

APPENDIX 1

BIRMINGHAM CITY COUNCIL

COMMISSIONING STRATEGY FOR REGULATED ADULT SOCIAL CARE

SUPPORTED LIVING AND CARE HOMES (WITH AND WITHOUT NURSING) AND HOME SUPPORT – SENSORY LOSS

REGULATED ADULT SOCIAL CARE COMMISSIONING - DECEMBER 2022

CONTENTS

- 1. INTRODUCTION**
- 2. OUR VISION AND STRATEGIC AIMS**
- 3. DRIVERS FOR CHANGE**
- 4. COMMISSIONING INTENTIONS**
- 5. HOW THE STRATEGY WILL BE IMPLEMENTED**
- 6. PERFORMANCE FRAMEWORK**

1. INTRODUCTION

“BIRMINGHAM - A CITY OF GROWTH WHERE EVERY CHILD, CITIZEN AND PLACE MATTERS.”

Birmingham City Council has a clear vision for Birmingham, which is to create ‘a city of growth where every child, citizen and place matters’. This vision, along with the Council’s strategic outcomes and priorities, is described in its latest Council Plan 2018 – 2022 (published in June 2018) and are:

- Birmingham is an entrepreneurial city to learn, work and invest in
- Birmingham is an aspirational city to grow up in
- Birmingham is a great city to live
- Birmingham is a fulfilling city to age well in
- Birmingham residents gain the maximum benefit from hosting the Commonwealth Games
- Birmingham is a city that takes a leading role in tackling climate change

The Council has set out a challenging agenda to support citizens to live more active, longer, healthier and independent lives and to reduce social isolation so that people can make positive choices and take control of their wellbeing.

The aim of adult social care in delivering the Council’s vision and the wider context is to protect and empower the most vulnerable citizens. This means supporting vulnerable people to maximise their independence, health and wellbeing, whilst ensuring that publicly funded care and support provides value for money for Birmingham citizens and is provided only when it is really needed.

The Council’s vision has been translated into the Vision and Strategy for Adult Social Care which addresses potential barriers and obstacles to delivering the above outcomes. It also provides a framework for the actions required to modernise adult social care services in Birmingham and to guide decisions regarding how resources are used. The Vision and Strategy¹ comprises eight key elements:

1. **Information, advice and guidance** - People need access to high quality information, advice and guidance. The range of services that people can access directly will be increased and it will be easier for carers to have their needs assessed.
2. **Personalised support** - Social work and care management services will be re-organised. They will move from assessing people for services to assessing them for the outcomes they want and the assets they have to achieve them.

¹ Birmingham City Council – Vision and Strategy for Adult Social Care October 2017

3. **Community assets** - Resources need to be made available for local groups to provide the wide range of support that enables people to remain in the community.
4. **Prevention and early intervention** - People need to be able to access prevention and early intervention services quickly and at any time in their lives to help maximise their independence.
5. **Partnership working** - Services need to be integrated and built on partnership working using multi-disciplinary teams and, where feasible, single points of access. The Council and its partners need to work as a whole system and to embrace locality working.
6. **Making safeguarding personal** - We must 'make safeguarding personal' and understand what outcomes people want from safeguarding enquiries and actions. Safeguarding must be seen as everybody's business and kept in the public eye.
7. **Co-production** - All services should be co-produced with users and carers. Ongoing engagement needs to be at the heart of commissioning and service delivery.
8. **Social Justice** - Services should seek to improve social justice by tackling the reasons for discrimination and creating opportunities for all citizens. .

It is this more detailed vision that forms the platform of this commissioning strategy for regulated adult social care services. The commissioning strategy focusses on services for those citizens who will need; care at home; residential care; nursing care; or ask for the Council's support in planning and arranging their care. The following commissioned services are included within this strategy at this time (collectively described as "commissioned adult social care services" hereafter):

- Home support – for people with sensory loss
- Care Homes (without nursing) – for adults of all ages
- Care Homes (with nursing) – for adults of all ages
- Supported Living – for adults of all ages

This commissioning strategy recognises that relationships between health, social care and wider community services are integral to the health and well-being of local communities and builds upon the previous commissioning strategy for these services (2017). Birmingham City Council is mindful of its role as a significant commissioner of these services and also the underlying price pressures in the social care sector - along with rising demand for services - which it must provide for through its social care budget. A key requirement in meeting these financial challenges is to work more collaboratively with our partners and increase joint commissioning across health, social care, and housing with support.

The commissioning strategy also makes clear the role that adult social care plays in the economy both locally and nationally and the need to reframe the sector as not just a significant cost, but a major economic sector in its own right².

² New Economics Foundation – Social Care as a Local Economic Solution for the West Midlands August 2017.

This strategy outlines our approach to the commissioning of regulated adult social care and provides a framework for the future commissioning of services that will support us to achieve our key aims to: improve outcomes; improve quality; and improve resilience and sustainability of the wider health and social care system.

2. OUR VISION AND STRATEGIC AIMS

The vision for regulated adult social care services in Birmingham recognises the role the Council can play across the health and social care system, in ensuring we make fundamental changes to; promote well-being; increase independence within limited resources; and to help people to achieve the outcomes that matter to them in their life.

Most adults and older people can enjoy access to mainstream services independently or with help and support from their families, friends and social groups. However, for some citizens this is only possible with support from Adult Social Care services and from other public sector agencies such as health services.

The challenges facing the Council to achieve this have never been greater. While it is a great achievement for society that there are more people living longer with more complex needs, inevitably this puts pressure on resources. While Birmingham is one of the youngest cities in Europe, the older population is growing rapidly. However there are an estimated 14,000 adults living with dementia, with a further 3,000 people expected to be diagnosed over the coming 20 years. Further, there are nearly 24,000 people living with a learning disability and an increasing number of adults who have disabilities or are living with mental illness. The resources previously available to the Council have been significantly reduced, making the use of available resources more important than ever. The public have higher expectations of the public sector, and rightly so, the standards of care they expect are rising. It is increasingly recognised that people want support to enable them to exercise independence, choice and control.

