support, our aim is to improve peoples' experiences and promote their health and well-being.



3. Definition of 'Care and Support in the Home'

The 'Care and Support in the Home' Service will bring together a number of existing Services under one contract to form an 'umbrella' of interventions. These interventions aim, wherever possible, to support a person to achieve the outcomes that are important to them, in line with the vision set out by the Council in 'Your life, your well-being'.

The current Services are:

- Home Care Services
- Extra Care Support ('background hours' element only)
- Supporting Independence Service
- Discharge to Assess Service
 - The Discharge to Assess Service will be subject to a further competition, limited to appointed Care and Support in the Home Service Providers, during the life of the Contract. Therefore, to be eligible to be considered to deliver this Service provision, an interested Provider must first be appointed to the Care and Support in the Home Contract. Full details will be provided at further competition stage.

Aligning Services under one contractual arrangement will enable the Council to promote a consistent approach to the delivery of Services and ensure equitable access to Services for residents across client groups and localities. It will also support shaping the market to focus on the personalisation and outcomes agendas within the 'Your life, your well-being' strategy. Services must all support the Council's strategic outcome that 'Older and vulnerable residents are safe and supported with choices to live independently'.

Bringing Services together will also develop a clearer pathway, with less transfers between Services for clients supporting improved continuity of care. Providers will also have greater flexibility and control to manage fluctuations in demand to meet assessed needs.

Care and Support in the Home Services are designed to promote individual well-being and keep people safe, help people do as much as they can for themselves and allow people to live in their own home. 'Care and Support in the Home' can provide suitable alternatives to Residential, Hospital, Parental or other institutional care.

In Kent, Care and Support in the Home Services will form part of a continuum of care and support, ranging from support within communities and care for people in their own homes, through to specific supported accommodation with appropriate levels of care for assessed need, to high-level residential and nursing care home accommodation.

Home Care

Home Care (or Domiciliary Care as it is sometimes referred to) is the timely care and support provided by care workers to people in their own home, so they can be supported to live independently and can manage activities of daily living.

‘Home Care Services’ are delivered by private companies on the Council’s behalf.

Good Home Care Services should:

- Support people to take greater control of their lives by providing them with the skills to maintain a good quality of life
- Help people to develop and retain skills to enable them to maintain independent, fulfilling lives for as long as possible
- Put the person (and their primary carer or family) at the centre of decisions about how they are supported and cared for
- Be provided in such a way that the person feels involved, secure and confident in the care and support delivered to them

Extra Care

Extra Care Housing is for people aged 55 and over who want to maintain independence in their own home but need some care and support. People who live in Extra Care Housing have their own homes with their own front doors. Homes are usually provided as a block of flats or houses built together. It is ideal for people who have long-term deteriorating health conditions, people who need care at night or whose needs can change quickly.

There is care on-site but it is not a care home. Care and support is on-site and may be available up to 24 hours a day depending on the needs of people. Staff are always around in case of emergencies and on call 24 hours a day. Care staff are contracted by the Council separately to the landlord. Extra Care Housing usually includes facilities for people who live there, such as a restaurant and health and fitness facilities.

The Extra Care Housing provision in Kent is currently being expanded in line with the Council’s Accommodation Strategy, which will build a significant number of new units across the county. Full details of this are available in the Extra Care Housing prospectus.

Supporting Independence Service (SIS)

The Supporting Independence Service is a countywide, outcome-focused Service based on independence and social inclusion principles for people with health and social care needs in Kent, including young people and adults.

The focus of the Service relates more to the person as an individual, enabling them to make their own informed choices and live as independently as they are able. The Service puts each person at the centre of their care and support process by identifying their needs, preferences, goals and aspirations.

This may include but is not limited to:

- Maintaining and developing independence and control of their life
- Feeling more confident and needing less support
- Being supported to do as much as possible for themselves and making decisions about their life
- Feeling supported and knowing how to stay safe and free from abuse
- Feeling stronger and healthier

People may then make choices about how and when they are supported to live their lives. This approach can give eligible people more freedom, choice and control over the type of care and support that they receive.

Discharge to Assess*

With the progress toward 'Home First', the aim of the Discharge to Assess Service is to provide 'wrap around' support to people in their own homes for up to three days post discharge from hospital (with potential to extend for a further two days if the person's outcomes will either negate the requirement for ongoing Service or reduce the need).

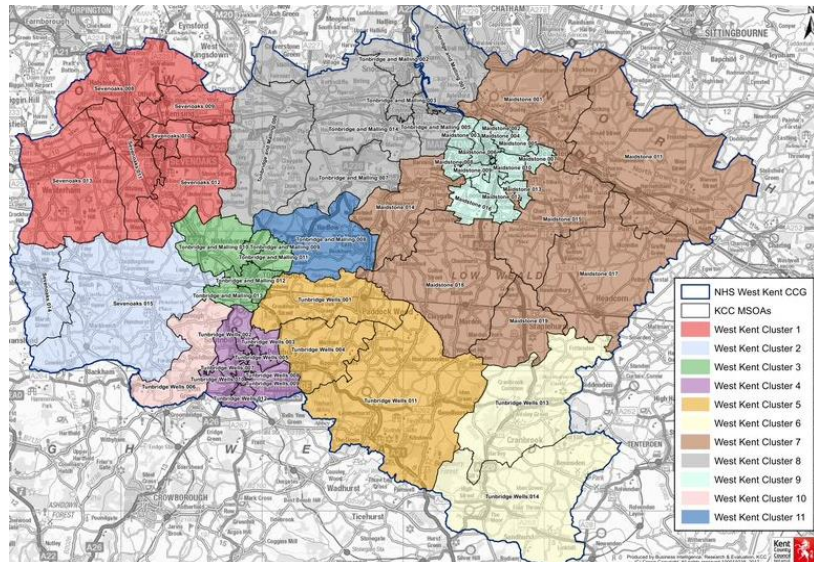
The Service forms an integral part of the Home First strategy, where people go home with an enabling/assessment/short-term Service to reduce bed blocking, contribute to the Council's Delayed Transfer of Care (DTC) requirements and enable people to recover at home.

