

**Committee Name and Date of Committee Meeting**

Cabinet – 23 December 2019

**Report Title**

Home Care and Support Tender Outcome Report

**Is this a Key Decision and has it been included on the Forward Plan?**

No, but it has been included on the Forward Plan

**Strategic Director Approving Submission of the Report**

Anne Marie Lubanski, Strategic Director of Adult Care, Housing and Public Health

**Report Author(s)**

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**Ward(s) Affected**

Borough-wide

**Report Summary**

The purpose of a home care and support service is to enable people to remain living at home for as long as possible. The availability of quality home care services are key to supporting people's independence at home in the communities they know.

The new model will provide for personalised service delivery against agreed outcomes where providers arrange services to be delivered at dates and times preferred by the individual and their families and continue to meet their obligation where critical call times are required. Providers will be actively encouraged to apply reablement principles to maximise people's independence. Providers will also play a much more pivotal role in the organisation of care arrangements and will be involved in the review activity. In this model provider reviews can result in adjustments to care packages to benefit the individual and increase opportunity for cost efficiency for the Council in situations where needs have positively changed.

The new delivery model for home care and support presents an opportunity to embed the adult care vision that the Council

*'Will act together to support the residents of Rotherham to live full active lives; to live independently and to play an active part in their local communities'.*

Effective home care and support will enable people to remain at home longer, live independently and enable them to access community assets to maintain health and wellbeing. The new model fits with the personalisation and prevention (reduce,

prevent, delay) agenda contained within the Care Act 2014 in addition to reducing demand for formal care services and therefore costs. The model applies across the health and care system and services have also been procured on behalf of the Rotherham Clinical Commissioning Group (CCG) to create a seamless pathway of home care and support for people in Rotherham.

This new model of home care and support will be delivered by a number of providers who were successful at the conclusion of a competitive tender process. The successful providers were identified in October 2019 and a lengthy and comprehensive mobilisation period has commenced to facilitate the new delivery model being in place from 1 April 2020.

On 18 February 2019 Cabinet resolved that:-

- (1) Commencement of a competitive tender process for the home care and support service from April 2019 is approved.
- (2) The new home care and support delivery model defined following the completion of a co-production exercise with a range of stakeholders, which informed the specification for the new contractual arrangements, be noted.
- (3) A further summary contract report be submitted to Cabinet detailing the outcome of the tender process and the steps required to mobilise the new framework following contract award.

The update report would:

- Provide a brief summary of the new delivery model for Home Care and Support outlining the principles and approaches.
- Give an overview of the new Home Care and Support service specification.
- Provide information on the tendering process and award of contract
- Briefly outline the profile of the successful service providers
- Give an overview of the implementation of the new delivery model
- Provide an overview of the future approach to contract performance reporting and monitoring

## **Recommendations**

1. That the following update be noted:-
  - the co-production work and re-design of a new service specification was successfully completed to enable a tender process to take place
  - a competitive tendering exercise ran from 7th June to 18<sup>th</sup> November 2019
  - A framework agreement will be established on 1<sup>st</sup> April 2020 consisting of the following:
    - 9 Tier 1 providers
    - Tier 2 providers
    - 2 specialist Learning Disability providers
    - 1 specialist Unpaid-Carers Support service
  - the mobilisation period will enable the new delivery model to commence from the 1<sup>st</sup> April 2020

- the overall contract value is anticipated to be circa £14.4m per annum for the Council and £1.7m for the Rotherham Clinical Commissioning Group (CCG)

**List of Appendices Included**

Appendix 1 Equality Screening Tool

Appendix 2 Equality Analysis

**Background Papers**

Cabinet Report 18<sup>th</sup> February 2019

Commissioning and procurement of a new delivery model for Home Care and Support Services

<https://moderngov.rotherham.gov.uk/documents/g14392/Public%20reports%20pack%2018th-Feb-2019%2010.00%20Cabinet.pdf?T=10>

**Council Approval Required**

No

**Exempt from the Press and Public**

No

## Home Care and Support Tender Outcome Report

### 1. Background

1.1 This is the second of two reports to Cabinet concerning the commissioning and procurement of Home Care and Support services. The first proposed an approach to a new service delivery model and was submitted to the Cabinet meeting held on the 18 February 2019. This second report serves to provide an update on the outcome of a competitive tender process undertaken to secure the service.

