

OVERVIEW REPORT FOR FIRST AND SECOND MARKET ENGAGEMENT EVENTS

The initial event was held between 10.00am – 12.00 pm on Tuesday 20th August at the Palmer Centre in Chepstow. An invitation was extended to all potential providers of domiciliary care in Wales registered as having an interest on the Sell2wales site.

Existing providers of domiciliary care in Monmouthshire have been kept informed as the process has progressed and be made aware that all information and engagement regarding the proposed tender will be managed via Sell2Wales, in line with procurement rules and process.

15 people attended the event, representing 9 different domiciliary care organisations. 8 of the organisations currently provide domiciliary care to MCC but not all in the South area.

The purpose of the event was to:

- To share the Council's Strategy for Commissioning Domiciliary Care
- To outline our plans for the next implementation phase
- To seek your views on our proposals
- To share next steps and timetable
- To highlight sources of support for providers

Two breakout sessions formed part of the event with the aim of:

Session 1: Gathering providers thoughts on the design principles and our intentions/plans.

Sessions 2: Gathering providers views on the proposed lots and zones

In each session attendees were asked to capture their thoughts using post it notes on the proposals as follows:

- What they think will work well
- How can it be improved
- Any questions/areas of clarification

The actual feedback provided is captured overleaf and where applicable has been grouped into themes.

Break Out Session 1: Design Principles and Implementation Proposal

1. What they think will work well

Improvements for the workforce:

- Could be better for care workers- less travel
- Better for carers as runs/shifts can be put together
- Staff won't jump from provider to provider

Improved Sustainability for Providers:

- Stability for the companies who win the contracts – forward planning
- Good for the companies who win the contracts.
- Blocks- sustainability

Improved Sustainability for the Council

- Cost savings for the Council
- Stability for the Council
- Helps with capacity as long as provider feedback is listened to

Positives of the block contract arrangements:

- Gives more autonomy as providers
- Electronic call monitoring
- Block hours/contract
- Length of contract
- Weekly allocation of hours
- Advanced payment

Benefits for people receiving the service:

- The package of care might be dictated by service user
- Roll over to assist with other support needs
- Re-ablement element
- Good for Continuity
- Outcomes focused

2. How can it be improved

Negative Impact on Provider Sustainability:

- Biased towards the larger companies
- Could put locally based companies out of business
- Agencies not being able to fulfil the hours contracted for

Implications from a regulatory perspective:

- CIW expectations look at time and are not interested in outcomes
- Social care plans will have to be worded differently i.e. 14 hrs a week to undertake X tasks /provide X support

Negative Impact on People receiving the service:

- Lack of choice for service users
- Transfer of care packages some are long standing care packages

Negative Impact on Workforce:

- Carers will get taxed on 45p or more, 44p or less is not taxable

Operational Challenges:

- Variable hours for clients mean difficult rostering for staff who want stable hours
- Rural teams of care workers focussed on local geography rather than lumping into block contract differential price
- Maybe have a rural and town rate.
- Risk: block contracts where rural fluctuates, this can make costs increase and not sustainable

3. Any questions/areas of clarification:

The Tender:

- Is there less of a chance of being successful if we only bid for 1 area?
- How many providers per lot?
- How big are the lots?
- Quality / price breakdown?
- How many lots can we bid on and be awarded?
- How many providers per lot?
- How many care providers for block contract?
- What tender sites will the documents be on?
- Tupe?
- Will the cheapest bidder win?
- Support for tender writing?

The Contract:

- How long paid for if in hospital stays/respite? e.g. allow time for carers to go home and collect PJs etc for person in hospital?
- Paid run by minute or commissioned time
- Can we roll hours over from week to week to benefit the person – how will that work ECM?
- Is there a limit on how many hours can be rolled over from one week to another?
- What happens with hospital admissions with block hours? (guaranteed)?
- Is there a tolerance % of fulfilled time?
- How can we activate overstay payments e.g Mrs Smith has a bad fall and needs extra care?

