Report to:	**EXECUTIVE CABINET**
Date:	25 October 2023
Executive Member:	Councillor John Taylor - Adult Social Care, Homelessness & Inclusivity
Reporting Officer:	Stephanie Butterworth – Director of Adult Services
Subject:	**CONTRACT FOR THE PROVISION OF AN E-CONTRACT PERFORMANCE SYSTEM**
Report Summary:	The Commissioning and Home for All Team wishes to procure and implement an electronic contracts performance system with the intention that the system is utilised to support the quality assurance and monitoring of the care market. This would initially focus on accommodation and community based services, namely care at home, care homes (residential and nursing), supported living and extra care housing.
Recommendations:	To approve the procurement of the Provider Assessment and Market Management System (PAMMS), as a call off contract, to be procured via the Government Cloud (G-Cloud). G-Cloud is a UK government initiative to ease procurement of cloud services by government departments and promote government-wide adoption of cloud computing.
Corporate Plan:	This would help the Council deliver its priorities:
	• Help people to live independent lifestyles supported by responsible communities.
	• Improve Health and wellbeing of residents
	• Protect the most vulnerable
Policy Implications:	None
Financial Implications: (Authorised by the statutory Section 151 Officer & Chief Finance Officer)	The recommendation in this report seeks approval to procure a e-contract performance system as a direct award for PAMMS provided by The Access Group.
	Budget within Adult Social Care has been identified from the Improved Better Care Fund (iBCF) to fund the system, totalling £0.033m per annum. This is a recurrent grant received from the Department for Levelling Up, Housing and Communities.
	Part year implementation of the system, following procurement, in 2023/24 would result in a cost of £0.003m to the service for each month of operation.
	Although the PAMMS system currently only supports the Adult Social Care sector, as stated in 4.19 of the report below, there may be scope to expand/adapt this to other portfolios in the future, e.g., population health, children's services. This could lead to future years budgetary savings and efficiencies due to economies of scale.
	The Directorate need to ensure that appropriate break clauses are included within any contract arrangement. This will ensure that the commissioned service can either be reduced or withdrawn in the

event of the same impact on related funding. This is to mitigate any adverse financial impact on the Council.

Any uplift in commissioned contract values due to inflation, demand or service configuration will need to be taken into account within the service specification to ensure that it is affordable within the available annual budget allocation for the contract duration.

It is essential that value for money is evaluated as part of the direct award and that this is clearly evidenced and retained for section 151 officer assurance.

In addition an Executive Decision will be required to award the resultant contract. This is in accordance with the value thresholds within the Council's Financial Regulations approved at full Council on 5 October 2021 – section 4 Procurement Decisions – Award Of New Contracts within the section headed 'Financial Delegations' refers. The Council's Financial Regulations are available for reference via the following link.

Financial Regulations (moderngov.co.uk)

Legal Implications: (Authorised by the Borough Solicitor)	Advice has been sought from STaR procurement to ensure that a compliant procurement process has been followed and Best Value delivered.
Risk Management:	Risks will be identified and managed by the appropriate officers.
Access to Information:	The background papers relating to this report can be inspected by contacting

☎ Telephone: 07772 810553

🌐✉ e-mail: tim.wilde@tameside.gov.uk

1. INTRODUCTION

1.1 Over the last 4 years there has been significant 'interest' in the registered care home market across Greater Manchester (including Tameside) as the outcomes from Care Quality Commission inspections had previously identified GM as one of the worst performing area in England. Since then, performance had significantly increased. However, following the pandemic, Tameside's care homes (older people) have reduced from 86% rated Good or Outstanding to 79% (with two providers rated Inadequate). Whilst the situation has recently improved this was following significant input from the council and allied health partners.

1.2 PAMMS (Provider Assessment and Market Management System) has previously been demonstrated to GM Heads of Commissioning, as well as being implemented by Bolton, Salford & Oldham in 2019. Tameside was also considering adopting PAMMS but the impact of the pandemic delayed this, but we are now back in a position to reconsider the implementation.

1.3 Tameside's current contract performance process has been in place since November 2017 and has contributed to the significant improvement in CQC ratings in the borough; however, the system does not support easy reporting as it's manually intensive when gathering/reporting on data.

1.4 The 'People at the Heart of Care – 10-year adult social care strategy' notes that "*In partnership with providers, local authorities and their partners, we will review current data collections and publications, ensuring they have a clear purpose and are proportionate, and fill remaining data gaps to ensure we have robust data flows. For the data that are collected, we want to ensure they are shared more widely so that those in the sector have the data and local intelligence needed to operate effectively and deliver improved outcomes for those receiving care and support. The commitment to implement digital social care records over the next three years (chapter 4) will also benefit providers by enabling the automated collection of necessary data in a secure and transparent way, reducing the administrative burden on providing information and freeing up more time to care*".

1.5 Part on the ongoing review of processes, which includes the recent introduction of an Escalation and Accountability Framework, is to look at information and data flow to support services to improve. The PAMMS will create a digital interface to support this improvement by enhancing the Council's ability to interrogate the data in a timely manner.

