**Procurement Document B**

**Specification**

**Home Care in Somerset**

**DN**

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**Specification**

## Background and Scope

This document sets out the service specification and standards which apply to the provision of Homecare services in Somerset. The ethos of the service is to provide high quality personalised care and support, be outcome focused, and to enhance what the Individual can do themselves or with help from their support network.

The service will support:

* Individuals coming out of hospital to aid a timely or early discharge.
* Individuals to remain living at home for as long as possible.
* Individuals who have an assessed need for social care.

The current service for regulated homecare commissioned by Somerset Council supports around 1,400 individuals every week to remain at home. The average number of hours delivered per week is around 17,000. These arrangements will help address market efficiency and will focus on innovative solutions and strong partnership working.

The service to be provided under this specification is personal care and support at home (Homecare), for individuals who meet the eligibility criteria for Somerset Council funded care and support. The services included are:

* Homecare for adults.
* Sitting Services.
* Night-time Support.
* Live in Care.

The services will be deliverable 24 hours a day, 365/366 days per year including Bank Holidays and weekends.

The Service shall be delivered within Somerset Council's boundaries. The Council has designed geographical areas called ‘Zones’. The Zones are designed to create geographical areas in which Providers can structure their business and delivery of care to ensure capacity in the Service. It is expected that Providers work in partnership within their zones to ensure sufficient supply. There are 13 zones and these are outlined in Appendix A. Indicative hours per zone are outlined in Appendix B.

Somerset Council may undertake a review of the supply arrangements with Providers within the zones at any time and work with Providers to ensure optimum delivery arrangements. It is mandatory that Providers will operate from a CQC registered location that is within 10 miles of the Somerset border.

## Contract Duration and Indicative Value

Somerset Council intends to enter into a Dynamic Purchasing System (DPS) Agreement for 120 months (10 years) for the provision of these Services.

The DPS commencement date is 1st April 2024.

The DPS will end at the end of the Initial Term on the 31st of March 2024.

The estimated value of this contract is £450,000,000.

## The Requirement

Homecare services in Somerset are determined by the assessed outcomes following a Care Act Assessment and commissioned by Somerset Council to secure personalised homecare when and where the Individual needs it. Providers must be registered with CQC for personal care and comply with their standards for Regulated care. Services should:

* be outcome focused and enhance what the Individual can do for themselves or with help from their support network and will promote independence.
* contribute to the reduction of hospital admissions or long-term care home placements where the Individual has expressed a wish to be cared for within their own home.

The service will support the Individual with varying assessed levels of need to live at home for as long as it is safe and appropriate to do so. In all cases, the focus is on reabling the Individual to optimise their independence through the provision of personal care, support with daily living and with essential domestic tasks.

## Service Aims

The aim of this specification is to set out the expectations of the Homecare service and identify outcomes for those services delivered.

1. To meet the assessed eligible outcomes agreed within the Somerset Council Care and Support Plan.
2. To plan support that enables the Individual to take more responsibility for increasing their independence and reducing dependency on care and support over time.
3. All services must be clearly based on current good practice and reflect specialist and clinical guidance. This includes specialist services for individuals with dementia, mental health, sensory impairment, physical and learning disabilities, substance misuse problems, complex, palliative, and intermediate care.
4. To ensure that any Individual using the service, who needs an advocate has one.
5. To undertake an on-going review of the agreed outcomes and make changes that may increase or decrease the support an Individual needs following an agreed process.
6. To provide the Individual with information about their care and support and tell them how they can give feedback.
7. Work in partnership with others to promote access to other services within the local community.