1.2 The initial report dated 18 February 2019 set out the following details :-

The proposed service specification has been informed through the application of best practice from elsewhere and most crucially through a co-production exercise with key stakeholders informing the content.

The new delivery model will combine the effective elements of the existing specification and these will be reflected in the new service specification. One key element is the continuation of the effective organisation of providers against a geographic footprint (zones). This supports an interface with assessment teams and health services i.e. community nurses.

The new model will provide a personalised service delivery against agreed outcomes where providers arrange services to be delivered at dates and times preferred by the individual and their families and continue to meet their obligation where critical call times are required. Providers will be actively encouraged to apply reablement principles to maximise people's independence. Providers will also play a much more pivotal role in the organisation of care arrangements and will be involved in the review activity. In this model provider reviews can result in adjustments to care packages to benefit the individual and increase opportunity for cost efficiency for the Council in situations where needs have positively changed.

The new delivery model for home care and support presents an opportunity to embed the adult care vision that the Council:

*'Will act together to support the residents of Rotherham to live full active lives; to live independently and to play an active part in their local communities'.*

Effective home care and support will enable people to remain at home longer, live independently and enable them to access community assets to maintain health and wellbeing. The new model fits with the personalisation and prevention (reduce, prevent, delay) agenda contained within the Care Act 2014 in addition to reducing demand for formal care services and therefore costs.

1.3 The recommendations in the Cabinet report 18 February 2019 stated:

1. Cabinet to approve the commencement of a competitive tender process for the home care and support service from April 2019.

2. Cabinet to note, the new home care and support delivery model has been defined following the completion of a co-production exercise with a range of stakeholders and this has informed the specification for the new contractual arrangements.
  3. Cabinet to receive an update on the outcome of the tender process in due course.
- 1.4 The existing home care and support contracts are due to end on 31 March 2020. The services are currently delivered by twelve organisations, of these seven prioritise delivery to defined geographical zones across the borough. A further five organisations pick up work when the seven zoned organisations are unable to cover.
  - 1.5 Approximately 16,000 planned home care hours per week are commissioned for 1,300 people. The largest cohort in receipt of home care is older people who form 83% of the total recipients of contracted home care. Around 350 care packages require multiple carers to attend. Payments are made on actual hours delivered with an approximate 10% variance between planned hours and actual hours delivered.

Rotherham CCG purchase an additional 2,000 planned Home Care and Support Hours per week (approximate) for 350 people from a range of providers that deliver service across the Rotherham borough.
  - 1.6 The existing service specification details the purchasing of care hours in multiples of 15 minutes. This is allied to the duration of time being estimated to deliver care on a daily basis and agreed in a support plan.

## **2. Key Issues**

### **The new co-designed service model for Home Care and Support**

- 2.1 Co-production activity carried out throughout 2018/19 has helped inform not only the principles and approaches for the Rotherham model, but also the details of the specification, particularly with regard to reducing social isolation, health interventions and operation of the reablement model. The input came from various channels, including interviews, workshops and focus groups. These were attended by a range of stakeholders including:
  - People currently in receipt of home care and support services through telephone surveys
  - members of the public at Rotherham Show
  - existing contracted providers
  - wider providers through soft market testing sessions
  - a range of Adult Care and Rotherham CCG staff
  - Community Nursing and Occupational Therapy staff
- 2.2 The core element of the proposed new delivery model is a joint approach to a system wide model for Rotherham between the Council and the NHS Rotherham Clinical Commissioning Group.

This model is underpinned by the adoption of the principles and approaches.