The focus of the Service is to ensure the person is safe at home and to focus on maximising the independence of the person with agreed outcomes set against an assessment of their needs. This assessment can go on to form the basis for requests to community-based rehabilitation, Kent Enablement at Home (KEaH) or ongoing Home Care as appropriate to peoples' ongoing needs.

The Service is currently delivered across two areas in Kent covering:

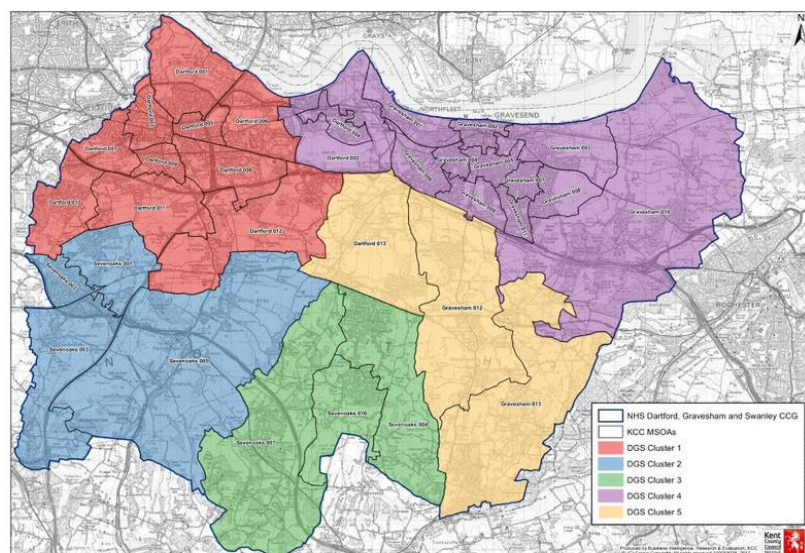
West Kent CCG and incorporating:

- Tunbridge Wells Hospital
- Maidstone Hospital
- Tonbridge Community Hospital
- Sevenoaks Community Hospital
- Edenbridge Memorial Hospital



North Kent CCG and incorporating:

- Darent Valley Hospital
- Gravesham Place Integrated Care Centre
- Gravesham Community Hospital
- Livingstone Community Hospital
- Elm Court



*Providers should note that the Discharge to Assess Service will not be tendered during Phase One. Providers who are appointed to deliver Care and Support in the Home may have the opportunity to deliver Discharge to Assess Services as part of a later Phase.

4. Benefits for clients

Care and Support in the Home Services have many benefits, both for people receiving the Service and for the wider community. These benefits cover a wide range of areas, including:

- Opportunities for people to remain in their own home whilst receiving the support that they require
- Enabling couples to stay together even with different levels of need, in a location situated in their local community
- Reducing social isolation with reassurance that a support worker will be visiting
- The CQC registration of providers offering peace of mind to family and the person/people receiving the service that the provider has undergone the requirements of the regulator and that they are routinely inspected
- Career opportunities for the wider community to work in the care sector, thereby reducing unemployment and providing a career pathway into other employment in the care sector

5. Benefits for the market

Closer alignment to the Council and strategic partners

The Council is presently going through step changes in the way it wishes to commission, deliver and manage Services, as well as the relationships it holds with Contracted Providers. This includes the realignment of the Older People and Physical Disability Division to enable change in the way the Council works with its Providers to develop and deliver Services. This realignment process will enable staff to work in new ways with Providers to develop practice and support the delivery of outcomes-focused, personalised care. Providers will benefit from improved access to Council practitioners which will support continuous improvement for quality in care and workforce development opportunities.

The contract strategy also gives consideration to the Health and Social Care integration agenda, and the Sustainability Transformation Plans which underpin it. Whilst boundaries for Lots are not coterminous as Local Care boundaries, they are designed to enable effective reporting into Local Care and support the ongoing development of joint working practices between providers, Health partners and the Council. This will not only support improved sharing and consistency of practice, but also aims to support a more efficient pathway and improved outcomes for people receiving Services.

Closer alignment between partners will enable the implementation of more effective systems, potentially reducing back office function requirements for the provider and the Council. The proposed approach is detailed in Section 9, 'Phasing'.

A successful bid for the Care and Support in the Home contract will provide the foundation for providers to work closely with strategic partners over the coming years to develop and grow their business and deliver meaningful outcomes for Kent residents.

In line with Section 9 'Phasing', Providers should note the opportunity to potentially deliver assessments and/or reviews, further Services, and be well placed to support in the joint delivery of Health and Social Care Services as integration between the Council and Health partners develops.



Aligning of rates

The new Care and Support in the Home contract presents an opportunity to align the rates paid to providers and explore incentivisation to ensure availability of support in traditionally hard-to-place areas.

