

Report to:	SINGLE COMMISSIONING BOARD
Date:	4 October 2016
Reporting Member / Officer of Single Commissioning Board	Clare Watson, Director of Commissioning, Single Commissioning
Subject:	CONTRACT FOR THE PROVISION OF SPECIALIST DAY SERVICES FOR PEOPLE WITH DEMENTIA
Report Summary:	To present a report to seeking authorisation under Procurement Standing Order F1.3 to extend for a period of twelve months where there is provision to do so in the contract.
Recommendations:	That the contract is extended for a period of twelve months from 2 December 2016 to 1 December 2017.
Financial Implications: (Authorised by the statutory Section 151 Officer & Chief Finance Officer)	<p>The proposed one year extension (December 2016 to December 2017) to the contract (£0.345 million) will be financed from the Integrated Commissioning Fund. The resource allocation is within the Adult Services revenue budget of the Section 75 pooled fund.</p> <p>The existing service provision supports the delivery of cost avoidance to the health and social care economy. The supporting details of the existing and the potential avoided weekly gross costs are provided within section 3.3 of the report.</p> <p>Whilst the contract value has not been market tested since the date of contract inception, it is recognised that the proposed gross unit cost (per day) value of the service contract extension is comparable with similar gross unit costs (per day) that have been tendered by similar providers for similar services (comparable unit cost details provided within section 3.2 of the report).</p> <p>It is essential that commissioning intentions beyond the proposed contract extension period are evaluated and considered at the earliest opportunity if approval is granted to the existing contract extension to 1 December 2017.</p>
Legal Implications: (Authorised by the Borough Solicitor)	This is a decision for the SCB. The contract contains an in-built extension provision to extend and to implement this would not contravene the Procurement Rules or be unlawful. Better planning is required in future to ensure that decisions to extend a contract are taken at a more appropriate time as it would otherwise be difficult to re-procure or decommission a service within the remaining contract term.
How do proposals align with Health & Wellbeing Strategy?	The proposals align with the Developing Well, Living Well and Working Well programmes for action.
How do proposals align with Locality Plan?	<p>The service is consistent with the following priority transformation programmes:</p> <ul style="list-style-type: none"> • Enabling self-care; • Locality-based services; • Planned care services.

How do proposals align with the Commissioning Strategy?

The service contributes to the Commissioning Strategy by:

- Empowering citizens and communities;
- Commission for the 'whole person';
- Create a proactive and holistic population health system.

Recommendations / views of the Professional Reference Group:

PRG supported the recommendations.

Public and Patient Implications: None.

Quality Implications:

Tameside Metropolitan Borough Council is subject to the duty of Best Value under the Local Government Act 1999, which requires it to achieve continuous improvement in the delivery of its functions, having regard to a combination of economy, efficiency and effectiveness.

How do the proposals help to reduce health inequalities?

Via Healthy Tameside, Supportive Tameside and Safe Tameside.

What are the Equality and Diversity implications?

The proposal will not affect protected characteristic group(s) within the Equality Act.

What are the safeguarding implications?

Safeguarding is central to this service.

What are the Information Governance implications? Has a privacy impact assessment been conducted?

The necessary protocols for the safe transfer and keeping of confidential information are maintained at all times by both purchaser and provider.

Risk Management:

There are no anticipated financial risks given the relatively low value of the contract. There is, however, potential risk of carer stress and family breakdown requiring people to move into either temporary or permanent supported accommodation should the service not continue. The service is performance managed quarterly and regular contact maintained with the Creative Support.

Access to Information :

The background papers relating to this report can be inspected by contacting Dave Wilson, Team Manager, Joint Commissioning and Performance Management, by:

 Telephone: 342 3534

 e-mail: dave.wilson1@tameside.gov.uk

1. BACKGROUND

- 1.1 Adult Services has provided a specialist day service for people with dementia since October 1997. The overall aim of the service is to enable people to live as independent and fulfilling a life as possible in the community. The service is focused on a number of key objectives: enhancement of physical, social, mental and life skills; the provision of reliable practical, emotional or psychological support to increase people's choice and control over their daily lives; enriching the range of experiences in a service user's daily life through the opportunities and social contact offered; reducing social isolation and supporting carers in their caring role.
- 1.2 Originally the Dementia Day Service was delivered via two separate contracts, and two day centers, Wilshaw House in Ashton-under-Lyne and Rydal House in Hyde. By December 2012 however, in light of the significant budgetary pressures faced by the Council, provision was reduced to one provider operating from Wilshaw House.
- 1.3 The service was nonetheless in-line with national and local dementia strategies and to fit with emerging best practice:
- To provide a specialist day service with a capacity that delivered against actual levels of need, at a single site and for people at the higher end of their assessed need.
 - To expand access to more appropriate community orientated, non-building based activities for people with a new diagnosis of dementia or early onset dementia, i.e. those people at the lower end of assessed need who may find that a specialist, building-based service does not fully address their needs. People with less complex needs would therefore be more likely to find these needs met within the community element of the service, rather than being referred straight into a building-based provision, as has been the case to date.
 - To deliver savings on the current provision costs.
 - To contract with a single provider for the provision of a building-based service for people at the higher end of need and for mainstream community provision suited to service users more able to access and benefit from it.

