

This report may be of interest to: Policy and Resources Committee

BEST VALUE REVIEW OF HOME CARE

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1. Purpose

1.1 To update the Committee with progress following the Best Value Review of Home Care.

2. Summary

2.1 This report outlines progress following the Best Value Review of Home Care and the main work that remains to be done.

3. Recommendations

3.1 To note the report.

4. Background

4.1 The Best Value Review of Home Care was reported to the Best Value Sub-Committee on 31 March 1999. It was then considered by the Reference Group on 14 April 1999 and their comments were taken on board in the preparation of the Action Plan that was approved by Neighbourhood Services Committee on 7 July 1999. The Reference Group met again on 15 September 1999 to monitor progress against the action plan and to consider in more detail some of the issues around possible externalisation of part of the service. The updated version of the Action Plan, attached as an **Annex** to this Item, only differs from that previously considered by Neighbourhood Services Committee in that updates are included in bold italics in the final column.

4.2 The improvement of the Home Care Service is referred to in objectives 3.1 and 4.4 of the Neighbourhood Services Strategic Plan.

4.3 Overall considerable progress has been made in the implementation of the action plan:

- (a) clear objectives have been set for the existing service;
- (b) more sophistication is being applied to criteria for reviews/reassessments;

- (c) a benefit take up initiative is being piloted;
- (d) eligibility criteria are being developed;
- (e) funding for the Community Rehab Project has been secured within the Partnership Grant;
- (f) the West Bletchley Pilot Project is exploring different models of linking home care to health and sheltered housing;
- (g) an annual information exchange is being arranged;
- (h) recording practice procedures have been made clearer (and will be further improved with the introduction of new computer system);
- (i) greater clarity is being brought to development of specific services for specific client groups; and
- (j) staff communications have been improved.

4.4 The Inter-authority benchmarking group, initiated by this Council, is showing much potential to be extremely useful in comparing best practice and particularly in creating a common methodology, which will enable comparable information re service quality to be produced across a number of authorities. This information has not been available previously and will have long-term benefits in enabling a continuous improvement approach to be adopted.

4.5 A meeting with 16 external providers was held on 29 July 1999 to discuss how arrangements with external providers could be developed. This has been followed up with further discussions with the Reference Group and internally.

5. **Issues and Choices**

5.1 The most major challenge continues to be determining how to approach possible externalisation of parts of the service in order to achieve financial targets, whilst minimising any detrimental effects on service quality, effectiveness and the potential to achieve desired strategic changes. The Best Value Review was not able to conclude how to measure or compare the effectiveness of Home Care services with other authorities, indeed the Department of Health nationally has yet to make much progress in this respect.

5.2 Within this major challenge, key issues requiring further work are:

- (a) how to manage assessments and reviews;
- (b) striking a balance between having enough providers in the market to get the “benefits” of competition, without having so many that scales of economy are lost;
- (c) how to minimise travel costs in a multi-provider system;

- (d) how to not create a financial incentive for any provider who inherits staff under TUPE to replace experienced staff with newly employed staff, thus affecting the quality of the service;
- (e) contingency planning for the scenario when a provider ceases to trade;
- (f) looking at the potential for staff to set up their own businesses; and
- (g) developing an accreditation system for providers that will give people confidence to arrange services without Council subsidy (because they fall outside of eligibility criteria or because the service is not one that the Council subsidises).

5.3 The Reference Group on 15 September recommended that the:

Neighbourhood Services Directorate undertakes an early feasibility study to assess the benefits of contracting out, on a geographic basis, part of the Home Care service. This study should:

- (a) *consider contracting out at least 1000 hours per week;*
- (b) *include consultation with all interested parties; and*
- (c) *assume that the first six weeks “intensive” home care provided to hospital out-patients should remain in-house.*

5.4 Additionally, a positive vision needs to be developed and refined for the in-house service to maximise the motivation of existing staff. This is most likely to concentrate on intake, rehabilitation and other high skill aspects of the service. (Also, as an overall approach to the market is taken, there needs to be a strategy for reducing overhead costs for the in-house service.)

5.5 These issues have been further complicated, until recently, by the uncertainty around the budget process. The combination of these factors has meant that it has not yet been possible to bring forward firm final recommendations.

6. **Implications**

6.1 Environmental

None.

6.2 Equalities

The Home Care service serves some of the most vulnerable people in the community. Any approach to developing a price-competitive market in Home Care is likely to increase the number of low paid staff, especially women, at the risk of social exclusion.

6.3 Financial

Targets for savings have been agreed by the Policy and Resources Committee on 19 October 1999, work now needs to proceed on the detailed implementation of a plan to

achieve those savings.

6.4 Legal

TUPE may apply to any service that was to be transferred to a different provider (and effect the ability to achieve savings)

6.5 Staff and Accommodation

Implications will depend on the final strategy adopted.

7. **Conclusion**

7.1 A further report recommending how to achieve financial targets needs to be made to Neighbourhood Services Committee or another relevant Committee as soon as possible.

Background Papers: Best Value Review of Home Care