At present, there is disparity in the rates paid to Home Care and Supporting Independence Services providers which has grown year on year since 2012/13. Whilst Home Care providers received price uplifts in 2014/15 and 2015/16, SIS did not receive the same. Both markets received an uplift in 2016/17 but there remained a significant disparity between the rates. The differential in rates has resulted in price compression for the SIS market, and concerns about the financial viability of some packages of support.

As outlined in Section 8 'Commissioning Intentions', the contract also offers an opportunity to address the challenges experienced in securing care in rural areas. The Lotting Strategy will give further detail of the envelope of rates that will be paid linked to the Office of National Statistics rurality indices to support financial viability for providers.

The Pricing Strategy will also take advantage of the opportunity to review and reduce the differentiation in rates across Services and localities. At present there is significant variation in pricing within the contracted and non-contracted market. This is especially apparent in the rural clusters, where costs are often inflated by non-contracted Providers to incorporate the extra travel requirement. For example, DGS 4 has only 14 Providers and yet there are 67 distinct rates being used across that cluster, including Social and Unsocial Full Hour, $\frac{3}{4}$ Hour and $\frac{1}{2}$ Hour rates. Similarly, West Kent 4 is supplied by 14 Providers with 64 distinct rates across the cluster. The new contract offers the opportunity to reduce the discrepancy in rates to support a consistent and transparent pricing approach, whilst also retaining the distinction in rates between standard and complex support, as illustrated below:

<p>Example A: Simon (Standard Support)</p>  <ul style="list-style-type: none">• A person requiring:• Prompting with morning and evening medication• Support with Budgeting• Support with Travel Training• Prompting with Meal Preparation <p>20 Hours per week @ Standard Rate</p>	<p>Example B: Ethel (Complex Support)</p>  <ul style="list-style-type: none">• A person presenting challenging behaviour and hearing loss, requiring:• Communication via level 3 BSL• Support with management of challenging behaviour• Support with morning and evening medication• Support with Meal Preparation• Sleep Night Support <p>25 Hours Day Support per week @ Complex Rate 7 Sleep Nights @ Contracted Rate</p>
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It is the Council's intention to set the amount paid for 30 and 45 minute calls at 60% and 80% (respectively) of the hour rate. Further, the Council intends to remove social/unsocial rate discrepancies.

Continuity and quality of care

Due to the strategy of placing more emphasis on quality of care as opposed to lowest price, the Council will be able to assure quality across the market. This is likely to be associated to a reduction in resource to safeguarding, care management, commissioning and purchasing when reacting to issues and failed packages. This will free up resource in both the provider organisations and the Council to concentrate on strategic, statutory and operational priorities.

As quality in the market is assured through the contract, the Council intends to enable providers to have more flexibility in the way they deliver care to meet the needs of clients. In the early stages of the contract, this may include pilot projects to test giving providers flexible 'envelopes of care' in which hours are assigned to clients on a weekly or monthly basis, and the provider is free to deliver these as they see fit to meet outcomes.

Workforce development

The new contract is designed to enable providers to develop their workforce through training offers and opportunities to work in partnership with practitioner colleagues in the Council and Health organisations. The Lotting Strategy proposes an increased use of block contracting, which guarantees volumes of hours and further enables providers to invest in workforce. It is anticipated that in the long term this will support a reduction in staff turnover and increased stability within the market.

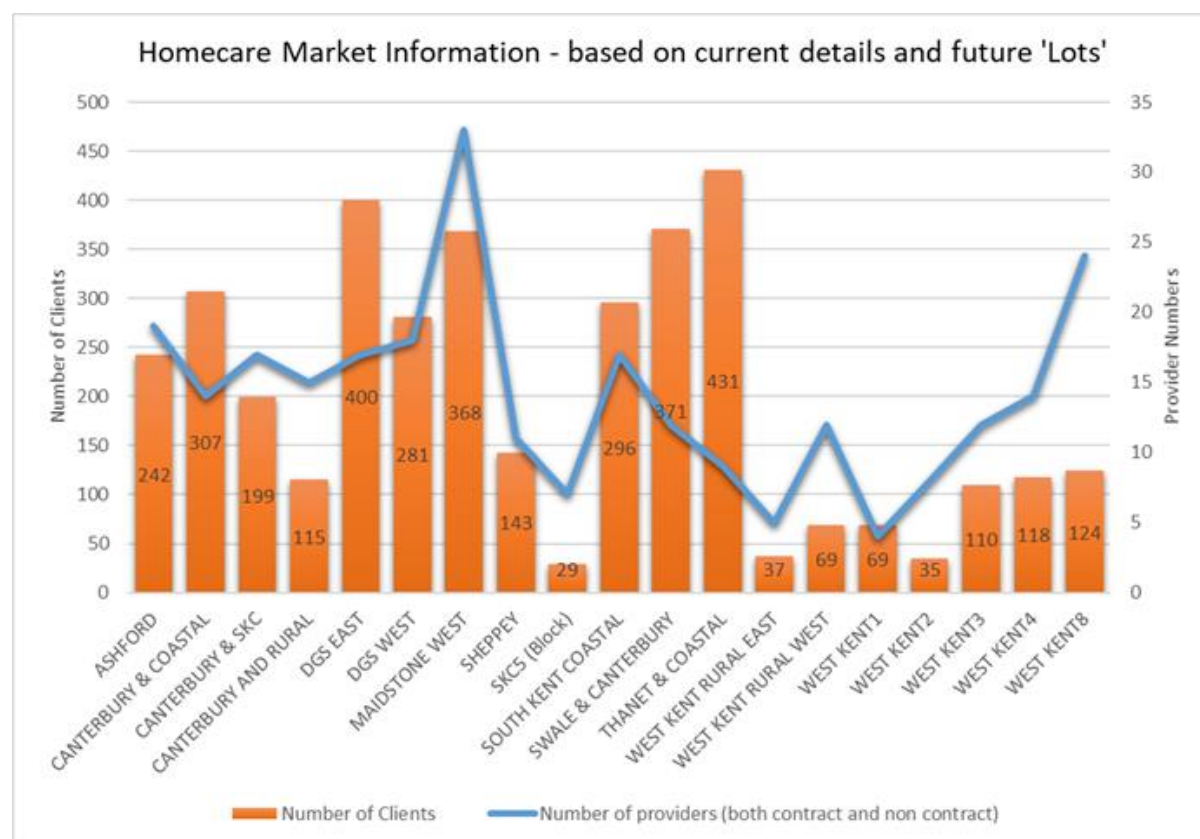
Providers should note that this offering will enable Providers to come together, as a Consortium, to deliver a range of Services within the community. The joining up of these