Consequently, the Council has changed and adapted to these new circumstances, which means that the type of services arranged and provided and the way they are organised and delivered has to change. Our vision for commissioned services in Birmingham is therefore:

TO HAVE A VIBRANT, DIVERSE AND SUSTAINABLE LOCAL HEALTH AND SOCIAL CARE MARKET, WHICH SUPPORTS THE ACHIEVEMENT OF BETTER OUTCOMES, INCREASED INDEPENDENCE AND CHOICE AND CONTROL FOR ADULTS.

This vision for commissioned adult social care services is underpinned by three clear aims to:

1. Improve outcomes for those with health, care and support needs
2. Improve the quality of commissioned health and care services
3. Improve the resilience and sustainability of our health and social care system

This recognises that if people are to live better lives and achieve better outcomes then we need to help people, their families and the community to have greater choice and control about the care that they receive, to promote independence and to ensure that all adults have access to the support that they require to live safely and independently.

To deliver this vision a whole systems approach is required which recognises that much of the need for care and support is met by people's own efforts including their families, friends or other carers,

and by community networks. Services commissioned by the Council and NHS need to support and complement these individual and personal care and support resources.

3. DRIVERS FOR CHANGE

NATIONAL DRIVERS FOR CHANGE

Adult social care operates within a complex statutory framework, with significant legislative reform on the horizon. The legislative and regulatory requirements underpin the approach to commissioning as well as the way in which these vital services are delivered. It is important that commissioners, providers and regulators work together to ensure the delivery of a range of services that meet citizens' needs, provide choice and are of good quality.

The key statutory driver for the work of adult social care is currently the Care Act 2014. The Care Act places clear duties on providing care and support to meet the assessed eligible needs of individuals and ensuring that wellbeing is promoted when carrying out any of the Council's care and support functions. The Care Act also sets out a range of commissioning and market shaping duties for Local Authority commissioner to ensure a range of quality and type of services are available to meet needs.

The "Build Back Better: Our Plan for Health and Social Care" published by Government in September 2021 sets out significant reform for the health and social care sector. The plan aims to address the catastrophic impact of the Covid-19 Pandemic on the NHS and social care sector, focussing on addressing extensive hospital backlogs, but also reforming the adult social care system in England in order to meet the increasingly complex needs of an ageing population, as well as those of younger adults who need support.

Part of the Build Back Better policy change is the Government White Paper "Joining up care for people, places and populations" published in February 2022. This sets out a challenging agenda for the NHS and Local Government to further integrate through the planning, commissioning and delivery of co-ordinated, joined up and seamless services to support people to live healthy, independent and dignified lives and which improves outcomes for the population as a whole. The goal being that "everyone should receive the right care, in the right place, at the right time."

The regulatory framework for commissioned adult social care services³ sets out an approach to how the Care Quality Commission powers can and will be used to; protect people who use regulated services from harm; to ensure they receive health and social care services of an appropriate standard; and to hold providers and individuals to account for failures in how services are provided.

These key pieces of legislation taken together are powerful vehicles to help drive change in services and to ensure the provision of high-quality services to meet the needs of individuals.

It is therefore critical that the Council, the NHS and providers shape and deliver the services that are needed by citizens to meet these requirements. This commissioning strategy sets out a number of

³ As contained within the Health and Social Care Act 2008, the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 and the Care Quality Commission (Registration) Regulations 2009.

ways in which this agenda will be further embedded across commissioned adult social care services in Birmingham.

LOCAL DRIVERS

In 2012 the Council moved away from traditional block contracting, spot purchasing and large-scale internal provision of some commissioned adult social care services, to an open market approach with dynamic pricing. This approach delivered a number of benefits for the City Council and for citizens. Whilst the overall approach had allowed the Council to move away from more traditional delivery and contracting arrangements and provide some structure to the market to allow it to develop, it did not address all of the drivers for change and the needs of the market.

In 2017 the Council adopted a Commissioning Strategy for Adult Social Care which set out a range of ambitious changes to improve the quality and resilience of the sector. This Strategy has seen significant improvements including:

- working with over 25 Inadequate providers since May 2018 to either improve performance or safely decommissioned services
- investing over £40m in the sector through annual fee increases, with initial fee increase for 75% of home support/supported living packages of care and 85% of care homes packages of care
- establishing a pricing structure and processes for younger adults' placements, with robust social work input and commissioner challenge
- improving relationships with providers through named Commissioners, locality working, provider forums and engagement on a range of topics.
- Implementing a clear quality framework where provider quality is regularly assessed, and packages of care are allocated based on the quality rating of the provider
- improving performance so that 75% of citizens are now receiving either Gold or Silver rated care, compared with around 50% in 2013.
- increase in citizen satisfaction and use of citizen feedback in our commissioning processes
- implementing a new IT solution to support commissioning and contracting arrangements
- requiring all Birmingham contracted care providers to pay the Birmingham Care Wage for under 25's – encouraging young people to enter the care sector in Birmingham.

However, there were and remain a number of wider local challenges we must continue to address by whatever means available. The most significant of which are the adult social care workforce pressures, which remain a significant risk to the sector and therefore a local priority to support where we can. The care workforce are some of the lowest paid in our economy with some 6,800 social care leavers per year and an estimated 1,300 vacant jobs at any time. The Covid-19 Pandemic, Brexit and the current cost of living crisis are all exacerbating the existing pressures. Whilst this commissioning strategy alone cannot address all of these issues, it is an opportunity for the Council

to reaffirm its ongoing commitment to work with the sector to address these issues - where they are in our collective ability to do so.