## Service Standards

The following standards are for Providers, and they set out what Individuals can expect from them:

* Acknowledge that all Care Workers are visitors in Individuals homes and should act accordingly.
* Introduce themselves and have the appropriate ID when they arrive and announce when they are leaving.
* Confirm identify of the client.
* Understand the Individual’s Care and Support Plan, any updates and medicine administration records.
* Meet the Care Certificate standards.
* Be trained to the appropriate level to deliver the outcomes within the Care and Support Plan.
* Always deliver care and support to a high standard.
* Be pleasant and treat the Individual and those around them with dignity and respect.
* Ensure the Individual is comfortable and safe at all times.
* Ensure Services are provided in a way that acknowledges and respects Individuals’ gender, sexual orientation, age, disability, race, religion, culture, lifestyle, marriage and civil partnership, communication needs etc.
* Aim to arrive on time and will always call the Individual to say if they are going to be early or late.
* Provide notification to the Individual if a visit is going to be missed and ensure the Individual will be safe and well in the meantime. If the missed visit is likely to put the Individual at risk, the Provider will contact ASC Duty Team via Somerset Direct immediately.
* To ensure that there are protocols in place to protect staff and individuals in the event of an emergency, such as non-response whilst attending a visit to a client.
* Report any changes needed to the care and support required.
* Make sure at the start of each visit that they agree what support you are assisting with and record it in the Daily Care and Support Plan. A record of any incidents or changes must also be made.
* Check that the Individual is happy with the support provided, they share anything that could be improved and the relevant action taken.
* Will have policies and procedures in place for staff on the safe handling of money and property belonging to the Individual.
* Ensure appliances that have been used are turned off after use and prior to leaving.
* Be aware and respect the Individuals property for example: covering footwear to avoid leaving mud on the carpet.

The following checklist is for the Provider to complete with the Individual:

* The Individual is informed and able to influence the way in which care is provided in a flexible and appropriate way, ensuring that the Service is being responsive to the needs and preferences of the Individual.
* The Individual has an agreed plan that tells them how and when they will be supported with clear outcomes for the period of the support.
* The Individual will have access to their care and support plan with choice and control on how their care and support is provided.
* The Individual knows the name of the Provider and Care Workers supporting them.
* The Individual is made aware that they will be expected to always treat Care Workers with dignity and respect.
* The Individual knows how to contact the Provider when they need to, including out of hours.
* The Individual knows what to expect from the Provider supporting them.
* The Individual can review their Daily Care and Support Plan regularly with the Provider who supports them.
* The Individual is clear that the support will enable them, wherever possible, to increase their independence.
* The Provider is aware of and respects the wishes of the Individual including any Advance Care or escalation plans as well as my wishes for Do Not Attempt Resuscitation (DNAR).

The Service model must be consistent with the five key principles of the Mental Capacity Act 2005 and the associated code of practice, which are:

* Principle 1: A presumption of capacity.
* Principle 2: Individuals being supported to make their own decisions.
* Principle 3: A person is not to be treated as unable to make a decision merely because they make an unwise decision.
* Principle 4: Best interests.
* Principle 5: Less restrictive option.

## Working in Partnership

The Council wishes to work in partnership with Providers in delivering a high-quality comprehensive Care and Support Service. By signing up to a partnership approach the Council and Service Providers are making a commitment to:

* Seek to develop and maintain constructive working relationships with the individual requiring support, carers, families, colleagues, professionals and wider networks.
* Work towards achieving key outcomes and objectives.
* Communicate openly and honestly with each other.
* Share relevant information, expertise and plans.
* Avoid duplication wherever possible.
* Seek to avoid conflicts but, where they arise, to resolve them quickly at a local level wherever possible.

The primary aims of a partnership working approach are to ensure that Individuals do not fall between services and that they receive the maximum level of support for which they are assessed.

Providers will be expected to actively participate in Provider Forums within the Zones. These may be conducted either in person or via Teams.

Where Providers are working alongside other Providers and Services to deliver care and support packages, they will work in partnership to ensure the Services are provided in accordance with the Individual’s Care and Support Plan.

Somerset Council and Providers will work together to find constructive ways of accommodating difficult cases where Somerset Council is endeavouring to meet its statutory obligations.

The success of this service requires joint working to maximise the support provided to the Individual, drawing on the skills of professional care and support staff. The Provider is expected to work in partnership with Multidisciplinary Teams, including but not limited to:

* Adults Social Care
* Integrated Care Board (ICB)
* Acute Trusts and Community Hospital Teams
* Primary Care Networks (PCNs)
* Local Community and Voluntary Sector Providers
* Community Neighbourhood Teams
* Local Community Networks (LCNs)

The Working in Partnership Agreement is specified at Appendix E.

