



Gloucestershire Health and Social Care Framework Engagement Summary June 2023

Introduction

The existing Gloucestershire Health and Social Care Framework will end on 31st March 2024. We will need to put into place suitable contractual arrangements for 1st April 2024 and have undertaken extensive engagement work as part of the commissioning review of the current contract and processes. We will evaluate the effectiveness with key stakeholders to include;

- Individuals
- Family Carers
- User-Led Organisations
- External Providers
- Gloucestershire Care Providers Association
- Operational Teams
- Commissioners

Learning from the engagement will inform the proposals and plans for any new procurement strategy and contracting arrangements.

Aims of the Engagement

1. To evaluate the effectiveness of the contract Terms and Conditions to include the various Service Specifications
 - a. Do the terms work for the purchasers and the providers?
 - b. Are the specifications clear and do they define the services well enough?
2. To test whether the processes associated with the running of the framework (e.g. for sourcing individual packages of care and support) work well
 - a. Do providers actively engage in the process and understand what they need to do?
 - b. Is the process delivering the required outcomes for operational teams?
3. To review the procurement process and the support offered to providers
 - a. Are there any areas we need to make clearer or offer more support with?
 - b. Is the process as efficient as it can be?

Engagement Methods

The engagement has been inclusive and accessible with a variety of ways for stakeholders to give feedback via:

- Agenda items and discussion in established meetings and forums
- Electronic Surveys (email)
- Online Surveys
- Individual appointments for discussions as requested (in person, telephone or virtual)
- Drop-in events at public venues across the County
- Smaller Focus Groups – established to address issues raised in early engagement

Where necessary we have taken advice and guidance from User-Led organisations on the best way to engage using easy-read communication where required.

Individuals and Family Carers

We attended the following Partnership Board meetings to engage with individuals and family carers;

- Learning Disability,
- Physical Disability & Sensory Impairment,
- Mental Health,
- Autism
- Carers
- Collaborative Partnership Board

We posed semi-structured questions and facilitated break-out room discussions to collect views on areas where services could be improved and prompted attendees to be solutions focussed. We analysed the feedback to identify key themes and discussed with the wider project team to understand where the commissioning model, procurement, contract and associated processes may need to be changed to support service improvements.

Individuals and Carers identified potential issues with additional training to support complex conditions such as Acquired Brain Injury, Myalgic Encephalomyelitis, Complex Emotional Needs, sensory needs and neurodiversity. Commissioners are developing a resource to share with providers on specialised training available in Gloucestershire and will update contract specifications accordingly. Colleagues in the Operational teams can complete checks on the relevant provider training prior to facilitating packages of support. The tender will include a request for the providers training matrix and commissioners will adapt the way we share provider lists with operational teams and brokers to ensure specialist training is captured to better match individuals with providers.

Individuals and Carers across the Partnership Boards cited accessible communication as an issue in services – some people thought paid support workers needed to spend more time learning how to communicate effectively so they can better understand the wishes and preferences of the people they support. This in turn would improve the support generally. When asked what would improve this there were several suggestions as follows:

- Improved training and resources for paid support workers
- More time allowed for getting to know the individual supporting
- Providers could build better links with community resources and voluntary organisations and groups to improve their knowledge but also to link people in with local opportunities
- Providers could increase multi-agency working to improve their knowledge and understanding

Commissioners will work with the user-led organisations to co-produce questions for the procurement to include robust evaluation criteria.

LGBT+

We wanted to engage with individuals from LGBT+ communities who have knowledge of the Gloucestershire Health and Social Care Frameworks to see if there are areas of learning for service improvement.