Service provisions will enable an investment within the workforce and the offering of career pathways for individuals given the range and scope of Services to be provided.

The Council shall specify training and development minimum requirements within the Specification, and there will be an emphasis on Provider's ability to recruit, retain and develop a sustainable workforce.

6. Kent Landscape

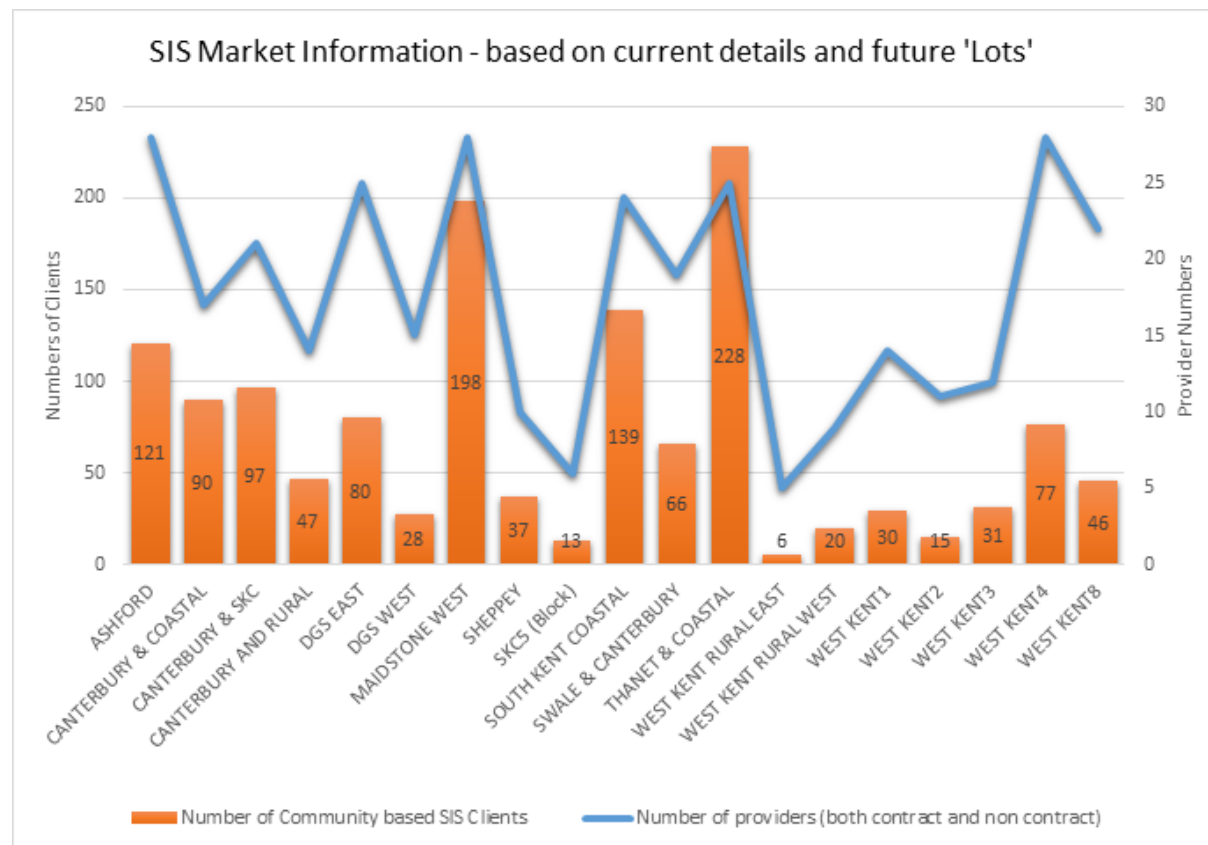
Currently there are more than 400 Commissioned Providers delivering Services within scope of the Care and Support in the Home Services. A number of these Providers deliver both Home Care and Supporting Independence Services.



The above graph illustrates the large variation in the number of clients receiving care and support under the existing Home Care service. The variations are largely based on the rurality of each cluster group. Interestingly there is little correlation in the number of providers in each area when compared to the volume of clients.

For example, the cluster groups, West Kent Rural West and West Kent 1, currently both have 69 clients in receipt of Home Care. However, the provider market varies greatly across these two cluster groups, with 12 and 4 providers respectively.

These fluctuations in volume and provider share can lead to financial and capacity viability issues in relation to managing staff resource to deliver the required support packages.



The above graph shows a slightly different picture across the SIS market than that of the previous Home Care illustration. The number of SIS providers is generally higher across each cluster group when compared with Home Care, although there is a significantly lower volume of clients in each area.