## Service Eligibility

The Services will be provided for Individuals who are Ordinarily Resident in Somerset and have been assessed by Somerset Council as having care and/or support needs that meet the national eligibility criteria as set out by the Care Act 2014. The criteria for eligibility is based on identifying how an Individuals needs affect their wellbeing and as a result of their care needs, they are unable to achieve two or more of the criteria listed below:

* Managing and maintaining nutrition.
* Maintaining personal hygiene.
* Managing toilet needs.
* Being appropriately clothed.
* Being able to make use of your home safely.
* Maintaining a habitable environment.
* Developing and maintaining family or other personal relationships.
* Accessing and engaging in work, training, education, or volunteering.
* Making use of necessary facilities or services in the local community including public transport and recreational facilities or services.
* Carrying out any caring responsibilities an adult has for a child.

A major element in the Care Act 2014 is a requirement to promote an Individuals’ wellbeing and relates to the Individual’s:

* personal dignity (including being treated with respect).
* physical health, mental health, and emotional wellbeing.
* protection from abuse and neglect.
* control over day-to-day life.
* participation in work, education, training, or recreation.
* social and economic wellbeing.
* domestic, family, and personal life.
* suitability of living accommodation.
* access to local community.

## How Care and Support is Ordered

* Adult Social Care will undertake a Care Act Assessment to assess an Individual’s care and support needs which will lead to the production of a Care and Support Plan.
* The Care and Support Plan is received by Somerset Council’s Sourcing Care Service.
* Where double handed care is required, the Provider must have a current copy of the Understanding You G: Moving and handling risk assessment form (UYG form).
* The Sourcing Care Service will send a daily email to Providers which will detail Individual’s waiting for Care and Support in each Zone.
* Providers will contact the Sourcing Care Service expressing an interest in supporting an Individual with their Care and Support Needs.
* The Sourcing Care Service will share an anonymised copy of the Care and Support Plan with the Provider.
* The Provider confirms they can deliver the Care and Support Needs.
* Sourcing Care, in discussion with the Provider, will agree a date for the Care and Support to commence.
* The Sourcing Care Service will award the Care and Support Contract through Proactis.
* In situations where more than one Provider has availability to support an Individual, Somerset Council will take a person-centred approach to the award. The criteria for this will be applied in the following order:
  + Individuals’ choice of Provider.
  + Ability to meet critical/preferred times of visit.
  + Evidence that the Provider has read the Support plan and can meet the outcomes identified.
  + Ability to meet preferred start date.

## Arranging Care and Support

* The Provider will undertake their own assessment of the Individual, based on Somerset Council’s Care and Support Plan, and will create a Care and Support Plan as per CQC regulations.
* The Provider will ensure that they have completed a Risk Assessment (following their Risk Management Process) for staff and Individual’s.
* The Provider will share their Care and Support Plan with Somerset Council’s Sourcing Care Service within 8 weeks.
* The Provider and Somerset Council have responsibility for ensuring the Individual and/or their representative have all the relevant information they require to safely begin the care and support.
* The Care and Support Plan must be developed with the Individual to achieve the agreed outcomes.
* The Provider will be responsible for overseeing the delivery and co-ordination of care towards meeting these outcomes.
* The Provider will review the Individual’s progress and any recommended changes will be made within the parameters of the Trusted provider section of this specification.

## Times of the Service

The service must be available seven days a week between the hours of 7am and 10pm, and where night-time needs have been identified, between 10pm and 7am. The times of delivery should be agreed between the Provider and the Individual as part of the daily care planning. Live in Care is required to be a 24-hour service.

Somerset Council will consider if a task is needed at a specific time, such as the need to be ready for a hospital appointment or the need to take medication at an exact time. Such tasks will be deemed to be ‘time critical’.

If an Individual is assessed by Somerset Council as being ‘time critical’ this will clearly be identified in the Care and Support Plan and the service will be delivered within 10 minutes either side of the specified time.