We engaged via PRISM (the staff network for the council and Gloucester City Council) and circulated an online survey to gather views on the following:

1. What would make a care provider excellent in supporting people?
 2. What should Providers consider when delivering an inclusive service?
 3. What do you think Care Providers could do differently to provide an inclusive service?
- The survey responses stated that providers need to be considerate of every person's identity and understand any health inequalities LGBT+ individuals may face.
 - Respondents said providers need to be aware of the LGBT Action Plan 2018.
 - Respondents suggested that recruitment processes need to be centred around values
 - Respondents asked commissioners to check that providers have clear policies for staff
 - Respondents stated the importance of training on Equalities, Diversity and Inclusion so paid support workers can improve their knowledge beyond their own lived experience and stated there needs to be an emphasis on these issues in their day to day practice to include opportunities for reflective discussion with peers and through supervisions.
 - The LGBT+ network feel that the care sector could use more inclusive information with inclusive language. This would help individuals to feel welcome and comfortable to receive care services.

The procurement process will include checks on the relevant policies and includes questions and criteria on values based recruitment. The contract will stipulate the training and policy requirements, and this will be contract monitored robustly.

BAME Communities

We have completed a review of engagement done across commissioning areas to identify key themes which can also be addressed through questions in the procurement, robust evaluation, clear expectations for provider training and ongoing monitoring as follows:

- Accessible information on services that are available
- Accessible advocacy
- Inequality of healthcare experiences

External Providers

Engagement with providers is not limited to a single exercise and we have been discussing potential arrangements for after the current framework ends with the market at the quarterly forums, via the monthly newsletters and with the GCPA. We facilitated drop-in events across the county to provide opportunities for individual discussions with providers – these were successful and well-attended. We have used an online survey to gather the views of external providers as it enables confidential completion, can be done remotely and in a provider's own time and delivers data that is easily analysed. Summarised results and key findings (which have been presented back to the provider forum for discussion) are below:

- 75% of providers whose tender submission was unsuccessful did not attend any of the information events prior to application. The events organised by commissioners are useful and provide valuable support on the process.
- 48% of providers surveyed thought the tender instructions and documentations were easy to follow. Commissioners will review the tender documentation with colleagues in procurement to streamline and simplify where this is possible.
- 90% of providers surveyed said the Q&A process within the procurement was helpful.
- Providers found the ICT/Information Security documentation challenging. There are new requirements in the next procurement – commissioners will ensure ICT colleagues are available to support at the information events.
- 74% of providers surveyed said they would like a contract-length that is longer than 4 years. Commissioners propose a 6-years plus 2-years contract term.
- Providers surveyed preferred face to face meetings with commissioners and found sometimes replies were not timely. The drop in sessions held for providers were well received and commissioners plan to hold these twice a year to give opportunities for more face to face meetings. The contract monitoring process that underpins the contract will include the option for face to face meetings.
- Providers reported a lack of clarity around the definition of complex care. Commissioners facilitated a focus group to look at this issue in detail which will inform the service specification wording.
- Providers reported that they need timely feedback when they are not chosen to support an individual.
- Providers wanted clear guidance on the Brokerage process and the referral routes. This will be developed and form part of the tender pack.
- Providers stated a wish for more detailed information on individuals so that they can make decisions on whether their organisation is a good match for the person. Commissioners will work with colleagues in Operations and Brokerage to address and standardise as much as possible.
- Providers would like to receive Individual Service Contracts quickly following agreement. Improved systems will support a more efficient process for the issue and return of contracts.

Commissioners and Operational Teams

We have completed semi-structured interviews with colleagues and used an online survey to ascertain the effectiveness of the contracting arrangements and to ask for suggested improvements with a specific focus on the processes associated with the framework and the paragraphs and clauses in the contract itself. Commissioners have also been asked to collate a log of issues and queries that have arisen within the last 12 months. The following issues are highlighted for improvement in any new arrangements:

- Better understanding of complex needs by those supporting the commissioning of individual packages
- More information about the providers on the framework for operational teams

Feedback from internal stakeholders about the framework was positive. The uniform terms and conditions are helpful in ensuring clear contract management that is equitable and transparent. Uniform pricing has saved resource in negotiating costs and provides a clear and fair means to agreeing packages that allows quality of services to become the focus.