This disparity in the market analysis is largely down to the greater levels of support required within SIS, with several providers specialising in certain areas of complex support and promotion of independent living skills. As with Home Care, the more urban areas comprise the greatest volume of clients when compared with the more rural areas.

The same rural areas with lower volumes of clients often have many providers due to the challenges in ensuring packages remain sustainably viable in terms of staff capacity and financial viability.

7. Partnership approach

The Council is looking to engage with providers who are willing to work innovatively and in partnership to address a number of challenges over the life of the Contract, including but not limited to the below.

The Council wishes to emphasise that it encourages consortium proposals, from Providers coming together with the collective suitable and appropriate experience, expertise and ability to meet the needs of individuals within cluster areas.

Quality Care and Support

The Care Quality Commission has identified gaps in quality monitoring processes, including not actively seeking the views of people requiring care and support Services and their carers and relatives.

The Council will work with providers and other relevant stakeholders as an ongoing priority and competence in this area will be included as part of future commissioning requirements.

Responsive, outcome-focused care and support in the home will be vital to the delivery of improved Services to our residents. Care and Support in the Home is the timely care and support provided by professional carers to individuals in their own home to support their independence in managing activities of daily living.

A good 'Care and Support in the Home' Service will support people to retain and develop skills to enable them to maintain independent, good quality, fulfilling lives for as long as possible. 'Care and Support in the Home' Services will put the person (and their primary carer/family) at the centre of decisions about how they are supported and cared for. Services should be provided in such a way that the person feels involved, secure and confident in the care and support delivered to them.

Strategy and Service

The Care Quality Commission consistently draw stakeholders' attention to the following problematic areas in their strategic and service reports:

- Late and missed visits
- Lack of consistency of care workers
- Lack of support for staff to carry out their work and failure to address the ongoing issues around travel time
- Poor care planning and a lack of regular review
- Lack of staff understanding of their safeguarding and whistleblowing responsibilities

In its report 'The state of the adult social care sector and workforce in England' in September 2017, Skills for Care positively reported that two thirds (63%) of direct care staff have engaged with the Care Certificate (achieved the Care Certificate/in process of doing so/partially completed) in England. However, it reported that Kent lagged behind with just 38% of the workforce having done so.

The Council will work with providers and other relevant stakeholders to understand the reasons for the discrepancy and support the further professionalisation of the workforce in Kent.

The contract will require providers and stakeholders to work with the Council's workforce development leads to meet this challenge.

There are numerous other workforce challenges that the Council will seek to address collaboratively with providers including:

- Gender balance
- Zero hours contracts
- Levels of basic literacy and numeracy
- Recruitment challenges
- Pay rates

Partnership and Relationships

The Council wishes to work in partnership with providers to ensure the delivery of a quality, outcomes-focused Service to its residents. Providers who are successful in their bids for a lot will be expected to deliver both Services which have previously been known as Home Care and Supporting Independence Services across the locality area.

By signing up to a partnership approach the Council and providers will be making a commitment to working to a contract that will:

- Be flexible enough to reflect changing needs, priorities & strategy
- Seek continuous improvement through fostering a learning environment and working together
- Deliver person-centred Services
- Work towards achieving key outcomes and objectives
- Communicate openly and honestly with each other clearly and regularly
- Share relevant information, expertise and plans
- Avoid duplication wherever possible
- Monitor the performance of all parties
- Seek to avoid conflicts but, where they arise, to resolve them quickly at a local level wherever possible

Technology

Technology will never replace the human interaction that occupies the very heart of adult care. Nor can it replace the compassion, kindness, empathy and understanding which is essential in building relationships between providers and those in our society who have health and social care needs.

Technology does however have the potential to enhance the quality of adult care by:

- Improving operational efficiencies
- Reducing errors and risks
- Increasing capacity to manage limited resources effectively
- Giving care and nursing staff more time and space to deliver personalised care and support

There is a wide-range of information technology and software being developed for the adult care sector, many of which include applications that work together to positively influence the quality of care and support Services delivered.

- Paper-based documentation will be replaced by electronic care plans that support person-centred care and assist providers to more effectively demonstrate and ensure compliance.
- Electronic Call Monitoring systems can give care workers a live rota on their mobile handsets and real-time task lists and service user data. It can also allow managers to see, instantly, if a care worker is running late for an appointment.
- Electronic Medication Administration Records (eMAR) enable care and nursing staff to more effectively coordinate, monitor and administer medications and provide more accurate and timely medication information for staff, and further improve safety.
- Smart scheduling and rostering systems can enhance accessibility to personalised care services in the most efficient ways. This allows an organisation to deliver more flexible and personalised care, therefore driving improved outcomes for the Service user.

Telecare and Telehealth are becoming more mainstream and are now often used to remotely monitor people with health and social care needs. Items such as Fall Detectors and Sensors such as 'Just Checking' are now commonly used. Everyday technology can also be used to enhance an individual's life which in turn can reduce pressures on family carers or paid care workers. Some examples include:

- Voice activated devices and systems to control appliances or electrical items
- Door video systems which enable someone to see who's calling without opening the door to unknown callers
- Voice prompt systems which use motion sensors to play back recorded messages reminding people of 'important things' such as "don't forget your keys"
- Smart Appliances such as ovens, fridges and washing machines which can be controlled via an app on a phone or tablet

The use of commonly sourced non-specialised products can often be overlooked in favour of the more expensive specialised products.