Where care is not ‘time critical’ there is an acceptable tolerance for Providers to arrive to a scheduled visit either 30 minutes early or late, of the specified time, unless separately agreed between the Individual and Provider.

## Out of Hours

The Provider must ensure that outside of normal office opening hours, that there is a dedicated responsible person(s) with sufficient knowledge and training to be a point of contact for enquiries and emergencies. The Provider will ensure the out of hours contact service has telephone and email capabilities as a minimum. The out of hours contact details must be clearly communicated to those who may need to use them.

## Reviews and Monitoring

The Provider will continuously monitor the needs and outcomes of the Individual and will make appropriate adjustments to the care and support arrangements to reflect changing needs, within the parameters of the Trusted Provider section of this specification. The Provider will inform Somerset Council as soon as possible when outcomes have been met.

The Provider should constantly look for alternative methods of support and opportunities to optimise the delivery of care and support (for example, through the provision of equipment) particularly where individuals have two or more carers.

This may require a referral for an Occupational Therapist assessment specifically where moving and handling is concerned to complete a joint risk assessment.

Temporary increases to the care and support plan can be made for up to 28 days. For further guidance please refer to Trusted Provider section of this specification.

The Provider will notify Somerset Council of missed visits via Somerset Direct at their earliest opportunity. Missed visits will be recorded on the delivery note which accompanies the invoice. The Provider will also notify of regular and/or persistent refusal by the individual to accept care and support.

## Trusted Provider

Temporary Changes (Crisis)

To deliver care and support in a more personalised, outcome-focused way and support Individual’s independence in the most appropriate way, Somerset Council recognises that it is sometimes necessary for Providers to deliver temporary additional or reduced care from the hours specified by the care and support assessment. These changes may be put in place for up to 7 hours per week, for a maximum of two weeks, without seeking agreement from Somerset Council but ensuring you inform Sourcing Care of the temporary increase.

If you consider this change to be long-term, you must refer the Individual for a review by Somerset Council. If a review has not been completed within the two-week allowance, you must seek further authorisation via Sourcing Care to continue delivering the adjusted support.

Changes to delivery of Personal Budget

The Provider may, without reference to Somerset Council, mutually agree permanent day to day changes with the Individual to the delivery of their care and support provision. The changes made still need to meet an assessed need and be within the agreed Personal Budget. In agreeing any such changes, the Provider is required to:

* Inform Somerset Council’s Sourcing Care Service if an Individual’s support needs reduce or increase and cannot be met within the existing Personal Budget and Care and Support Plan.
* Ensure that such changes are in keeping with the objectives of the Care and Support Plan and continue to meet the Individual’s assessed needs and identified outcomes in a safe way.
* Consult Somerset Council if the Individual wishes to use funds within their Personal Budget for an outcome that has not been identified within their Care and Support Plan.
* Update the Individual’s Care and Support Plan so that it remains current and reflects the actual support that is being provided and provide a copy to Somerset Council’s Sourcing Care Service.
* Consult with the Individual’s carer/representative/advocate where they would have substantial difficulty in agreeing such changes, including those who lack mental capacity.

## Moving and Handling – Optimal Handed Care

Where an Individual's care and support needs require two or more Care Workers it will be set out in their Care and Support Plan and the Provider will be required to accommodate this. In such circumstances, both Care Workers should arrive at the Individual’s home in time to work together.

The Provider must cooperate with Somerset Council to optimise packages of care, including minimising the provision of 2:1 support by using individual risk assessments completed jointly between Provider and a Health or Social Care professional.

This could be through the use of specialist moving and handling equipment and techniques provided by the Authority (such as the Optimal Handed Care Programme) or the NHS, where it is considered safe as part of an Individual risk assessment, and the Care Worker has received the necessary training to safely carry out the moving and handling alone, or with a willing and able informal carer.

All care packages involving moving and handling skills from a carer should always be risked assessed and regularly reviewed.

## Live in Care

Live-in care will be commissioned along the same service requirements as Homecare with this section defining the additional requirements for providers delivering a live-in care service.