Given the national and local drivers for change and the positive impact of the previous commissioning strategy, the future commissioning arrangements for the sector will remain largely unchanged.

LOCAL NEEDS

The Council has published a number of Market Position Statements which identify current capacity and predicted demand. These are available on the Council's website by following the link below:

https://www.birmingham.gov.uk/info/20066/for_care_professionals/131/birminghams_market_position_statements

The Council's Draft Market Sustainability Plan also sets out key aspects of the regulated adult social care market in Birmingham and how the Council intends to work with the sector to develop the market.

The proposals contained within this strategy and the detailed documents that will result from this, have all been designed to ensure that individual assessed eligible care and support needs can be met in high quality services and that citizens are given choice and control over their care.

4. COMMISSIONING INTENTIONS

We need to transform the sector but are under no illusions about the scale of change this will involve and the need to take citizens, providers, partners and professionals on that journey with us. We will continue to support the local economy and the care sector and have set out below how this will be implemented and supported to deliver our vision.

COMMISSIONING PRINCIPLES

Whilst the commissioning approach adopted in 2017 has created many positive changes, there is still a great deal of work to do to reshape services to meet current and future demands and to address national and local drivers.

The 'preparation for integration' phase of this strategy from 3 April 2023 to 2 April 2028 has been designed to take that next step on the transformation journey and will be focussed on:

- **Integration** – preparing the sector and commissioners across the Integrated Care System for a move towards joint and/or delegated commissioning arrangements, including implementation of a revised Integrated Quality Assurance Framework and a move towards joint commissioning and contracts.
- **Investment and stability** – investing existing resources into the care sector in a more structured way, including with our NHS and other partners, to provide stability of care, but also recognising the role of the social care and health economy in the region and to allow all parties to plan their businesses.
- **Commissioner-led support** – a package of support from commissioners and partners across the system that promotes quality improvement. Including ways in which social value will be delivered by the care sector and other partners.
- **Incentivising quality** – implementing an Integrated Quality Assurance Framework that recognises the best care provision and informs choice.
- **Market shaping** – developing mechanisms and specifications that support reduced reliance on the Council and support ongoing development and sustainability of the market.
- **Efficiency and modernisation** – developing integrated systems and processes that are efficient and fit for the future.
- **Robust contract management** – clear specifications focussed on enabling, independence, choice and control and that make clear the requirements, with robust and consistent management against these.
- **Employment and skills** – having a health and social care system that acts as an economic driver for change at a local community level; ensuring the sector is an attractive prospect for those entering the job market; and that those within the sector are supported and trained to remain and develop their skills.
- **Reduced reliance on commissioned adult social care services** – the Council will do further work to; develop alternatives to more traditional models of care commissioning and delivery which will incentivise providers to enhance the independence of citizens; and support the development and understanding of community-based services.

- **Partnership with providers** – having transformed the Council’s relationship with the market by being open and transparent, the Council will have a range of high- quality providers who want to work with the Council to deliver services in the future, are clear about what is required and are able to work with the Council/NHS to influence the future direction.

THE ROLE OF OTHER PARTNERS

The Council is clear that it plays a significant role in the commissioning of services that make up the health and social care system across Birmingham and beyond. However, we also recognise the crucial role of families, carers, communities, third sector organisations and partners such as the NHS and Birmingham Children’s Trust. Together, they provide advice, guidance, support and care to a whole range of citizens that the Council may not have visibility of. It is therefore crucial that the Council works with these partners to improve the quality of commissioned adult social care services.

CURRENT RESOURCES

The financial sustainability of the social care system is a nationally recognised and widely reported issue, for which there has been much lobbying from the local government sector. The Government has set out a range of reforms, albeit the funding has yet to be confirmed for all aspects of change.

The Council continues to face financial challenges and has set out a Financial Plan confirms that sets out the expenditure, income and savings the Council expects to face for 2022 and beyond. Based on current spend and expected increases in demand it is estimated that £357m will be spent on adult social care by Birmingham City Council in 2022/2023, which comprises 47% of the Council’s overall net budget.

A further £4.3m of savings are required in 2022/23, with a further £7m in 2023/24. Many of these savings plans are very challenging and there are limited opportunities for alternative plans, however the Council continues to monitor and manage spend rigorously and identify further contingency plans.

It is estimated that £207m will be spent through the proposed contracts which are the subject of this strategy, funded from the Adult Social Care budgets.

5. HOW THE STRATEGY WILL BE IMPLEMENTED

The following section describes how the commissioning strategy will be implemented to support delivery of high-quality services, the achievement of better outcomes, increased independence and choice and a more resilient and sustainable health and social care system over the next five years.

ENTRY CRITERIA INTO THE COUNCIL'S CONTRACT 2023 +

The Council will operate a flexible contracting arrangement or framework agreement for the majority of commissioned adult social care services, however these arrangements will be adapted to reflect current supply and demand. This will mean the following:

- **Home support Sensory Loss** – once the initial procurement has taken place, no new providers will be allowed to join this lot under the contract. This means the Council will contract with a fixed group of providers. This service will be a specialist city-wide home support service to citizens with sensory loss including Congenital Sight and Hearing Loss, Usher Syndrome and Acquired Sight and Hearing Loss. We will be seeking providers with the necessary skills and experience of delivering services to meet the needs of those with sensory loss.
- **Supported living** (personal care elements only) – this will be operated as an open flexible contracting arrangement on a city-wide basis, whereby the Council will allow new providers to join the contract at any time, subject to the relevant entry criteria being met.
- **Care Homes (with and without Nursing)** – this will be operated as an open flexible contracting arrangement, whereby the Council will allow new providers to join the contract at any time, subject to the relevant entry criteria being met.