1.6 Better use of the data will help to identify potential issues sooner, will hopefully enable preventative action to take place (via the Escalation and Accountability Framework and Multi-Agency Concern process embedded within it), therefore reducing the risk of poor delivery of care & support to vulnerable people.

1.7 The Council will soon be under the regulation of the Care Quality Commission and access to timely information/reports with regards to the current market position (in relation to quality) is necessary to demonstrate the Council has robust systems/procedures in place to support providers, take action (where necessary), with the ultimate aim of ensuring that people receive good quality care and support.

1.8 Implementation of the PAMMS will assist with the information sharing with other local authorities (and vice versa), i.e. it will allow the Council to be able to quickly see the outcome of a host authority contracts visit (for those Councils that also use PAMMS) and for all interested parties to work in partnership to support the provider to improve their services. This will also help with managing the market on a wider footprint.

2.   CURRENT POSITION

2.1   The Commissioning & Home for All Team currently uses a contracts performance process which uses electronic tools, but cannot be used to easily produce reports, i.e., the reporting tools are completed (typed in), but to identify any issues the 'compliance' level data needs to be transferred to a separate spreadsheet for any reports to be run. This is both time consuming and can be prone to errors as data is manually transferred. Any necessary service improvement actions from each visit also needs to be identified separately and some may be overlooked when service development improvements plans are being developed.

2.2   Contracts Performance visits to nursing homes are undertaken jointly with colleagues form the Individualised Commissioning Team on GM ICB (Tameside).

2.3   Information/outcomes from contracts visits to all care home, support at home and supported living providers, along with a range of other information, is aggregated and reviewed by various operational quality groups, as well as by a strategic quality group. All these groups are operated in conjunction with the GM ICB (Tameside), and again, the aggregation of data to inform the various groups is time consuming and prone to human error.

2.4   The existing process does not allow the provider to challenge the outcome of the performance visit and, as a result of this potential lack of transparency/approval from the provider, the outcome of the visit is not shared publicly.

2.5   There is currently a lack of consensus across Greater Manchester as to a preferred quality assurance and market management tool, albeit three GM Councils have adopted the PAMMS system (Bolton, Oldham and Salford).

2.6   Rochdale and Wigan have implemented Sundown, and another three areas use this system as a bed tracking tool (vacancy monitoring).

2.7   Trafford are planning to implement In-tend, but this is primarily aimed at collecting KPI data, rather than a full contracts performance system (which includes quality assurance).

2.8   Lancashire (along with Blackpool Council, Blackburn with Darwen and the respective ICB) have recently tendered for an eContracts Management system. They received three tenders – The Access Group (PAMMS), Adam & from an organisation that would effectively undertake the contracts performance process and provide reports. Adam pulled out of the tender process as this system was purchased by The Access Group. Following an evaluation PAMMS was deemed to be the most appropriate and is being implemented.

3.   DEMONSTRATIONS

3.1   Given the view of best practice within the 'People at the Heart of Care' i.e., to work collaboratively across a region, a group of people viewed both the PAMMS and Sundown systems.

3.2   This group consisted of a number of people involved in overseeing contracts performance within the Commissioning and Homes for All Team i.e., Trevor Tench, Tim Wilde, Siobhan Gough, Ruth Stevens, Jane Seel, Catherine Worsnip, Jennie Pimlott and Juliet Edwards, as well as others from the NHS GMICB i.e., Jayne Wilkinson, Jane Bennett and Anna Livingstone.

3.3   After both the presentations the following feedback was received:
   3.3.1   PAMMS was good, easy to use and seemed very 'slick', liked the potential to share outcomes online, has additional functionality should we need it (market position statement, demand model, risk profiler)

3.3.2   Sundown seemed to do similar things, but needed further work to give us what we wanted e.g., reporting; it seemed more basic; didn't appear as easy to use as PAMMS

3.4   Overwhelmingly, those who viewed both products preferred the PAMMS.

4.   PROPOSAL

4.1   Tameside needs to move to an eContracts Quality Assurance/Performance process to ensure that accurate reports can be easily run, as well as to help manage risk within the sector.

4.2   Information from STAR Procurement noted that, if a suitable system is on G-Cloud, the Council could either do a min call-off from that list or, if there is only one product that matches our requirements, undertake a direct award.

4.3   There were two systems in the G-Cloud that seemed to focus on the social care market (Adam & PAMMS), both of which are now owned by The Access Group, and Adam has been absorbed by PAMMS. Please note that Sundown is not on the G-Cloud. Therefore, we are proposing a direct award to The Access Group (who own and operate PAMMS).