Live-in care is a personal, full-time care service, usually delivered by a care worker who lives within the individual’s home. The nature of the care and support required will vary depending on individual circumstances.

Intensity of care required will vary according to individual need as laid out in the individual’s care and support plan. If the demands of an individual package exceed the level of care deliverable by a live-in care worker, providers are reliably trusted to communicate this with the commissioner. Packages of care will be reviewed to ensure live-in care continues to be an appropriate means of meeting the individual’s needs.

Care will be delivered to the recipient of the care and support plan only, unless otherwise agreed between Somerset Council and the provider. The care worker is not expected to:

* Prepare meals or carry out tasks for the individual’s family unless specified.
* Clean the whole property.
* Be responsible for the care of pets.
* Undertake laundry and ironing for the individual’s family.
* Complete other tasks within the home that have not previously been agreed by Somerset Council.

Covering Breaks - Where care is required to support the individual during the live-in care worker’s break, commissioners will prioritise work with Live-in care providers who are able to deliver packages of care including required break cover (where the commissioner has ruled out voluntary or family support).

In some instances, it will be necessary to arrange break cover through an alternative Homecare provider on the DPS. The commissioner reserves the right to do this where it is considered a suitable option to meeting an individual’s needs and will communicate this with the provider(s).

Somerset Council are committed to ensuring that care workers are entitled to certain employment rights, and therefore it is the expectation that live-in care workers are directly employed by the live-in care provider.

A live-in care worker should expect to be provided a bed within a private space, for example within a spare bedroom.

The Live in care provider will have a separate agreement with the individual to establish living arrangements for their staff member. This will be in addition to the support identified within the care and support plan.

Instances of absence will be dealt with on a case-by-case basis with the needs of the individual informing decision making. Where the individual being cared for is admitted to hospital the care worker must advise the agency and, in most cases, seek alternative accommodation unless agreed otherwise. A discussion will take place between the commissioner and provider about whether the individual requires continuity of care to facilitate an effective discharge or support the individual with tasks whilst they are in hospital. The provider and Adult Social Care should discuss whether they are requested to retain the service and whether a retainer fee is appropriate, ensuring time frames for any agreements are clear.

On closure of an individual live-in care package, the live-in care worker will need to ensure plans are in place to leave the property at the agreed time of package end.

## Night Working (Waking Nights and Sleep Ins)

In certain circumstances, there may be a requirement for the provision of a night service to ensure the needs of individual are met.

The requirements for these services will be identified during Assessment and will be outlined in the individuals Support Plan.

A bed shall be provided by the individual receiving the service which shall be fit for purpose and of an acceptable standard.

Depending on the needs of the individual, the night service may require the Staff member to remain awake throughout the night or to sleep and only be disturbed as and when assistance is required.

## Compliments, Concerns and Complaints

The Provider shall:

* ensure that it has in place a written compliments and complaints procedure.
* ensure that all Individual’s and their advocates and/or representatives are aware of and have access to the Compliments and Complaints Procedure.
* investigate any complaints, compliments or quality issues that arise in a clear and concise way with all evidence clearly documented.
* maintain a comprehensive log of all complaints made and compliments received. This will be provided to Somerset Council, upon request.
* evidence how they ensure learning from complaints and compliments improves the quality of the Service, acts as an enhancement to the training provided to staff and be used to reinforce good practice.
* acknowledge all complaints and concerns upon receipt and will provide a comprehensive reply.
* ensure they make constructive use of local advocacy services where necessary and specifically to help resolve complaints and problems as early as possible.

As part of its own continuous improvement and development, the Provider will establish mechanisms to ensure on-going feedback is gathered from Individuals and staff, and any changes identified are actioned. Feedback will be shared with Somerset Council to ensure consistent development of the service.

## Termination of Individual Packages

The Provider must notify the Sourcing Care Service via email stating reasons for terminating the care and support, the steps taken to prevent the termination, and the date they will last provide care. This date can be no shorter than 28 calendar days after giving notice to terminate care and support, unless agreed with Somerset Council. The Provider will also notify the Individual.