Outcomes Focus:

- What's the parameter of outcomes?
- Would we be able to have active discussion based on outcomes with the LA? tripartite reviews, quarterly with care manager, care provider and individual?
- Would the care agency have discretion to decrease – reablement approach?

People receiving the service:

- Has there been consultation with service users?

Break Out Session 2: The Lots and Zones

1. *How can it be improved*

- Rurality of lot 1 is going to be expensive to cover especially with proposed travelling expenses
- The Usk Road above Mynnydd Bach is a better boundary for lot 3
- Have a rural rate for zone C (in lot 1)
- 2 lots and not 3
- Number of hours are not viable for new providers
- The rurality of lot 1 would be difficult to cover

2. *Any questions/areas of clarification:*

- Mico carers- how many are there in these areas?
- Can providers who have won a lot be a spot provider in another area?
- Risk is the % of rural verses urban changes after tender award
- Risk - Tupe not all staff will choose to transfer (previous experience varied between providers 1 saying only 30% and others saying 80%).

Conclusions and next steps from Market Engagement Event 1

The market engagement event provided an invaluable opportunity to test out the proposals for the block contracts in the South with prospective and existing providers of domiciliary care. Their comments and feedback have been considered and used to inform the ongoing development of the proposals. As a result of the feedback the following consideration and actions have been taken:

1) The Lots and Zones:

The geography of the lots and zones has been reviewed and revised to take on board the observations from providers. Specifically, the boundary of Lots 1 and 3 has been redrawn to reflect the suggestion of making it coterminous with the Usk Road.

The number of Zones in each Lot area has been reduced following the boundary revision.

Consideration and exploration was given to reducing to 2 lots however this option does not appear viable. Splitting the south of county into 2 lots will increase massively the size of the rural area in lot one and lot 2 would be much smaller area in comparison.

Further consideration has been given to the rates for the lots with two options being explored: (a) single blended rate for each lot, including both the urban and rural zones or (b) a separate urban zone rate and rural zone rate for each lot. Following discussion with Head of Service (10.9.24) the proposal has been revised to include a separate blended urban and a separate blended rural rate for lots 1 and 3. This option is the most advantageous to both the Council and providers because:

- Clearer costing matrices that reflect specifics of urban rural landscape (e.g. will be able to understand premiums applied for rural).
- Enables scaling up and scaling down of each type of rate which will ensure ongoing viability to providers and cost effectiveness for MCC.
- More responsive to variation in rural/urban delivery hours and therefore reduces risks to both council and the provider.

2) The Service specification and contract:

The draft service specification and T&Cs will be revised to ensure there is clarity regarding the matters raised by providers including: service delivery tolerances, people in hospital, flexible use of weekly hours to support people.

3) Frequently asked questions:

A FAQ sheet has been developed based on the questions raised at the event. The FAQ sheet has been uploaded on the Sell2wales site so all registered providers have access to it.

2nd Market Engagement Event

A 2nd online market engagement event was held on 11th September to share how the comments from the 1st event have been taken onboard, the revision to the lot boundaries and the procurement timetable. The primary aim was to share the updated proposal it was not a opportunity to provide further comments.

The online event was well attended with 22 people from 10 organisations taking part. All of these providers currently operate in Monmouthshire, though not all in South. Attendees were given the opportunity to ask questions at the end of the presentation of the revised proposal. A modest number of questions were raised mainly seeking clarification regarding:

- Will be there any transfer of council staff as part of the new contract?
- Do the zones in each lot differentiate between rural and urban areas?
- Are consortium bids welcome?
- When is the deadline for the provision of TUPE information from existing providers?
- Will the existing TUPE information form part of the tender pack?
- Will there be spot purchasing arrangements as well as a block contract?

Providers have been given a further 7 days to email any questions. The FAQ document on the Sell2Wales site will then be updated accordingly.