4.4   The suite of modules on offer, via PAMMS, includes:

Quality Assurance - assessment and corrective action planning tool to support collaborative working with Providers to increase quality.
- Provider Returns - digitising providers' self-assessment as well as other regular or emergency returns, to support contract management. This will reduce the administrative burden on providers as they will only need to review information for subsequent returns.
- Social Care Landscape - Delivers actionable intelligence to monitor risk and support contract management through market insight packs including population & demand, spend & activity, capacity & availability and quality & risk.
- Market Position Statement - use your social care data to construct interactive and automatically updated Market Position Statements.
- Demand Model - a market management tool that helps Local Authorities closely monitor their activity levels and makes highly accurate predictions about future demand / budget requirements.
- Risk Profiler - bring together intelligence sources to evidence quality and financial risks amongst care Providers to support commissioning decisions and target help where needed.

4.5   The Council would need to work with the NHS GMICB (Tameside) and the providers to determine whether the outcome of contracts visit is published, in line with other Council that have adopted the system e.g., East ADASS (PAMMS Provider Portal).

4.6   The initial proposal is to purchase the Quality Assurance & Provider return modules (similar to Bolton, Salford & Oldham). The MQIS (Market Quality & Insight System) developed in the NW will provide additional information re: the social care landscape and risk profiler.

4.7   The purchase of the two modules will also keep the costs lower and allow for an evaluation of the system to determine if other modules may be beneficial.

4.8   The cost associated with the system is noted in the financial section (these costs will be fixed for a two-year contract).

4.9   The annual cost of the system is noted below. To ensure the best use of the system it is recommended that the Quality Assurance and Provider return modules are purchased

together:

Pricing Options	Cost Per Month	Annual Cost	Notes
Quality Assurance (10 Licenses)	£2,306	£27,667	Includes implementation, support and hosting
Provider Returns	£1,756	£21,067	Includes implementation, support and hosting
Combined Price (QA 10 Licences +PR)	**£2,734**	**£32,814**	**Includes implementation, support and hosting**

4.10 Additional QA licences can be purchased at £75 per licence per month.

4.11 Initially, it is anticipated the Council would need to purchase 10 licences.

4.12 At present the system is focussed on Adults Social Care - mainly care homes and domiciliary care providers. However, there may be scope to expand/adapt this to other portfolios in the future, e.g., population health, children's services.

5. **ALTERNATIVE OPTIONS**

5.1 **Alternative Option 1**: Not to implement eContracts Performance and continue with the current process.

5.2 Pros:
   5.2.1 No additional expenditure required
   5.2.2 No loss of direct control of how the contracts performance process operates

5.3 Cons:
   5.3.1 Current risk profiling and contracts compliance processes are time/resource intensive and may be prone to errors
   5.3.2 Reports cannot be easily generated
   5.3.3 No information sharing with other authorities that use PAMMS (currently three other GM Councils, Yorkshire & Humber, East ADASS region and six Councils in Liverpool City region)
   5.3.4 Lack of transparency with publishing reports

5.4 Not to have a Market Management System and continue with the current process. This would mean that capacity within the Commissioning and Homes for All Team would not be targeted based on appropriate information, it would therefore not be as effective in the use of resources. This could potentially result in less effective responses to safeguarding concerns and less effective quality and performance management.

5.5 **Alternative Option 2**: To go out to market via a procurement process. The potential risks to this approach are as follows:

5.6 The highest scoring tender may not provide the full capabilities available via PAMMS, as tested effectively in the East of England.

5.7 Based on the recent tender by Lancashire – there are no other providers who offer the same capability as the PAMMS system, so tendering would not yield any results.

6. IT IMPLICATIONS

6.1 Discussion have taken place with the Council's IT Department and the initial view is that because the system is hosted by the provider on their servers, there does not appear to be any IT implications/requirements if the Council purchases the system.

6.2 However, if a direct award is approved, a meeting will be arranged with the System Management Team to ensure there are no implications.

6.3 In the interim, a Cyber Security Questionnaire has been shared with the provider for completion and, if a direct award is approved, a DPIA (Data Protection Impact Assessmernt) will also be completed/agreed (please note no personal information will be stored on the system).

6.4 Any contract will be subject to the satisfactory completion/assessment of the Cyber Security questionnaire.

7. CONCLUSION

7.1 The implementation of PAMMS will have several benefits to the Commissioning and Homes for All Team e.g.:

    7.1.1 To aid the implementation of the White Paper's recommendation i.e., "… *review data collections and publications, ensuring they have a clear purpose and are proportionate, and fill remaining data gaps to ensure we have robust data flows*…", the implementation of PAMMS.

    7.1.2 To provide information on the outcomes of visits in a more timely, less resource intensive manner.

    7.1.3 Reduce potential inaccuracies in copying data to provide reports.

    7.1.4 Assist to provide appropriate evidence to the Care Quality Commission that the Council has robust systems/procedures in place to ensure providers are delivering the appropriate care and support to the people who need the service. This also provides evidence that the Council's is supporting its Care Act Duty to "*facilitate a vibrant, diverse and sustainable market for high quality care and support*".

    7.1.5 Allow for the sharing of information between Commissioners, some of whom may be funding people in care homes in Tameside.

    7.1.6 Allow for publishing the outcomes of the Council's contracts performance process, which can be viewed alongside the CQC ratings, to give prospective residents a better understanding of the service.

8. RECOMMENDATIONS

8.1 As set out at the front of the report.