The Provider will not terminate and withdraw the care and support to an Individual other than in exceptional circumstances and where agreed with Somerset Council. The Provider will retain evidence of all reasonable steps taken to prevent a termination.

If Care and Support is cancelled by Somerset Council or the Individual, prior to the commencement date, the notice period is reduced to 14 calendar days unless otherwise agreed with Somerset Council.

If Care and Support is cancelled by the Provider, prior to the commencement date, there will be no paid notice period unless otherwise agreed with Somerset Council.

On the death of an Individual, the care and support shall terminate immediately with no notice period paid. Notification of death must be reported to the Sourcing Care Service.

## Hospital Admissions and Discharge

Avoidable admissions to hospital will be managed as much as possible with individuals being supported to access the right care at the right time through the Provider’s liaison with health and social care partners.

In the case of hospital admission, the Provider is expected to communicate with the Hospital Social Work Team about the expected discharge date and any change in the Individual’s care and support needs.

The Provider shall notify the Sourcing Care Service the date of an unplanned hospital admission if the stay is for more than 24 hours.

The Provider is expected to keep the care and support open for a period of at least 14 days and Somerset Council will continue to pay the Personal Budget during this period.

Once the Individual has been in hospital for 14 days, an assessment will be made in partnership with the hospital ward and hospital social work team about a likely discharge date. At this stage a decision will be made, by Somerset Council and the Provider, on whether to keep the care and support open beyond the 14 days. Somerset Council will continue to pay the Personal Budget during this additional period.

Whilst Somerset Council continue to pay the Personal Budget, it is expected that Providers will restart the care and support within 48 hours of the individual being Medically fit for Discharge if there has been no significant change in the Individual’s care and support needs. The Provider will notify the Sourcing Care Service of the restart date.

The process for the actions to take once an Individual you support has been admitted to hospital is set out in Appendix D.

## Temporary Breaks in Service

Where an Individual has a planned absence from the service of up to 14 days due to holidays, respite, or any other reason such as appointments, Somerset Council will continue to pay the Personal Budget. Any additional period will be agreed on a case-by-case basis.

## Quality Assurance and Contract Management

Somerset Council will monitor overall performance of the Provider against the Contract, Specification, and associated Schedules. This will involve a focus on performance, quality, and care management. The Provider will submit any necessary and relevant information requested by Somerset Council in relation to this.

Contract review meetings will be held annually during the agreement.

The Provider must comply with Somerset Council’s Adults Social Care Quality Assurance Policy and Contract Management Policy, in addition to the requirements stated within this specification (See Appendix F).

Providers are required to inform the Council of any CQC activity, including but not limited to:

* Change of Registered Manager (copy of CQC notification).
* Inspection has taken place, written feedback at time of inspection, draft and final reports, etc.

This is to be sent to: [asccontractsandqualitymonitoring@somerset.gov.uk](mailto:asccontractsandqualitymonitoring@somerset.gov.uk)

Any organisation legally able to review service quality, including those commissioned to do so on Somerset Councils behalf, must be given every support to talk to Individuals about the Service.

On request, the Provider will make information available to Somerset Council including quality ratings, inspection reports (inc. from third parties), action plans and other documents produced by CQC in the operation of their regulatory function and the Service Provider’s financial accounts including profit and loss accounts.

All Registered Providers must have a Registered Manager employed, and if circumstances change either temporarily or permanently the Provider must send a CQC notification and send a copy to Somerset Council.

The Provider will have the necessary administrative systems in place to ensure services are provided to the required standards. The Provider will ensure that effective business and financial planning, budget monitoring and financial control systems are in place.

**Safeguarding**

The Provider must comply with Somerset Safeguarding Adults Board Joint Adults Safeguarding Policy, in addition to the requirements stated within this specification (See Appendix F). The Provider will have policies and procedures for safeguarding.