8. Commissioning Intentions

The [Kent Business Portal](#) is our electronic tendering site. All opportunities to provide us with goods and services worth £50,000 and above are advertised on the Kent Business Portal.

To be considered for a tender you must be registered on the Kent Business Portal. Registration for the Portal is free. Once registered to use the Portal you will receive automatic email notifications every time a new opportunity relevant to your business is posted.

The Contract is anticipated to commence on 8th April 2019 and indicatively will continue for a period of 5 years with an option to extend for a further period of 3 years unless terminated in accordance with the Conditions of Contract on the Kent Business Portal.

The estimated total value of the contract is between £80M and £140M per annum but no guarantee is given as to the actual value of the contract.

Timescales

Set out below is the proposed commissioning timetable:

Event	Anticipated Date
Specification Published (for feedback and comment)	Mon 6 th Aug 2018
Publish advert and ITT	Mon 10 th Sep 2018
Deadline to submit requests for clarification via the Kent Business Portal	Mon 1 st Oct 2018
Closing date and time for Tender Submissions	12 noon Wed 10 th Oct 2018
Tender Evaluation Period	Thu 11 th Oct – Tue 6 th Nov 2018
Award Clarification Meetings	Wed 6 th Feb – Wed 20 th Feb 2019
Internal Governance	Thu 21 st Feb – Thu 28 th Feb 2019
Contract Award & Standstill	Fri 1 st Mar – Mon 11 th Mar 2019
Mobilisation	Mon 1 st Apr – Wed 31 st Jul 2019
Contract Commencement Date	Mon 8 th Apr 2019

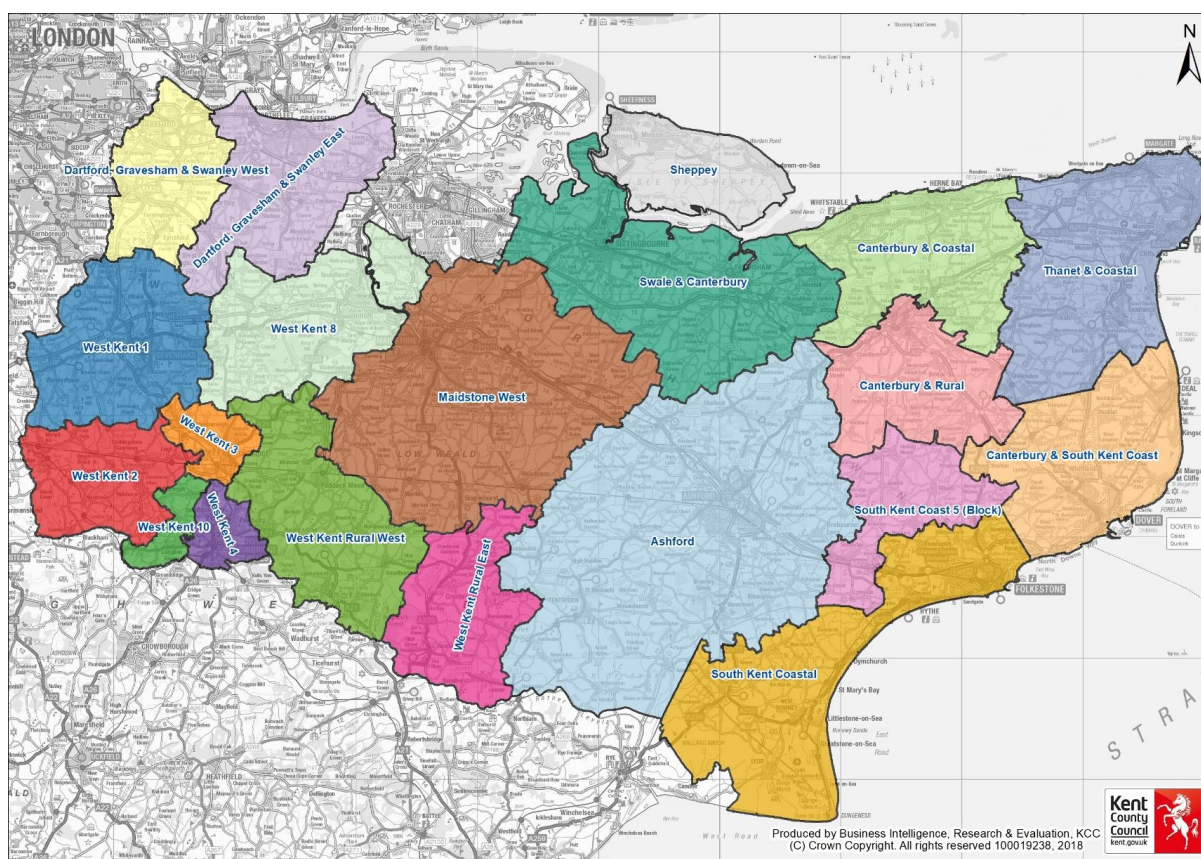
These dates are provided for information purposes only. The Council does not guarantee to complete each phase by the date stated above.

Lots

For the purpose of this Care and Support in the Home tender the geographic area covered by Kent County Council has been divided into Clusters, each of which will constitute a Lot.

The Lots have been built based on Office for National Statistics Middle Super Output Areas (MSOAs). MSOAs group the population based on an area with approximately 5,000 residents. This means that MSOAs differ significantly in geographical size, with urban areas being concentrated over a small geographical area, and rural areas more widely spread.

The tender pack issued to providers will contain maps and data to provide an understanding of the scale of business, concentrations of the population and the geographic spread of any Lot providers are interested in. It will be a mandatory requirement of the contract that providers will deliver full coverage of the Lot(s) that they are awarded a contract for. The below map demonstrates the boundaries the Council intends to Contract on.



