# Lewisham Personalised Care and Support in the Home; Preferred Provider Framework

**Provider Forum**

**26th July 2017**

- **Introduction to the Preferred Provider Framework**
- **Procurement time line**
- **Overview of the draft Service Specification**
  - Service Standards
  - What we are looking for from providers
  - Service Lots

- **Provider Discussions on:**
  - Personalisation
  - Outcome focused services
  - Cost models
  - Dynamic Purchasing System

- **AOB**
  - Questions for the Commissioners
  - Other provider issues to consider

# Agenda

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- Lewisham is re-tendering its Preferred Provider Framework for Personalised Care & Support in the Home
- Previous framework was commissioned jointly with other boroughs and CCGs
- Framework will cover **children and young people with complex health needs, personal care needs, short break needs and challenging behaviour**
- Framework will be available to families that have approved Direct Payments
- Current spend is around £1.1million across the three existing service lots.

# Introduction to the Preferred Provider Framework

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Direct payments have given increased flexibility

Communicating directly with my carer has been great

I feel safe with my carer and enjoying doing activities with them

The CHC service my child receives is consistent and carers/nurses are always well trained

Carer is proactive and has an excellent overview of activities

**These are just some of the positive things which young people and their families have said about the service they receive**

# Testimonials

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- The London Borough of Lewisham is committed to providing holistic and personalised care for children and young people with complex health needs and disabilities and their families.
- Providers on the framework will enable Lewisham to deliver on its commitment to children and young people with complex health needs and disabilities and their families set out in the Children and Young People's Plan 2015-2018, and the Lewisham SEND Strategy 2016-19.

# Lewisham Context

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- The time lines for the procurement of the new framework are not yet set
- Tendering will take place for a contract award before January 2018 (the end of he existing framework)
- The tender will be advertised through London Tenders
- Providers can tender for all lots, multiple or single lots – evidencing their ability to provide the services required through the specification.

# The procurement process

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## Personalisation Approach

service providers must be able to enable every person who receives support to have choice and control over the shape of that support in all care settings

providers must actively seek feedback and demonstrate how feedback is used to shape services they deliver

## Be Creative

providers should employ a range of creative, flexible and evidence based approaches to delivering care & support to children and young people with complex health needs and disabilities

## Outcome focused

**Achieving and** supporting the aspirations and development of disabled children and young people in an evidenced way

## Continuity and consistency of carer

provider recruitment policies should reflect this commitment to providing continuity & consistency

## Partnership Working

providers are expected to work with a range of partners to deliver the personalised care and support service pathway.

# Overview of the service specification; expected service standards

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- Matching carers to the individual needs of families
- Supporting families choice and control over when and how they receive services
- Supporting families to increase their independence
- Enabling families to participate actively in the community
- Supporting families to develop the skills and confidence they need to care for their children and young people with complex health needs and disabilities
- Providing support to prevent or reduce the future support needs of families with children with complex needs
- Supporting children and young people with complex health needs and disabilities to develop the skills and confidence they need to self care and develop their independence
- Supporting parents and carers of children and young people with complex health needs and disabilities to take breaks from their caring responsibilities in a way that enables them to maximise the benefit on their wellbeing
- Enabling children and young people with complex health needs and disabilities to engage in activities that they enjoy and/or develop their education or independent living skills.

# Overview of the service specification: service standards & key activities

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**Lewisham consulted with children, young people and their families, these are some of the comments they made regarding the current service.**

| What works well | What doesn't work well |
|---|---|
| Carers deliver good independence training which meets outcomes | Backup carers not always familiar with the child or young person |
| Consistency of carer is important to have a positive impact on young people | Lack of flexibility in hours |
| Direct payments provide flexibility to deliver a mixture of services | Some carers have limited experience with ASD and challenging behaviour |
| When provider communication is strong it improves the service delivery | More young male carers required |

# Service Standards: Feedback from Young People and their families

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- The following working practices have been identified as important by the teams working with providers through the framework. Successful providers will be able to demonstrate how they are able to ensure that these practices are delivered.
  - Ensuring that daily logs and care notes are accessible to the commissioning authority
  - Increased variety of carers and support workers
  - More cover for children and young people requiring personal care.
  - Responding to requirements within a set response time
  - Ensuring minimum standards & qualifications are met and packages are appropriately matched. Incl. shadow shifts for new/backup carers
  - Able to offer 1:2 or 1:3 services particularly for community activities
  - Able to provide a two page overview of the services which your agency can provide
  - Have continuity & transition plans in place when carers leave your agency

# Service Standards: Working Practices

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- Providers can tender to provide services in the following lots:
  - Lot A: Personalised Care and Support delivered by Children's Nurses
  - Lot B: Personalised Care and Support delivered by Highly Skilled Carers
  - Lot C: Personalised Care and Support delivered by Support Workers
  - Lot D: Mentoring, buddying and personalised care and support delivered by carers or support workers
  - Lot E: Specialised Care for children and young people who require palliative or end of life care.

*Further details on the core competencies required across each lot will be available in the full service specification*

# Service Lots

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# What are we looking for from providers?

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- Considering using sproc.net (currently used for Transport & Travel Assistance & SEN placements) to develop a dynamic purchasing system
- End-to-end dynamic category solution; providers bid for services through & contract award made through a system.
- Potential benefits include:
  - Increased service transparency for providers (you can see the range and volume of service requirements across lots)
  - Open framework – providers able to join at any time
  - Service receipts provided through system means faster & more accurate payments for providers
  - More effective but less resource intensive contract monitoring
  - Pro-active performance and good performance reported/managed through system

# Future Development; DPS

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- What does Personalisation mean for providers?
- Is there a difference in providing services to clients with direct payments compared to those who have services commissioned on their behalf?
- What are the impacts of Personalisation on providers?

# Provider discussion – Personalisation

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- What do providers think about the outcomes we are trying to achieve for families?
- Are the outcomes deliverable?
- What would providers to do deliver these outcomes?
- Do providers have any views on the measurement of outcomes?
- What should providers be held accountable for?

# Provider discussion – Outcomes

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- Flat rates or sliding scales depending on the number of hours?
- Are you happy with a continuation of Cost Volume Discount?
- What additional information might you need?
- Is this attractive to providers?

# Provider discussion – Cost Models

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- Are you part of a dynamic purchasing system elsewhere?
- If yes, does it work?
- What additional information might you need?
- Is this attractive to providers?

# Provider discussion – DPS

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Any other views / issues for providers that commissioners should take account of?

**Thank You**

**Anything else?**

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