The Provider will minimise the risk and likelihood of incidents occurring by:

* Ensuring that staff understand their safeguarding duties as set out in the Care Act 2014.
* Ensuring that staff understand the signs of abuse and raise this with the right person when those signs are noticed.
* Ensuring that Individuals are aware of how to raise safeguarding concerns.
* Ensure that the health, safety, and welfare of Individuals is promoted and protected at all times.
* Maintaining a Safeguarding log to monitor and review incidents, concerns and complaints that have the potential to or have become an abuse or safeguarding concern.
* Having effective means of receiving and acting upon feedback from Individuals.
* Having a whistleblowing policy and procedures in place considering relevant guidance set out by the CQC.
* Working collaboratively with other services, teams, Individuals and agencies in relation to all safeguarding matters and having safeguarding policies that link with the Authority's policies.

## Social Value

Social value is defined through the Public Services (Social Value) Act (2012) which requires all public sector organisations and their suppliers to look beyond the financial cost of a contract to consider how the services they commission and procure can improve the economic, social and environmental wellbeing of an area.

Somerset Council would like to ensure that the Provider contributes as much as possible to the overall wellbeing of our citizens in Somerset. It is therefore expected that the Provider will seek to secure wider social, economic and environmental benefits through the delivery of the service.

Somerset Council's Social Value Policy can be found in Appendix F.

## Contract Development

The Provider will work with Somerset Council to continuously review and improve the delivery of the service and to ensure value for money is achieved. This will take the form of regular Provider Forums and regular meetings with Commissioning. Somerset Council may choose to amend any aspect of this Specification during the life of the Contract. If Somerset Council chooses to do this, they will discuss with the Provider any proposed changes and how they may be implemented. Changing national or local policies and priorities may also necessitate changes to the specification.

The views of Providers, individuals receiving support and their Care Workers will be considered in any review of the Specification and their views will be welcomed at any time during the life of the Contract.

Somerset Council and the Provider will work collaboratively to jointly design and develop the outcomes-based service model. This may require changes to the delivery model throughout the period of the contract and Providers are expected to react to changes in the Health and Social Care Integration Agenda. Outcome based commissioning is to design the delivery of care and support in a way that will assist the Individual to maximise their potential for independence.

As part of the aspiration to enable Providers to deliver care and support more flexibly and in recognition that the Provider is best placed to understand and meet an individual’s changing needs, it is the intention of the Council to delegate responsibility for annual statutory reviews to the Provider. This will support a reduction in duplication of activity, as it is known that at present both Providers and the Council conduct their own annual reviews of an individual’s care and support package.

Providers will work in collaboration with the Council and wider organisations to continuously improve services in relation to systems, advances in technology and processes.

Providers will input into the design and piloting of any new activities to ensure the benefits of a co-produced model which will inform both this Service and future provision. The Council recognises the opportunity to improve the understanding of supply and demand and reserves the right to ask Providers for information, for example about workforce, to help inform such areas.

## Legislation

All services set out in this specification must be delivered in line with legislation relevant to the delivery of the services. This includes all Acts and Regulations, and associated Codes of Practice and Statutory Guidance that cover the provision of care and support services and includes but is not limited to:

* Care Act 2014
* Modern Slavery Act 2015
* Health and Care Act 2022
* The Mental Health Act 1983 (amended 2007)
* The Mental Capacity Act 2005
* Public Interest Disclosure Act 1998
* Equality Act 2010
* Autism Act 2009
* Data Protection Act 2018
* Public Services (Social Value Act) 2012

The Service Provider must comply with all relevant legislation that relates to the operation of their business.

## Independent Advocacy

Somerset Council must involve Individuals in decisions made about them and their care and support. No matter how complex an Individual’s needs, Somerset Council is required to help Individuals express their wishes and feelings, support them in understanding their options and assist them in making their own decisions.

An independent advocate must be appointed to support and represent an Individual where they have substantial difficulty being involved in decisions and there is no appropriate person to support them, and the Individual is required to take part in one or more of the following as described in the Care Act 2014:

* a needs assessment.
* a carer’s assessment.
* the preparation of a care and support or support plan.
* a review of a care and support or support plan.
* a safeguarding enquiry.
* a safeguarding adult review.
* an appeal against a local authority decision under Part 1 of the Care Act (subject to further consultation).