To drive up quality, the Council will not allow a provider who is currently rated by the Care Quality Commission (CQC), the Council or the NHS as Inadequate or equivalent to enter the new flexible contracting arrangement.

To ensure that Commissioning and quality arrangements support and are aligned to the need to offer citizens a choice (particularly in relation to accommodation), partners will work to ensure that chosen regulated provision can be incorporated into our contracting and quality arrangements. It is important this process is clear to all parties and that appropriate quality assurances can be obtained promptly, particularly where it is needed to support hospital discharge.

The contracting and procurement arrangements will be set out in the relevant Procurement Strategy, associated contracts and the Integrated Quality Assurance Framework. However, where these criteria and processes have been fulfilled, but a provider does not currently have either a CQC rating (albeit they must be CQC registered) or quality rating, the Council and/or NHS will conduct a baseline quality assessment in accordance with the Integrated Quality Assurance Framework. To protect citizens and providers, restrictions on admissions may be aligned to the overall quality rating. This will be designed to reduce the volume or complexity of citizens supported by new or lower rated providers and to allow time for improvement.

All providers seeking to join the contract will therefore have to have at least one of the following, the most recent of which will be considered for entry:

- a CQC rating of Requires Improvement, Good or Outstanding;
- a Birmingham City Council quality rating of Gold, Silver or Bronze (as detailed in the Integrated Quality Framework below); or
- an NHS score of Amber, Green or Bright Green – currently only applicable to nursing homes.

Providers will be awarded contracts based on the combination of their Company Name, CQC Provider organisation and CQC location and each registered location will be assessed separately.

Beyond this, a more detailed set of entry criteria will maximise the quality of providers that can enter the flexible contracting arrangement and to reduce potential risks to all parties, this will include (but not be limited to) provision of the following – all of which will be set out in the relevant Procurement Strategy and associated Invitation to Tender and Contracts:

- Valid CQC registration certificate
- Bank account details and copies of financial accounts
- Employers Liability and Public Liability insurance certificates with cover up to £10m
- Company registration details
- Details of any bankruptcy or convictions of owners/responsible persons
- Data protection and modern slavery compliance
- Confirmation of Food Hygiene Rating for care homes (with and without nursing) of 4 and above
- Copies of a range of policies to include (but not limited to) Safeguarding Policy, Health and Safety Policy, Recruitment and Selection Policy, Business Continuity policy, Equal Opportunities Policy, Environmental/Sustainability Policy, Care Planning and Risk Assessment Policies.
- The same requirements must be met by Care Homes (with and without nursing) and Supported Living care providers should they wish to join the flexible contracting arrangement at a later date. The only exception being those placements that are outside of the Birmingham City Council boundary, where full compliance will not be required with:the Birmingham Care Wage
- the Birmingham Business Charter for Social Responsibility

TRANSITION ARRANGEMENTS

The Council is keen to stabilise the care being received by our citizens and the Council believe this is a collective responsibility which we should all take whilst we continue to transform the market and quality of services across Birmingham in a more structured way. We are keen to work with providers who share this ethos and are comfortable to work with us.

As part of the Council's Vision and Strategy for Adult Social Care, there will continue to be an emphasis on reviewing the eligible care and support needs of service users funded by the Council. The principles of this approach are to ensure:

- Care is closer to home and supports maintaining of family and community links.
- People are supported in their own home and supported to return home wherever possible.
- Care settings are the least restrictive and designed to support recovery, independence and progress.
- Resources are maximised through meeting needs in the most effective way and spending public money wisely.
- Systems and processes that enable joint working, assessment and review, as well as consideration of most appropriate funding.

The Council must demonstrate value for money and the transition arrangement are designed to ensure that there is a link between the price the Council pays for care and the needs of the service user, that services promote independence and choice and that the Council commissions the best quality services possible.

The terms of the new contract will therefore apply:

- **For home support – sensory loss (adults), care homes (with and without nursing) for over 65's and for supported living (adults)** - to all packages of care commissioned both on and after 3 April 2023 under the 2023 contracts (or at the date of contract award if made after this date), including the proposed relevant fixed fee. For successful applicants, the new contract will replace all previous contractual arrangements for existing packages in these categories that are in place on 3 April 2023 (or at the date of contract award if made after this date) and will also apply to all new care packages in these categories during the contract term.
- **For care homes (with and without nursing) for under 65's** - to all packages of care commissioned both on and after 3 April 2023 under the 2023 contracts (or at the date of contract award if made after this date), will be at the Guide Price or that determined following the Open Book process. For any packages of care commissioned by the Council prior to the provider being awarded a 2023 contract, these will be novated to the 2023 contract at their 2 April 2023 fee. After the transfer, any inflationary increases will be applied in line with this commissioning strategy 2023 + and apply from the date of contract award.

As set out above, only providers who are successful in applying for a 2023 contract will receive fee increases from the date of contract award.

In cases where a provider is unsuccessful (for example does not meet the entry criteria or is rated as Inadequate) in joining the new contract but has existing care packages commissioned by the Council, the following will apply:

- **Home support Sensory Loss** – any citizens currently supported will be contacted by the Council and advised of the outcome of the procurement exercise, alongside the quality rating. They will be offered a choice to either remain with the existing provider by taking up a Direct Payment or choose for the Council to find them a new provider. This new provider will be identified in line with the process described in the Allocation of Work section below and with care providers who are successful in joining the contract.