The Principles of the new model are:

- The promotion of independence through continued reablement
- A recovery ethos for all individuals in receipt of the service
- Provider care staff are entrusted to manage the 'envelopes of time' for individuals
- Provider care staff are seen as part of a multidisciplinary team
- There is a high level of trust between all parties involved in the care and support for an individual in receipt of the service

The Approaches of the new model are:

- Assessment and provider care staff apply strength based approaches when completing Support Plans
- The individual in receipt of the service determines the desired outcomes and all support plans are person centred
- Options to use equipment, assistive technology or digital solutions are explored as part of the support planning process
- Provider staff are confident and competent to use or work alongside equipment, assistive technology or digital solutions
- Provider staff make best use of community assets as part of their care and support offer for individuals in receipt of the service
- Learning and development is available to provider care staff

2.3 The service specification covers both the Council and NHS Rotherham Clinical Commissioning Group requirements. The intention is to support a seamless pathway for people who may be supported by social care and then require health interventions e.g. end of life care. The approach enables people to be supported by the same carer team, even if their needs change. The pathways developed for people in receipt of services also afford workforce development opportunities for front line care staff with the option to increase their skills and widen their career choices.

### **3. Tendering Process and Contract Award**

3.1 A soft market testing provider engagement entitled "Reimaging Home Care" event was held in January 2019. This provided an opportunity to test and identify the future market appetite and also to help conclude the co-design work. The event was well attended with excellent provider engagement. This was followed up by further engagement with the market, both existing and potential providers.

3.2 The procurement of the new service was advertised in the Official Journal of the European Union (OJEU) and on YORtender in June 2019 with a closing date mid July 2019.

### 3.3 The tender was split into the following lots:

#### Home Care and Support:

##### Tier 1 –

- Lot 1 – Rotherham North (3 providers)
- Lot 2 – Rotherham South (3 providers)
- Lot 3 – Rotherham Central (3 providers)

The providers are allocated to geographical zones to prioritise delivering care and support in their designated zone. There are three providers allocated to each zone, North, South and Central. A total of 9 Tier 1 providers operate across the Borough to support choice for individuals and securing capacity of service. The Tier 1 providers will deliver the majority of care and support across the Borough.

##### Tier 2 -

- Lot 1, 2 and 3 – Borough Wide provision with no limit on the number of awards to providers meeting the quality threshold.

Providers allocated to Tier 2 will be offered work during times of peak activity when Tier 1 providers are unable to accept work or in situations where quality may be affected and additional provision is required.

Opportunities to apply to become a Tier 2 provider will be offered throughout the contract term. This approach will stimulate the development of provision to enable small providers to build their service offer over time. All Tier 2 providers are required to meet a threshold of quality which is assessed prior to admission to Tier 2. Tier 2 providers will deliver care and support Borough-wide.

#### Specialist Home Care and Support:

- Lot 4 – Specialist – Client Group (mental health, learning disability, etc) with no limit on the number of awards to providers meeting the quality threshold.

Specialist providers will support people who have particular needs associated with their disability (mental ill-health, learning disabled) and require home care and support. Opportunities to apply to become a Lot 4 provider will be offered throughout the contract term. This approach will stimulate the development of specialist provision where small niche providers can build their service offer over time. Specialist providers are required to meet a threshold of quality which is assessed prior to having their application accepted.

#### Unpaid Carers Home Care and Support:

- Lot 5 – Unpaid Carers Home Care and Support Service/Breaks Service. The award was limited to one provider.

The Unpaid-Carers Home Care and Support/Breaks Service will provide support to people who require personal care and support and the Unpaid Carer (i.e. person who provides care and support for a person; who may be a family member, but who is not paid to do so). The objective of this service is to sustain unpaid carers in their role and allow them to benefit from the support, from this specialist provision i.e. support to contingency plan, access softer unpaid carer support services, or take breaks from caring to maintain their well-being.

