



REPORT TITLE: Recommissioning of an Expert by Experience (EBE) led Quality Assurance (QA) Programme for health & social care commissioned services for people with disabilities.

Cabinet Date	22 nd September 2021
Cabinet Member	Cllr Carole Allaway-Martin, Adult Social Care Commissioning
Key Decision	Yes
Purpose of Report	To seek approval of commissioning plans that will allow for the continued provision of an Expert by Experience (EBE) led Quality Assurance service for health and social care services provided for people with disabilities from April 2022.
Recommendations	<p>That Cabinet delegates authority to the Executive Director of Adult Social Care and Public Health, in consultation with the Cabinet Member for Adult Social Care Commissioning to:</p> <ol style="list-style-type: none">1.<ol style="list-style-type: none">a) Conduct a competitive procurement process in respect of a contract for the supply of Expert by Experience (EBE) led quality checking service for health and social care commissioned support for people with disabilities (learning disabilities, physical disabilities, mental health and autism) for an initial period of three years and include an option to extend its term for a further period of up to two years;b) Upon conclusion of the tender process award and enter into contract arrangements with the preferred tenderer; andc) Determine whether to exercise the option to extend the contract for a further period of not more than two years on the expiry of the initial three-year term.

<p>Reasons for recommendations</p>	<p>Existing contracts for the Expert by Experience (EBE) led Quality Assurance (QA) programme are coming to an end in April 2022 and will need to be retendered. The opportunity has been taken to review the current arrangements with a view to delivering a more inclusive and consistent approaches across Gloucestershire, ensuring the voices of individuals receiving support are heard. This service is considered an integral part of the ongoing success, relevance and safety of the services commissioned by the Council.</p> <p>The Care Act 2014 requires that local authorities help develop a market that delivers a wide range of sustainable high-quality care & support services that will be available for their communities. The Act also states that when buying and arranging services, local authorities must consider how they may affect an individual's wellbeing.</p> <p>An EBE-led quality service for those with disabilities ensures the Local Authority continues to implement the recommendations made by Government following the Winterbourne View Serious Case Review and Enquiry. Ensuring the voices of individuals receiving support are heard and considered is an integral part of the ongoing success, relevance and safety of the services we commission.</p> <p>Approval will allow for the Expert by Experience (EBE) led Quality Assurance (QA) service to continue and alignment of the three current contracts into a single contract for reasons mentioned in this report, providing flexibility between disciplines, aligning operational processes and creating a more streamlined contract management process. Consistency across the three disciplines will be reinforced which in turn will deliver a more standardised reporting and action planning process for services, reducing inequalities between client groups.</p>
<p>Resource Implications</p>	<p>The combined annual value of the three current contracts is £160,000.</p> <p>The estimated value of the intended service is £800,000 over the potential five-year contract period.</p> <p>Funding is available from within existing budgets. There will be no additional impact on the current level of spend as a result of the recommendations set out in this report.</p> <p>Project management and support resources will be provided from within existing support teams.</p>

Background Documents	<p>The Care Act 2014</p> <p>NHS Long Term Plan</p> <p>Winterbourne View – Time for Change</p> <p>Winterbourne View – Government Response</p> <p>Adult Single Programme Management Team briefing paper – ‘Quality Assurance Jan 2020’</p>
Statutory Authority	<p>The Care Act 2014</p>
Divisional Councillor(s)	<p>All</p>
Officer	<p>Name: Kim Forey - Director of Integration</p> <p>Tel. no: 01452 583799</p> <p>Email: kimforey@nhs.net</p>
Timeline	<p>Cabinet Approval: September 2021</p> <p>Contract Start: April 2022</p>

Background

1. Experts by Experience (EBE) are individuals who have direct experience of living with a disability or long-term condition and who may receive care and support services to maintain their independence.
2. The EBE led Quality Assurance (QA) service is one of three work streams forming the Integrated Commissioning QA programme. The programme provides oversight, support and scrutiny across all social care services commissioned for individuals with learning disabilities, physical disabilities, mental health issues and/or autism. This includes the provision commissioned via the Health & Social Care Framework including joint funded arrangements (via s256 agreements with the CCG), residential care homes, services provided by Continuing Health Care (CHC), Assessment & Treatment Units (ATU), day opportunities, respite care and GCC in-house services.
3. In quantitative terms this scope of the programme extends to approximately 387 commissioned care and support organisations that support 2,487 individuals at an annual cost of circa £101,741,000 per year.
4. The programme was part of the Joint Commissioning Partnership's response to the Winterbourne View enquiry and is comprised as follows:

4.1 Integrated Commissioning Quality Team

A small team of 2FTE front line Quality Officers plus 1FTE Lead Officer and 0.8FTE Project Support.