- **Supported Living** – as these citizens will have an independent tenancy and the Council is only commissioning the care element, there may be a range of considerations. In these cases, the Council will consider a range of alternatives to secure high quality services which may include the use of an Individual Service Fund, Direct Payments or the provider agreeing to make service improvements within an agreed timescale. In all cases, any citizens currently supported will be contacted by the Council and advised of the outcome and the choices available to them, along with details of any action being taken by the Council.
- **Care Homes (with and without Nursing)** – the provider will no longer receive any new placements from the Council and will be required by the Council to make the necessary improvements to the quality of the service within timescales agreed with the Council. Should the provider make the necessary improvements and are then able to meet the entry criteria, they will be allowed to join the new contract. For those providers that are unable to make the necessary improvements, the Council will commence dialogue with service users and their families to start considering moves to alternative, higher quality provision. Only a small number of care homes (with and without nursing) services are expected not to get onto the flexible contracting arrangement.

Every effort will be made to make providers aware of this commissioning strategy and associated procurement activity. The Council already holds contracts with over 1,000 care providers under the 2017 commissioning strategy/contracts and it is expected the majority of these will sign up to any new contracts. However, in cases where a provider chooses not to join the contract or is not aware of the arrangements, but has existing care packages commissioned by the Council, the provider will no longer receive any new placements from the Council with immediate effect. Current contracts do allow for placements to continue on their previous terms and conditions which will allow dialogue with effected providers, service users and families. The Council will commence dialogue with providers, service users and their families to start considering moves to alternative contracted provision where appropriate.

CORE STANDARDS

The Council not only has a statutory duty to meet assessed eligible care and support needs but a wider responsibility to the people of Birmingham to ensure the care sector is fit for purpose and supports the wider health and social care system.

To ensure citizens and their families are clear about the standards they can expect from their provider and that providers are clear about what is required, the Council has set out a series of service specifications and core standards. These will be used as the foundation for all quality monitoring assessments undertaken by the Council, NHS, or any other party acting on the Council's behalf.

In meeting all regulatory, legal and contractual requirements, each provider will be required to meet the five core standards which will deliver the following outcomes:

1. Involvement and information

- a. Service Users understand the care and support choices available to them. They are encouraged to express their views and are always involved in making decisions about the way their care and support is delivered. Their privacy, dignity and independence are respected and their (or their carer's) views and experience are taken into account in the way in which the Services are provided.

- b. Where they are able, Service Users give valid consent to the care and support they receive. They understand and know they can change any decision that has been previously agreed about their care and support. Their human rights continue to be respected and are taken into account.

2. Personalised care and support

- a. Service Users experience appropriate, effective, care and support in an enabling way that safely meets their needs, protects their rights and maximises their independence, health and wellbeing.
- b. Service Users are enabled and supported to have a choice of nutritional and balanced food and drink to meet their diverse needs.
- c. Service Users receive safe, coordinated care and support where more than one Service Provider is involved, or where they are moved to another Service Provider.

3. Safeguarding and safety

- a. Service Users are protected from abuse or the risk of abuse and their human rights are respected and upheld.
- b. Service Users experience care and support in a clean environment that protects them from, and reduces the risk of, infection.
- c. Service Users will have the medicines they are prescribed, at the times they need them, and in a safe way.
- d. Service Users, together with those who work in or visit the premises, are in safe and accessible surroundings that promotes and protect their wellbeing.
- e. Service Users, together with those who work in or visit the premises, are not at risk of harm from unsafe or unsuitable equipment (including furnishings or fittings). Service Users benefit from equipment that is comfortable and meets their needs.

4. Suitability of staffing

- a. Service Users are safe and their health and welfare needs are met by staff who have been appropriately recruited and who have the right qualifications, skills and experience.
- b. Service Users and their health and welfare needs are met by sufficient numbers of appropriate staff with the right qualifications, knowledge, skills, approach and experience.
- c. Service Users are safe and their health and welfare needs are met by staff who are appropriately trained, well supervised, and receive the development opportunities they need to carry out their role effectively whilst keeping their skills and training up to date.

5. Quality of management

- a. Service Users benefit from safe, quality care due to effective decision making and management of risks to their health, welfare and safety because lessons are learned, and the quality of Services is effectively monitored.

- b. Service Users and / or their nominated representative can be sure that the Service Provider listens to and acts on their complaints and comments. They know that they will not be discriminated against for making a complaint or raising an issue.
- c. Service Users are confident that the records kept by the Service Provider about their care and support (including those that are required to protect their safety and wellbeing) are accurate, fit for purpose, held securely and remain confidential.

THE INTEGRATED QUALITY FRAMEWORK

The Council has adopted an Integrated Quality Framework (IQAF) with partners across our Integrated Care System. This framework sets out the approach to quality assurance and the full detail of which will be incorporated into relevant contracts. The key principles of the IQAF, as set out in the NHS National Quality Board Shared Commitment to Quality (2021):

Delivering quality care in systems: key principles

Based on learning from systems to date, there are six key principles that should underpin decisions around quality in health and care systems:



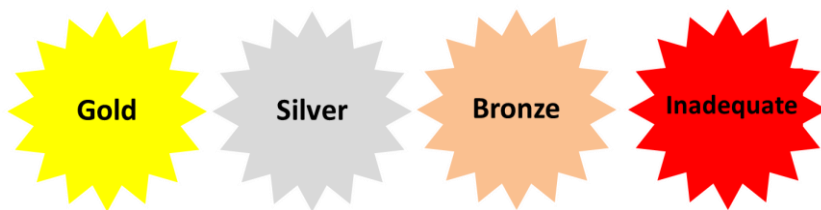
Providers will be given a Provider Quality Rating which will be based on whichever is the most recent of the following. Between them, these will act as a baseline of quality assurance for all commissioned services:

- The view of the regulator: the CQC inspection rating
- A baseline of all quality standards; the Quality Monitoring Visit rating

In addition, the following elements may be considered:

- An assessment of health care quality: the Healthcare Quality Assurance Level
- The view of the Provider: Provider Quality Assurance Statement (PQAS)
- The views of the Service User: Customer feedback

The Provider Quality Rating will be measured, and each service given an overall quality rating of either 'Gold', 'Silver', 'Bronze' or 'Inadequate'. The statements below reflect what services in the different quality categories should look like.