Contracting arrangements for other services will be as follows:

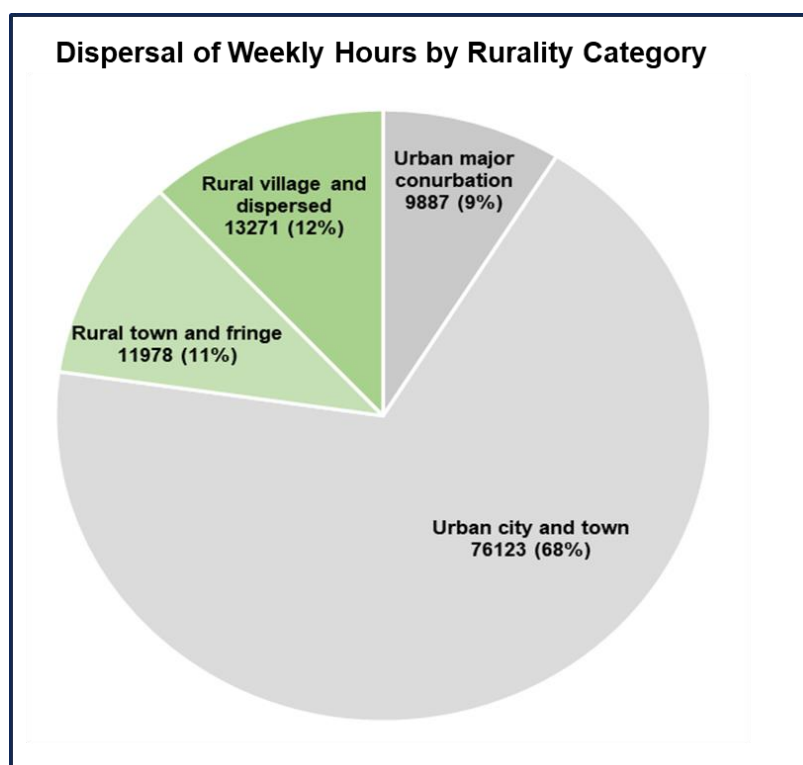
Extra Care Background Hours	Providers who are successful in their bids to deliver Home Care and Supporting Independence Services will be able to tender for the delivery of Extra Care background hours within the Lots in which they are successful next year.
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Discharge to Assess	Providers who are successful in their bids to deliver Home Care and Supporting Independence Services will be able to tender for the delivery of Discharge to Assess Services within the Lots in which they are successful next year.
Supported Living	Supported Living Services are not in scope, during phase one, for this Contract.

In designing the Lotting approach, consideration has been given to the historic challenge of securing supply in rural areas. This addresses these challenges with a mix of two approaches:

- Block contracts which enable greater flexibility of delivery and ensure capacity. This approach has demonstrated improvements in availability of care and support in a pilot project.
- 'Cluster groups' where urban and rural MSOAs have been brought together. This provides a more profitable urban area as an incentive to support challenging rural areas.

This approach is intended to normalise incentivisation to reduce supply issues in rural areas and ensure all areas are financially viable for providers. The strategy utilises Office of National Statistics rurality indices and has a close interdependency with the Pricing Strategy. In the Pricing Strategy aligned to Care and Support in the Home Services, the Council will apply a weighting to contracted rates linked to the rurality of individual postcodes.



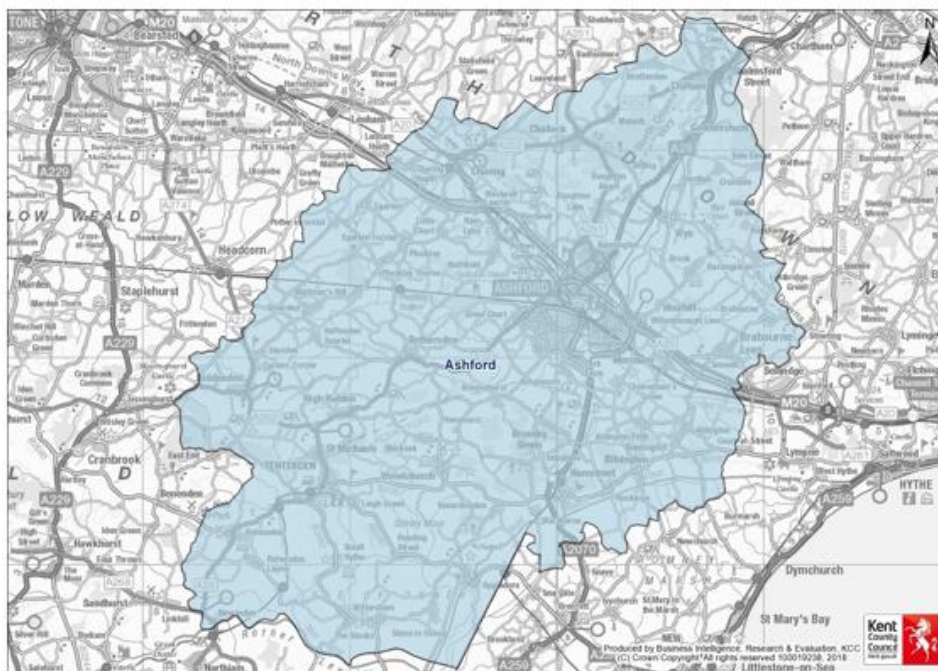
The strategy will take account of:

- Rurality of areas and associated costs of delivering care and support in these areas
- Volume of hours delivered in areas
- Types of needs in areas
- Volume of hours required for provider viability
- Number of providers required within an area to minimise risk and achieve a viable market share

The Lotting approach has been founded on the following key principles:

- Providers will commit to work together to ensure that residents have equitable access to quality Services in a timely manner
- Differing rates across Services and localities will be stabilised to normalise incentivisation
- SIS and Home Care Services will be brought together to improve availability of provision in hard-to-place rural areas

The below picture shows a snapshot of one of the Lots and the associated information that will be given to providers to enable them to consider their bids.