3.4 The evaluation criteria for quality were specifically tailored to the new delivery model for the Home Care and Support service. Applicants were required to demonstrate capability in the areas of:

1. Safeguarding
2. Service Delivery
3. Management and Staffing
4. Recruitment and Retention
5. Training
6. Strength Based Approaches and using Community Based Assets
7. Quality (monitoring and contract compliance)
8. Governance and Quality
9. Equality and Diversity
10. Service Maturity – (developing the service over time in line with Adult Care and Integration)
11. Management Systems
12. Social Value

3.5 Award criteria:

Tier 1

- 60% of the total overall score was attributed to the award criteria in order to assess the quality of applications submitted.
- 40% of the total overall score was attributed to the award criteria in order to assess the commercial submission (hourly rate) with applications.

Tier 2, Lot 4, Lot 5

- 100% of the total overall score was attributed to the award criteria in order to assess the quality of applications submitted.

Commercial submissions were required for the above Tier and Lot(s) with rates within the price range specified as £15.29 to £17.37.

All applicants were required to demonstrate observance of the National Living Wage, travel time, employers' pension contribution and travel expenses.

3.6 The evaluation process was completed with the following applicants were successful:

Description	Successful Applicant	Organisation Size – For Profit (FP)/ Not for Profit (NfP)	Incumbent Yes/No
Tier 1	Dale Care Ltd	FP - Regional	No
	The Human Support Group Ltd	FP - National	No
	TLC Homecare Ltd	FP - Regional	Yes
	Care Line Ltd	FP - National	Yes
	CRG Homecare Ltd	FP - National	Yes
	Hales Group Ltd	FP - National	No
	Comfort Call Limited	FP - National	Yes
	Mears	FP - National	Yes
	Choices Home Care Ltd	FP - Regional	No
Tier 2	Niche	FP – Local (Rotherham)	Yes
Specialist	Voyage 1 Ltd	NfP - National	No
	Principle Support Ltd	FP – Local (Rotherham)	No
Unpaid-Carers Service	Rotherham Crossroads Caring for Carers	NfP - Local (Rotherham)	Yes

3.7 Excellence was demonstrated by successful applicants in their capacity, capability and competency in the following areas:

- Collaborative approaches across health and social care to the assessment/review process of the individual using strength based approaches with the person at the centre of the process to achieve the best outcome.
- Training, policies/procedures are developed to reflect the new way of working, including training in low level healthcare tasks.
- Achieving continuity of allocation of care worker with convincing systems and arrangements in place to achieve this.
- Developing trusting relationships with the wider support network of people accessing the service.
- Extensive experience delivering services within the reablement ethos successfully.
- Utilisation of community assets to support people to regain/gain independence - access services such as befriending services and maintaining a portfolio of assets available in the community to prevent social isolation.

- Using assistive technology to ensure people can safely maintain their independence at home.
- Place based working involving neighbourhood offices - developing of community connectors to increase the capacity of support within the community.
- Company values strongly reflected treating people with respect and this was demonstrated throughout the recruitment process/marketing materials describing caring and interpersonal relationships - 'make a difference' to people's lives.
- Values-based recruitment processes to select staff who are compassion, empathy, respect and have the right attributes and interpersonal and communication skills and 'Value Based interviews' techniques are well established.

A strong commitment was demonstrated in:

- Partnership with commissioners to support people to achieve outcomes and reduce the need for care visits.
- Digital Support Planning, Risk Assessments and Communications Logs to focus services upon and to enable outcome measurement.
- Rotherham-wide stakeholder forum to support the transformation of home care and share resources to maximise efficiencies and facilitate service integration within the place-based approach.
- Developing a joint workforce strategy with key partners to meet the objective of a highly skilled, trained workforce with an understanding of the clinical skills required.
- Working towards Living Wage Foundation pay rates and career development opportunities for care workers and managers up to level 7. The majority of the Tier 1 providers committed to exceeding the Living Wage Foundation's Real Living Wage of £9.30 per hour for front line care workers.

Experience was demonstrated in:

- Transitioning services from 'time-and-task' model to outcomes-based 'envelopes-of-time' model with examples and evidence of was provided.
- Supporting authorities with service changes and developments towards outcome-focused, integrated models including strategies for transition.
- Mobilising services with a high level detailed mobilisation plan expanding beyond the implementation period with detailed steps to undertake supported by a communication plan.
- Collaborative working across health and social care with resources evident within organisations to deliver a joint service successfully

### 3.7 Social Value:

Successful applicants described a range of initiatives which are aligned to the requirements set out in the 'Public Services (Social Value) Act 2012'.