2. CURRENT SITUATION

- 2.1 The service is comprised of two key components:
- A building-based service based at Wilshaw House, Ashton-under-Lyne, that provides twenty places per day, seven days a week, 52 weeks a year
 - A community-based element that provides eight places per day, seven days per week, 52 weeks a year.
- 2.2 The contract commenced December 2012 for an initial three years and with provision to extend for up to an additional two years.
- 2.3 The current contract price for the financial year 2016/17 is £344,720 for 28 places per day.
- 2.4 The contract price includes transporting service users to and from the day service.
- 2.5 The total number of available places per day is twenty eight equating to 196 available places per week. The number of commissioned places as of July 2016 was 166 which equates to 85% occupancy. The commissioned places Monday to Friday is 92% and is

66% on a Saturday and Sunday. There are seventy service users currently using the service and is utilised on a Saturday and a Sunday by thirty one people, six of whom attend both days.

- 2.6 The service is subject to six monthly performance management meetings which includes a review of performance data and case studies. It is also subject to an annual validation.
- 2.7 The service has maintained a high level of performance to date and this is reported well at the regular performance management meetings. Case studies which reflect the positive outcomes for individuals, levels of compliments, complaints and safeguards and details of staff training, support and supervision are detailed and discussed at the meetings. Where issues or concerns have been raised, Creative Support has dealt with these in a timely and appropriate manner.
- 2.8 A validation carried out in September 2014 to look at information from staff files to ensure the organisation had an effective recruitment and selection procedure and that staff were competent demonstrated findings that were extremely positive with evidence that staff had access to structured learning and development and were recruited according to employment legislation.
- 2.9 The Performance Officer has seen evidence from the carers that both they and the service users who attend the day centre clearly value the staff and the service that they receive. Feedback from the carers is extremely positive regarding service user and carer outcomes and quality of service received, they speak highly of all the staff and have stated that they feel that their lives and their loved one's lives benefit from using the service.
- 2.10 Creative Support have been able to demonstrate that as a result of using this service people with dementia, including where their dementia is quite advanced and/or complex, have been able to remain living at home longer. Carers routinely report that the respite provided by the service for them means that they are better able to continue supporting their family member at home; clearly a good outcome for individual's and their carers as well as keeping people out of more expensive services – nursing care, day hospital or hospital wards included – for longer.
- 2.11 The Performance Officer reports that this is a lively and vibrant day service where service users are actively encouraged to participate in the activities, their opinions are sought and they are encouraged to express their opinions. There are regular service user and carer meetings.
- 2.12 Service users are treated with dignity and respect by staff and they demonstrate that they are committed to the service. The staff team appear enthusiastic and focused on improving the lives of the people who attend the day service.
- 2.13 The service is performing as required under the contract and there are no contractual compliance issues.
- 2.14 The contract commenced 2 December 2012 for a period of three plus two years. Clause 3.2 of the contract allows for an extension for up to two years. Authorisation was given to extend the contract for twelve months to 1 December 2016.
- 2.15 The overall service has developed well with joint working across all parties.
- 2.16 Whilst commissioning intentions beyond this extension are yet to be confirmed, there is a strong body of evidence that daytime support like this provides much needed respite for families and carers, prolonging the time their family member with dementia remains living at home.

3. GROUNDS UPON WHICH AUTHORISATION TO PROCEED SOUGHT

- 3.1 Authorisation under Procurement Standing Order F1.3 where there is provision within the contract to extend for a period of twelve months from 2 December 2016.
- 3.2 There is evidence that although not market tested since the contract was tendered in the summer of 2012, the gross unit cost for this service which is £33.82 per person per day remains consistent with unit costs that have been tendered by similar providers for similar services. For example the list of approved day services which provides day time activities for people with lower level needs than those at Wilshaw House has a gross unit cost of £30.60 per person per day.
- 3.3 This service plays a key role in cost avoidance/cost delay. Use of the service over five days a week costs £170. There is strong evidence that this service provides considerable respite for families and carers and that without it people would require more expensive, alternative care; 28 hours homecare per week would cost £383 (gross), for example, whilst gross residential dementia care costs £545 per week and gross nursing dementia care £710 per week.

4. RECOMMENDATION

- 4.1 As stated on the report cover.