Proposed approach:

- 4 – 6 providers who work in partnership across the whole geographical area to deliver approx. 7,197 hours
- Aspiration to move to a consortium model in the mid to long term to enable closer partnership working

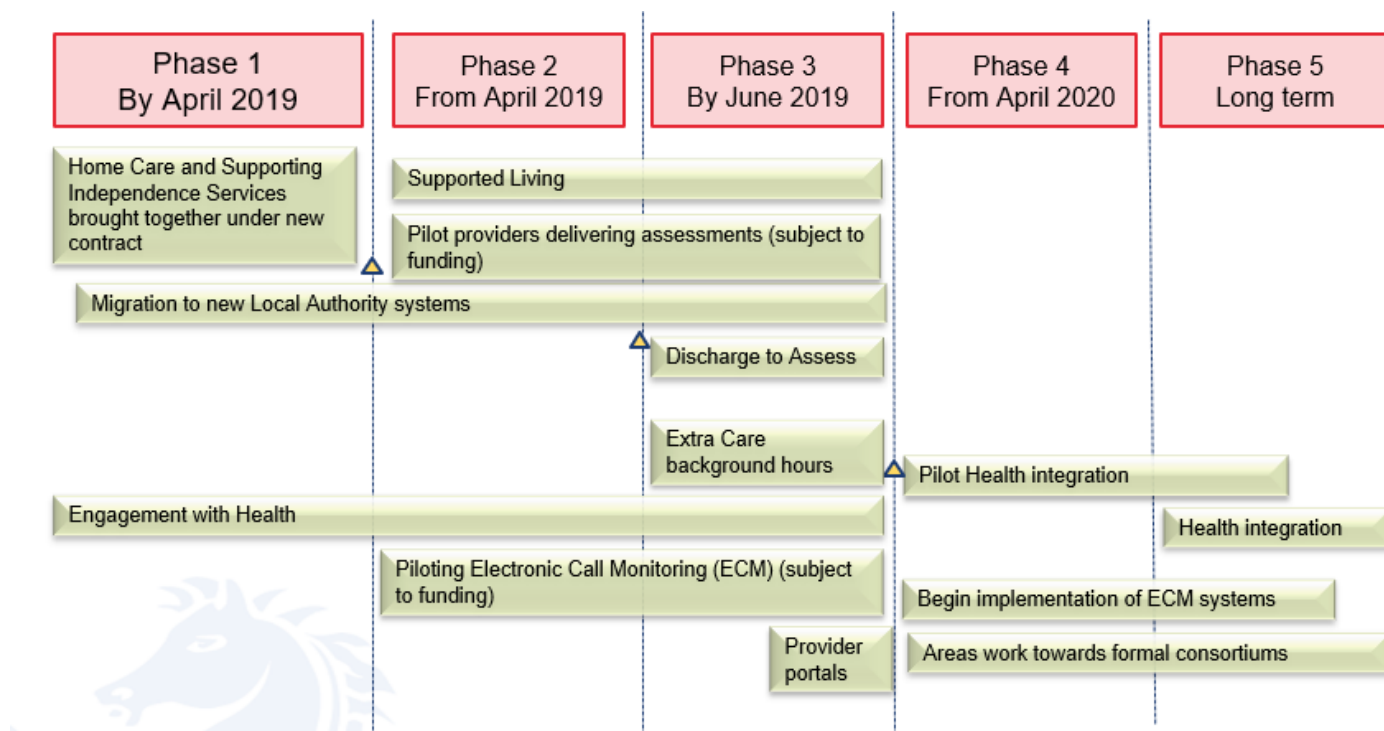
New cluster	Old clusters	Combined weekly hours	Pre-contract let total number of SIS and Home Care providers	Post-contract let total number of SIS and Home Care providers	Contract type
ASHFORD	ASHFORD1 ASHFORD2 ASHFORD3	5253.25	38	4-6	Consortium

More information regarding the Lots will be available with the Invitation to Tender documentation, which will be issued via the Kent Business Portal.

9. Phasing

The move to bring Services together under one contract and work towards the personalisation and outcomes-focused agendas represents a change for the market in how Services will be delivered. The Council recognises that this change cannot be achieved overnight and that the achievement of ambitions such as Health integration and the delivery of more flexible and responsive care will need to be underpinned by step changes such as the implementation of new systems and workforce development.

The below diagram outlines the phased approach that will be taken to achieve the strategic objectives associated with Care and Support in the Home Services. At each stage, providers will be expected to work collaboratively with one another and with the Council to support continuous improvement of Services.



10. Additional information

The Senior Commissioning Manager for Care and Support in the Home Services is: Jack Moss.

Should you have any queries or comments in relation to this document, please contact communitysupport@kent.gov.uk marking your email for the attention of Tracey Schneider, Senior Commissioner.

Please note that all updates regarding the tender timescales, advert and tender documentation will be issued via the Kent Business Portal. Further information will not be issued on an individual basis.