Examples are outlined below where providers have demonstrated their capability and commitment:

- Working with the Prince's Trust to engage disadvantaged people into employment.
- In partnership with Job Centre Plus; developing local community projects to overcome negative perceptions of the care industry and working with schools and colleges to promote careers in care.
- Raising funds for local and national charities through provider resources.
- Working with large retailers to facilitate quiet shopping.
- Distribution of 'home from hospital kit'.

There was a commitment to deliver particular projects in Rotherham such as:

- Work with Rotherham College to engage local students and provide work experience and employment opportunities.
- Offer entry level employment opportunities to those within the NEET community and those returning to the workforce.
- Complete a social value workbook, monthly as evidence of achievement.
- Commitment of paid leave per year for staff to support community activity.
- Provide free room hire, free Wi-Fi use, free tea/coffee etc to community groups.
- Host charitable coffee mornings involving people who access the service.
- Promote the services of community assets through various channels of communication.
- Establish a social value committee within the organisation and having social value embedded within the business.
- Offer community groups training on key areas such as dementia.

Successful applicants described targets in their policies to reduce the negative impact on the environment (carbon, greenhouse gas reduction) by promotion of waste recycling and using electric bike scheme for staff transport.

## 4. Options considered and recommended proposal

### 4.1 N/A

## **5. Consultation on proposal**

- 5.1 The proposed new delivery model for home care and support has been co-produced with a range of internal and external stakeholders. The input from various interviews, workshops and focus groups has been used to inform the content of the service specification. This is in line with good practice for commissioning and supports the Adult care vision - *We will act together to support the residents of Rotherham to live full active lives; to live independently and to play an active part in their local communities.*

## **6. Timetable and Accountability for Implementing this Decision**

- 6.1 The new services are due to commence on the 1 April 2020 following an extensive period of mobilisation which will take place from 18 November 2019 until 31 March 2020.
- 6.2 In order to be allocated Tier 1 status, successful providers have had to demonstrate in their tender submissions evidence of their ability to effectively mobilise a Home Care and Support Service at scale. This includes their project management approach, communications plan and risk log to support effective implementation of the new delivery model from 1 April 2020.

## **7. Future Contract Performance and Quality Monitoring**

- 7.1 The Service will be required to meet a range of outcome indicators regarding the delivery of the service. Officers will review performance and compliance against the service specification and the addition of electronic call monitoring will enable the Council to access real time information pertaining to provider performance and compliance.
- 7.2 All the Tier 1 providers are obliged to provide the Council with a plan outlining their commitment to innovation and improvements to the services it provides in relation to the delivery of the service specified (bi-annually). The areas which they will report will include:
- Improvements in technology and/or the use of technology in connection with the service.
  - Reduction in the dependence of people accessing the service
  - Improvements in the way the service is provided
  - Improving relationships with the public sector bodies and the voluntary and community sector.
- 7.3 All the Tier 1 providers are obliged to provide the Council with a plan outlining their commitment to 'Public Services (Social Value) Act 2012' to the satisfaction of the Council and carry out their actions to meet the objectives set out in the plan.

## 8. Financial and Procurement Advice and Implications

8.1 All procurement activity relating to the award of this contract has been undertaken in compliance with the Public Contracts Regulations 2015 and the Council's own Financial and Contract Procedure Rules. The approach taken to the tender has had a positive outcome in delivering positive social value outcomes that will benefit Rotherham and Rotherham residents.

The competitive procurement process undertaken established a Flexible Purchasing System (Pseudo Dynamic Purchasing System) under the Light Touch Regime in accordance with the Public Contracts Regulations 2015. The Council will 'call off' provision from Home Care and Support Providers appointed to the Flexible Purchasing System who meet standards and obtain approved status with the Council. A Flexible Purchasing System will achieve:

- Flexibility for suppliers to be added to the Flexible Purchasing System at any stage of its lifetime,
- Cost savings through increased competition,
- Opportunity to stimulate development in the Home Care and Support Market,
- Potential to increase access for niche providers including small medium enterprises.