## Key Outcomes

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| **Key Outcome 1 – Support the Individual to achieve the outcomes in their personal Care and Support Plan and to maximise their independence.** | |
| **No.** | **Operational Requirements** |
| 1 | The Provider will carry out their own Assessment with the Individual to aid their delivery of care and support. The Provider will agree details with the Individual of how to achieve outcomes and where applicable will take into consideration any other services that the Individual may already be accessing. |
| 2 | The Provider will comply with any agreed transition plans where there has been previous support by another Provider. |
| 3 | Individual’s and their advocates and/or representatives have access to their Care and Support Plan. |
| 5 | Continuously review and record the achievement of, and progress towards outcomes, enabling the Individual to gain greater independence and contribute to informing annual reviews. |
| 6 | Work with families and other services so that they understand the approach to maximising independence. |
| 7 | Support Individuals to be able to carry out their caring responsibilities for any dependants, where appropriate. |

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| **Key Outcome 2 – Promote the independence of Individuals through an enabling approach.** | |
| **No.** | **Operational Requirements** |
| 1 | Support Individuals to gain/regain skills and confidence to achieve greater independence in their day to day living. |
| 2 | Support Individuals to remain in the community and prevent, reduce, or delay the need for more intensive care and support. |
| 3 | Support Individuals with rehabilitation, reablement and recovery. |
| 4 | Support Individuals to access education, training, and employment opportunities. |
| 5 | Motivate and enable Individuals to develop or maintain skills related to activities of daily living, for example washing, dressing, feeding, toileting, bathing, and mobility. |
| 6 | Encourage Individuals to acquire or maintain skills relating to areas of non-personal care, for example shopping, cooking, and cleaning. |
| 7 | Support Individuals to access community resources and encourage best use of assistive technology, such as community equipment and telecare to support activities of daily living. |
| 8 | Support Individuals to develop problem solving skills and coping strategies. |

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| **Key Outcome 3 – Support Individuals to engage with family, friends, their interests, and community services.** | |
| **No.** | **Operational Requirements** |
| 1 | Support Individuals to maintain all relationships that are important to them. |
| 2 | Encourage and support Individuals to participate in their community and to access community resources as desired. |
| 3 | Support Individuals to engage with hobbies/interests. |
| 4 | Support Individuals to access and contribute to their wider community as desired. |
| 5 | Support Individuals to identify and report hate crime and to develop approaches to minimise the impact. |

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| **Key Outcome 4 – Support Individuals to improve their health and wellbeing.** | |
| **No.** | **Operational Requirements** |
| 1 | Support Individuals to maintain their health and personal hygiene. |
| 2 | Promote healthy eating and hydration with Individuals. |
| 3 | Support Individuals to access dentists, opticians, chiropodists, and other healthcare services. |
| 4 | Support Individuals to comply with medication regimes, including supporting self-administration. This includes having a medicines management policy and procedures in place. See Appendix F for NICE guidance. |
| 5 | Encourage Individuals to use self-care resources for long term health conditions. |
| 6 | Support Individuals to make informed decisions about the management of their care and treatment using appropriate information, including risks and benefits. |
| 7 | Support the early diagnosis and access to treatment for physical and mental health conditions. |
| 8 | Support the Individual to alleviate loneliness and isolation. |
| 9 | Ensure staff recognise the importance of risk assessments and the concepts of hazard, risk, and control measures, understanding that risks can be minimised but not eliminated. |
| 10 | Ensure staff know where to report and how to action their concerns, should an Individual’s circumstances change in a way that may require a risk assessment review. |
| 11 | Support Individuals and work with families to promote their understanding of key hazards and control measures. |

## Appendices

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| Appendix A | Home Care Zone Information |  |
| Appendix B | Indicative Hours per Zone |  |
| Appendix C | Finance Schedule |  |
| Appendix D | Hospital Admission and Discharge |  |
| Appendix E | Working in Partnership Agreement |  |
| Appendix F | Polices, Guidance and Processes |  |