WHAT DO THESE SERVICES LOOK LIKE?

'Gold'

- People describe the service as exceptional and distinctive, with staff going out of their way to meet personal preferences and individual outcomes.
- The provider is striving to be a leader in their field.
- The provider exceeds the standards set down by CQC, and contractual terms and core standards.
- The exceptional level of service is delivered consistently over time.

'Silver'

- People describe the service as good and that it meets their needs and delivers good outcomes.
- The provider meets the standards set down by CQC, and contractual terms and core standards.
- The good level of service is delivered consistently over time.

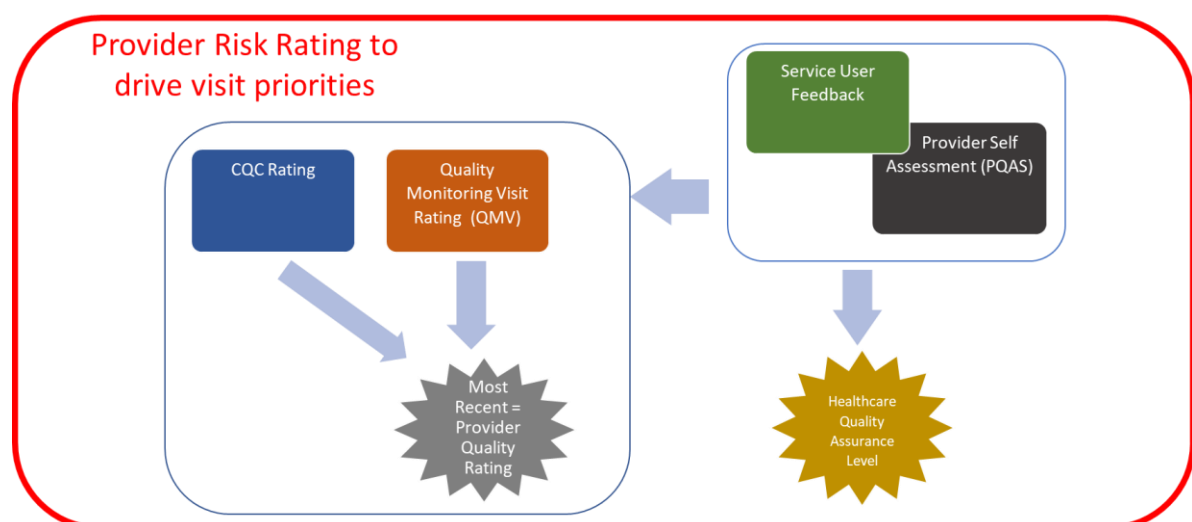
'Bronze'

- People describe the service as not always good and that it does not always meet their needs or deliver good outcomes.
- The provider is working towards meeting all of the standards set down by CQC and contractual terms and core standards, but improvement is still required.
- A good level of service is not consistent over time.

'Inadequate'

- The provider does not meet key standards set by CQC and contractual terms and core standards.
- People using the service are not safe and they are at risk of harm.
- Significant improvement is required, the service will be at risk of losing its registration.

WHAT INFORMATION WILL DRIVE THE RATING?



The Integrated Quality Assurance Framework aims to capture a range of views of the quality of services and use them to produce an Overall Quality Rating for all services and a Healthcare Quality Rating for those services providing FNC/CHC/Section 117 health and care support. These will be used to inform care commissioning processes and will help people to make informed choices. The Overall Quality Rating will therefore draw upon a range of data sources and be published regularly:

- The view of the citizen or service user: Customer feedback and social worker feedback
- The view of the regulator: The Care Quality Commission (CQC) inspection rating
- The view of the Commissioner: Birmingham City Council or NHS quality monitoring rating
- The view of the provider: Provider Quality Assurance Statement

The Integrated Quality Assurance Framework will be used to develop and improve commissioned regulated adult social care services and will set out all detailed quality improvement processes.

CUSTOMER FEEDBACK

Service user feedback will be used to evaluate what service users think about the service they use, how the service involves and consults with service users and how responsive the service is. The Integrated Care System (ICS) will take into account customer feedback using a range of methods including (but not limited to):

- The ICS Council will assess the service delivery against the 'Involvement and information' and 'Personalised care and support' domain of the agreed quality toolkit.
- The ICS will use data gathered through the social work and clinical assessment and review process about how well the provider delivers outcomes for service users using the Friends and Family Test.
- All care providers will be required under the terms of their contract, to use and promote the Healthwatch feedback tools and to use data collected to improve services.
- The ICS will work with Healthwatch to further develop their tools and usage of these to support quality improvements in adult social care services.
- The ICS will continue to work with partners including the Care Quality Commission to obtain feedback on commissioned services and ensure coordinated action to support service improvement.
- The ICS will work with citizen groups and partners to ensure our quality standards reflect professional, contractual and regulatory compliance but also those issues that are important indicators of quality for service users and potential service users.
- The ICS will work with citizen groups to ensure feedback can be obtained from everyone who receives service in a way that meets their individual communication needs.

The Council may take into account customer feedback recorded on other websites where it feels that the feedback is relevant.

PUBLICATION OF THE QUALITY RATING

The Council will publish online each provider's overall Provider Quality Rating, alongside their CQC inspection rating, any NHS quality rating and customer feedback data. This will enable citizens to make informed choices about the care providers they choose to meet their needs and how they compare with other providers in the care market. This will also allow the Council to share market intelligence more readily on a regional and national basis.