8.2 The opportunity was published on 7 June 2019 with 92 expressions of interest and 43 applications being submitted by the closing date at 12 July 2019. Applicants were required to complete a Selection Questionnaire to identify those organisations with sufficient capacity and capability to deliver the Services with pass/fail criteria. Of the 43 applications, 19 were selected to be evaluated and thirteen applicants were successful.

8.3 Outcome of the evaluation is as follows:

	<b>Successful Applicant</b>	<b>Lot</b>	<b>Geographical coverage</b>
Tier 1	Dale Care Ltd	1	North
	The Human Support Group Ltd		
	TLC Homecare Ltd		
	Care Line Ltd	2	South
	CRG Homecare Ltd		
	Hales Group Ltd		
	Comfort Call Limited	3	Central
	Mears		
Choices Home Care Ltd			
Tier 2	Niche	1, 2 and 3	Borough Wide
Specialist	Voyage 1 Ltd	4	Borough Wide
	Principle Support Ltd		
Unpaid-Carers Service	Rotherham Crossroads Caring for Carers	5	Borough Wide

8.4 Two specialist providers supporting people who have learning disabilities were appointed to Tier 2. Providers representing other client groups, i.e. mental ill-health, did not meet the quality threshold. These providers will receive feedback and will be offered an opportunity to reapply in the near future. It is expected that they will improve their offer on reapplication to be successful.

8.5 Due Diligence:

An appraisal of the commercial potential of each successful applicant has been undertaken. The Finance Team have reviewed the audited accounts of applicants who achieved a Credit Safe score of 55 or below and were considered a 'moderate risk'. Requests for clarification from the Finance Team to applicants were responded to appropriately and their responses were found to be acceptable. Further appraisal of the commercial potential of providers appointed will be undertaken at appropriate intervals during the contract term to assess any future risk.

8.6 The existing pay rates for care workers (excluding travel time) in Rotherham range from £8.21 to £10.00 per hour. Successful applicants submitted increased care worker pay rates from £9.20 to £10.52 (inclusive of travel time payment). This reflects a positive step in view of the recent forecasts of a projected increase in the National Living Wage. Further, the tender outcome supports the Council's Social Value policy ambitions for the move towards the payment of at least the Living Wage Foundation's *Real Living Wage* of £9.30 per hour for commissioned services across the borough, with seven of the nine Tier 1 providers exceeding the *Real Living Wage* in their successful submissions.

8.7 The hourly rates submitted at the tender award will be the implemented rates paid for 2020/21. The weighted average hourly rate for Tier 1 providers is £16.58 representing a 4% increase on the current Home Care and Support hourly rates of £15.94.

8.8 Estimated expenditure for 2020/21 based on the current delivered activity levels allocated across the successful providers is:-

- Rotherham Council; £14.366m
- Rotherham Clinical Commissioning Group; £1.768m

Compared with the current rates and volumes for individual providers the anticipated increase in cost for the Council is £0.6m (from April 2020).

The additional revenue funding for the Home Care contract will be factored into the Medium Term Financial Strategy (MTFS).

## 9. Legal Advice and Implications

9.1 This procurement was conducted with the support of Legal Services, including the production of suitable terms and conditions, and advice on various legal complexities that arose during the process (e.g. TUPE issues between providers and the provision of a revised s. 75 (National Health Services Act 2006) Agreement).

## **10. Human Resources Advice and Implications**

- 10.1 There are no direct Human Resources implications for the Council as a result of the procurement process. However, in order to facilitate the new delivery model, external staff from the current home care providers not selected onto the Tier 1 allocation will be subject to Transfer of Undertakings (Protection of Employment) Regulations (TUPE). As a result of the contract changes, staff employed by outgoing providers will be transferred to the employment of the new providers allocated to Tier 1 prior to 1 April 2020.

## **11. Implications for Children and Young People and Vulnerable Adults**

- 11.1 The commissioned services at Tier 1, Tier 2 and specialist provision specifically support adults aged 18 and over. There are therefore limited implications for Children and Young People as a result of the tender outcome. The new delivery model will provide positive experiences for Adults in offering them more choice and control as to how their home care and support packages are to be delivered.
- 11.2 The Unpaid Carers Home Care and Support/Breaks Service specifically support unpaid carers with the aim to enable them to continue to deliver their valuable caring role. As a consequence of this provision, there may be ancillary benefits for young carers and family members under the age of 18 of the cared for, though they will not be in direct receipt of the home care and support service. The provision of a breaks service alleviates carer stress and helps prevent carer breakdown. This not only has significant benefits for the carer, but also the public purse.

## **12. Equalities and Human Rights Advice and Implications**

- 12.1 An Equality Analysis specific to this piece of work has been completed and is attached to the report as Appendix 2.

## **13. Implications for Partners**

- 13.1 The service specification covers both the Council and NHS Rotherham Clinical Commissioning Group requirements. This is positive in terms of further developing operational integration between health and social care and for defining the pathways for people to receive seamless support at home under either social care or health funding arrangements.

## **14. Risks and Mitigation**

- 14.1. On mobilisation of the service, care packages will be safely allocated to incoming Tier 1 providers from incumbent providers who have not been successful in the tender. There is no commitment to any home care and support provider of the exact volumes to be novated. The care and support requirements of the person in receipt of the service will be paramount.

A risk assessment has been undertaken with contingency in place to manage a smooth transition. This includes a stakeholder communications plan (involving people who are directly affected), roles of officers clearly defined, involvement and co-operation of providers undertaking obligations in line with TUPE and taking transfer of the service. Resources will be aligned to maintain high levels of vigilance in respect of quality of service delivery and oversight of capacity.

Adequate time has been allowed for the mobilisation of the service from October 2019 to the point of actual transfer on the 31 March 2020.

As part of the submissions to become a Tier 1 provider, the bidders submitted a detailed mobilisation plan, communication plan, Gantt chart and risk log. These formed a Red Flag – pass or fail question within the Invitation to Tender document.

The submissions put forward by the preferred 9 providers for Tier 1 all met the requirements and in some instances were of extremely high quality. The progress of the milestones contained within the provider submission will be regularly reviewed by Officers to ensure that the plans are on track.

Running alongside this will be dedicated communications and access channels for customers, Council/CCG and provider staff. This will be throughout the period of the mobilisation period, but will be ramped up during the immediate period around contract delivery to provide reassurance and to proactively address any issues that may arise at the point of transfer.

14.2 Although unlikely, there is a risk that successful Tier 1 applicants may choose to not commit to delivering the service in Rotherham. A contingency is in place with the applicant who participated in the competitive tender process and met the quality threshold but did not achieve a place on Tier 1. In this scenario they will be canvassed to mitigate this risk during the mobilisation period.

14.3 The scale of transformation required to realise the ambition of the new Home Care and Support model requires collaboration and co-ordination across the Council, Rotherham CCG and Home Care and Support providers.

Commitments documented by successful applicants to deliver the new Home Care and Support model and transform the service will be translated to be included in a single transformation plan. This plan will be influenced and led in partnership between health and social care and with senior representatives across the Tier 1 providers. The Council and the CCG will work closely with Service Providers at the start of the contract and throughout the contract term to ensure Service Providers are supported to implement changes to meet our ambition as quickly as possible.

**15. Accountable Officers**

Anne Marie Lubanski, Strategic Director of Adult Care, Housing and Public Health.

Nathan Atkinson, Assistant Director, Strategic Commissioning.

Approvals obtained on behalf of Statutory Officers:-

	<b>Named Officer</b>	<b>Date</b>
Chief Executive	Sharon Kemp	12/12/19
Strategic Director of Finance & Customer Services (S.151 Officer)	Judith Badger	27/11/19
Head of Legal Services (Monitoring Officer)	Bal Nahal	27/11/19

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This report is published on the Council's [website](#).