PROVIDER SUPPORT PACKAGE

The Council is committed to ensuring that the care market is supported to make the necessary changes described in this strategy and a wider Quality Support Package will be developed as part of the Integrated Quality Assurance Framework. A wide range of providers operate within Birmingham, from national organisations to some of our smaller and more specialist providers. It is therefore important that, regardless of the wider assets and resources a care provider has, they have equal access to the Council and partners support in making changes and improvements in quality. All providers under the new contract will therefore be entitled to a package of support from Birmingham City Council and its partners, to incentivise improved quality which will include:

- A **dedicated commissioning team** will continue to be aligned at a local geographic level. This will allow commissioners to work locally to support the further shaping of all sectors of the market, development of and linking to community assets and to have a real understanding of the availability and quality of care in their area. They will provide advice and guidance in relation to the contract; be proactive in picking up potential quality issues early on in order to reduce more intensive interventions in future; signpost providers to targeted and specialist training; support the development of social value and to continually improve quality.
- A **quarterly contract review meeting with commissioners for those providers with the largest market share**. This will be used to discuss market intelligence, quality, performance, improvements, innovation and address questions and concerns either party may have about the contract and how it is operating.
- A **training and support programme** delivered jointly with the NHS and partners, aimed at driving up quality, will be developed to ensure the care sector is an attractive employment choice for people.
- The Council is keen to **explore new ways of working with providers** and to ensure that the market remains sustainable in the future. The Council will look to develop models through its Social Value Policy and the Birmingham Business Charter for Social Responsibility to **connect organisations that can support and benefit one another** to improve areas of their business and quality.

PRICING

The Council undertook a range of comparison, benchmarking and consultation to develop its fee structure in 2017 and to further understand the costs of care in Birmingham. In 2019 and 2021 the Council undertook Open Book cost of care exercises across the sector and used the results in the setting of fees and increasing commissioner understanding of provider costs/pressures. In 2022 the Council undertook a mandated Fair Cost of Care exercise as required by the Market Sustainability and Fair Cost of Care Fund grant.

The Birmingham Fair Cost of Care and findings, outputs and all associated reports and analysis, including the Market Sustainability Plan will be published on the Council's website in due course:

www.birmingham.gov.uk/stm

Having considered the above exercises, the Council will continue to operate a **fixed fee** approach for the following services:

- Home support Sensory Loss (adults ages)
- Supported Living (adults)
- Care Homes without nursing (for over 65's)
- Care Homes with nursing (for over 65's)

To reflect the complex range of support provided for those citizens aged 18 – 64 years old with a learning disability, mental health condition or with a physical disability, the Council will continue with the Guide Price and Open Book process established in 2017. This includes the Council using a Guide Price for various levels of need and any variations from this being managed and agreed using an 'open book' approach. The open book process will require providers to provide the cost of meeting the service users needs and to provide a transparent and evidence-based breakdown of these costs.

Home Support Sensory Loss (adults) services will be paid an additional fee to recognise the additional staffing, training and travel time required to provide a specialist city-wide service.

The fees for each type of care above, will:

- Provide greater transparency of pricing that is fair.
- Enable all parties to plan more effectively.
- Allow investment to drive up the quality of services.
- Enable providers to recruit and retain staff.
- Keep pace with changes to the National Living Wage and general inflationary pressures.

The inclusion of a contractual requirement for all providers to open their financial accounts to the Council on an annual basis will further allow the Council and providers to discuss costs, identify ways in which we can work collaboratively to reduce costs, increase efficiency and also work on developing more of a partnership approach.

The following general pricing assumptions have also been adopted:

- The proposed rates will enable providers to pay their care workforce an hourly rate which is in line with the National Living Wage.
- The proposed rates will enable providers to pay staff employed that are under 25 years old, an hourly rate equivalent to the National Living Wage.
- In addition to quality incentives and a range of support, the Council will make a commitment to increase fees annually in line with the principles set out in the Price Review Methodology section below.
- Providers will meet the CQC requirement that they ‘must provide sufficient numbers of suitably qualified, competent, skilled and experienced staff to meet the needs of the people using the service at all times and... other regulatory requirements.’
- Third Party Contributions (also known as top ups) - where a care provider has made an offer through the CareMatch Portal (that is not a direct allocation as a result of the citizens right to choose more expensive accommodation), there should not be any Third Party Top Ups put in place – by agreeing to the terms of the Council’s Flexible Contracting Arrangement providers are agreeing to provide the care and support detailed in the support plan at the contract rate. The Council will continue to invest in IT systems that ensure prompt payment and secure cashflows, to reduce providers’ financing/borrowing costs.
- Providers will take all opportunities available to reduce overheads and transaction costs and increase occupancy levels.
- All nursing related costs must be met through the Funded Nursing Care (FNC) or Continuing Health Care (CHC) contributions.
- The Council may agree to a discretionary additional payment for a service user who is a delayed discharge from hospital or who the Council has been unable to place due to complex care needs or is under Section 117 aftercare. This will be at the sole discretion of the Council.

The Council will continue to engage with providers to explore the impact of Social Care Reform and requirements of the Market Sustainability and Fair Cost of Care Fund as these emerge during 2022 and beyond.

PRICE REVIEW METHODOLOGY

The Council recognises underlying price pressures within the care sector, particularly those in relation to employee costs, which make up the largest proportion of the cost of delivering care. We have invested over £40m in the sector through our previous commissioning strategy – however we know there is still more to be done. We are working closely with the sector to implement social care reform, including the requirements of the Market Sustainability and Fair Cost of Care Fund.

The Council is committed to ensuring the care sector remains sustainable, not only as it delivers care to some of our most vulnerable citizens, but also as a major employer across the region. We will therefore increase prices of care packages placed under the new contract on an annual basis having considered the following principles:

- Changes in the rate of inflation including consideration of the Consumer Price Index (CPI) and the Consumer Price Index Housing (CPIH).

- Changes in national minimum wage rates including the National Minimum Wage and National Living Wage.
- Other relevant price pressures likely to significantly impact on the care sector e.g changes to employer pension contributions and National Insurance.
- Regional price comparison data
- Open book accounting/Fair Cost of Care returns from care providers
- Sustainability of the care sector including the scale of providers existing the market locally
- In accordance with our Market Sustainability Plan where relevant
- Affordability to the Council within the context of the overall annual budget settlement

The Council will use the above principles each year to set a price increase applicable from April the following year. This will be set out transparently and shared with care providers as early as possible to assist with financial and business planning.

For care homes (with and without nursing) providers for under 65's (or those in Learning Disability, Mental Health and Physical Disability placements as recorded on the Council's care records management system) the approach will differ as follows:

- From 3 April 2023, the Council will continue to operate a Guide Price and the 'open book' process for new packages of care in care homes (with and without nursing) for under 65's. This requires providers to submit a breakdown of their costs if the proposed fee is above the Guide Price. There will continue to be robust check and challenge of these fees in line with benchmarks and cost of care data.
- For providers who are successfully awarded a new care homes (with and without nursing) for under 65's contract after 3 April 2023, their existing packages of care will be transferred onto the new contract at their existing fee rate. However, they will then be immediately eligible for any applicable annual fee increase.

For any provider who has not come onto the new contract either voluntarily or as a result of being unsuccessful at the tender stage, any annual increase will not apply, including those under previous contracts. The Council will continue to pay the existing fee applicable as at 2 April 2023 to that provider, until such time as that care package ends or they apply for and are awarded a new contract.

CARE PACKAGE ALLOCATION PROCESS

Providers will be asked to submit offers for packages of care via an electronic system. The following principles will therefore apply:

- Each provider submitting an offer will be required to confirm that they can meet the needs of the citizen based on the individual support plan. This will have been provided as part of the requirement to the market and anonymised as appropriate.
- Provider quality ratings will be used when evaluating individual offers for care packages. The provider with the highest quality rating will win the tender – subject to citizen choice in relation to Supported Living and Care Homes (with and without nursing), which will be considered in line with statutory requirements.
 - Where there is no clear difference between the quality ratings of the providers who make an offer for the package e.g., two Silver rated tenders are received citizens will be presented with all of the highest rated tenders and asked to choose.

The allocation process will differ for the following services:

- Supported Living – the principle decision will be around location as service user will be signing an independent tenancy. However, the market will be tested, and all offers will be presented to the service user in quality rated order.
- Home Support Sensory Loss – this is a city-wide service with a small number of specialist providers, therefore, the market will be tested and all offers will be presented to the service user in quality rated order.

SYSTEMS AND PROCESSES

The Council will ensure it maximises the use of technology to operate the commissioning strategy and associated contracts efficiently, effectively and with a focus on transparency. Any systems used will deliver the following key functionality as a minimum:

- **Provider enrolment** – an electronic process for those joining the contract to record and capture compliance with the entry criteria and ensure details remain up to date.
- **Quality rating** – an electronic method for calculating and recording provider quality ratings, using these in the tendering process and publishing these scores.
- **Tendering** – a simple system for providing care requirements to the market and for managing the tender, evaluation and contracting processes and linking these to citizens in the Council client records management system.
- **Supplier relationship management** – a single electronic record of each provider that can hold records of all provider/commissioners’ interactions including monitoring visits, improvement plans, offers and any correspondence.
- **Data and reporting** – reporting capability that allows the Council to manage providers at both a market and individual level and can provide appropriate public quality information.

SERIOUS INCIDENTS AND SAFEGUARDING

The Care Act 2014 Statutory Guidance makes clear that adults safeguarding responses should not be a substitute for:

- Care providers' responsibilities to provide safe and high-quality care and support;
- Commissioners regularly assuring themselves of the safety and effectiveness of commissioned adult social care services; and
- The Care Quality Commission (CQC) ensuring that regulated providers comply with the fundamental standards of care.

Adults safeguarding is therefore not intended to replace either existing governance structures or the effective management/oversight of commissioned adult social care services, but to supplement and support these arrangements to ensure a safety net is in place for all. The Council will continue to work with NHS and other commissioners across Birmingham, to develop an approach to the reporting of serious incidents and safeguarding alerts that:

- gives better oversight of quality concerns to commissioners.
- offers providers the ability to own, investigate and learn from quality issues and serious incidents.
- ensures providers receive appropriate support and training in investigating and reporting concerns and incidents
- mandates that all quality issues, serious incidents and safeguarding incidents will be reportable
- ensures sustainable improvements in quality and information sharing.

OPEN BOOK ACCOUNTING

Transparency of operational and financial performance will be a fundamental condition of doing business with the Council. The Council require all providers to regularly submit details of the cost of their service. Reporting standards and tools will be proportionate and recognise the size of some of the organisations that deliver adult social care across the city. This will be at least an annual data collection exercise.

OUT OF CITY PLACEMENTS

For 'out of city' care home placements for people over 65 years old, the Council will pay the usual rate set by the host local authority in which the Provider is located, where that usual rate is higher than the Birmingham City Council's standard residential fee and/or standard nursing fee. In situations where the host local authority does not have a usual rate, that rate is not easily identifiable, or the rate is lower than that paid by Birmingham City Council then the Council's standard residential fee and/or standard nursing fee shall apply.

The above fee change will apply only to placement made from 3 April 2023 and not apply to existing/historic arrangements.

JOINT FUNDED PLACEMENTS

The Council currently commissions a number of placements for citizens that have both health and social care support needs. These placements, although commissioned by Birmingham City Council, may be jointly funded by the Council and the NHS. Any such placements may be made under the new contract.

6. PERFORMANCE FRAMEWORK

A performance framework will be developed to monitor delivery of the commissioning strategy.