The team are intelligence-led, often utilised as a point of escalation where quality concerns have been raised. The team work closely with organisations to provide support and guidance to ensure service provision is of a satisfactory standard in line with national and local policy, contracts and Quality Assurance Frameworks (QAFs).

All Performance Improvement Plans (PIPs) that are implemented in line with the escalation process within the Health & Social Care Framework contracts are developed, implemented and completed by this team.

4.2 Quality Compass and Quality Star software

Quality Compass is a further development of the original Quality 360 survey software developed and pioneered by the QA programme in 2011. The software collects the views from an individual's circle of support about the care and support service(s) they receive. The metrics collected are used to generate a report, which includes recommendations for improvement as well as benchmarking data, and this is published to the care and support provider.

Quality Star provides:

- Quality metrics that integrate all available quality information.

- Link to CQC inspection reports and results.
- Ability to upload reports/data from approved third party sources i.e. User Led Organisation (ULO).
- Additional narrative by internal users.
- Customisable and interactive reporting (including mapping).

4.3 Expert by Experience led Quality Reviews

The EBE service offers the opportunity for individuals receiving care and support services to be able to provide feedback in a way they feel comfortable to do so, in a peer-to-peer environment with the appropriate tools to be able to communicate in the way that best suits them. For those with significant communication difficulties or those that may not feel comfortable communicating their views directly to an EBE, an observational model of assurance is used thus ensuring everyone has their voice represented.

Offering the opportunity for people to share information with peers has proven to engender a higher participation and confidence level in the QA service.

5. The EBE service has delivered many positive outcomes since the inception of the programme in 2011:
 - Increased participation of individuals in quality reviews
 - Increased response rate of individuals and their circle of support to QA surveys
 - Disclosures of abuse/wrongdoing that would not have otherwise been reported
 - Opportunities for employment
 - EBE's provide inspiration first-hand to others with disabilities that the pursuit of employment is an achievable goal

6. Integrated Commissioning have worked closely alongside the current provider over the past 18 months to review the delivery model and supporting frameworks. Frameworks focus on five co-produced key areas of enquiry:
 - I am healthy
 - I am safe
 - I matter
 - I have good relationships
 - I choose

The content within each of these sections is tailored depending on the client group and service type i.e. residential, ATU, supported living. This ensures that service/client group specific issues are checked and addressed, for example that individuals with an LD receive an Annual Health Check from their GP or those with specific health conditions are supported by appropriately trained staff.

Options

Option 1: Recommission.

7. This is the recommended option.

The EBE service forms an integral part of the QA programme which relies on hearing the views of individuals who are receiving support services. The Council has a responsibility to assure itself and the individuals it supports that the services commissioned are of a good standard, as deemed by those who access them.

EBEs are respected members in their field both professionally and by their peers. By utilising the skills of those with direct experience of disability and of receiving care and support services, we engender a supportive and collaborative approach which increases participation of individuals and the volume and quality of feedback received.

A revised specification will be developed to encompass feedback from key stakeholders, this will draw on the successes of the current model whilst ensuring identified opportunities for further development are realised.

It is noted that the new contractual arrangements may include TUPE conditions as part of any service transfer.

Option 2: De-commission.

8. This option is not recommended.

The EBE service is a valuable resource that supports the QA programme in ensuring commissioned services are supported to develop and improve whilst also enabling individuals to convey their views to others with lived experience about the care and support they receive.

Allowing this service to cease will significantly reduce oversight within commissioned services.

Option 3: Transfer to an in-house provision

9. This option is not recommended.

Having the EBE service outside of the commissioning partnership provides an element of impartiality which would not be achieved should the service become part of the local authority. This impartiality can provide both a different perspective to quality improvement but also engender a level of openness and candidness we may not experience as social care professionals.

Being an EBE employed by a User Led Organisation (ULO) provides the benefit of comprehensive peer support from others working across a variety of other user-led projects plus access to other employment opportunities which may not be possible within the LA.

Risks

10. Should the EBE service not continue it would lead to a lack of support and oversight within commissioned services, thus increasing the risk of sub-standard services going unnoticed and not receiving the support they need to deliver provision at an acceptable standard. This in turn places vulnerable individuals, often with complex needs; at risk should they not be receiving support which is good enough to meet their assessed needs.

The internal GCC Quality Assurance team would not be able to absorb the workload of the EBE service due to limited capacity.

Experts by Experience and other staff members currently employed by the service would lose their employment if the service were to cease, this has been highlighted as a reputational risk to GCC.

Financial implications

11. Financial resource to cover the cost of this service is available within existing budgets.

There will be no financial impact on the current level of spending solely as a result of the recommendations set out in this report.

Climate change implications

12. Carbon Emissions Implications?	Neutral
Vulnerable to climate change?	No

Equality implications

13. Has an Equalities Impact Assessment (EIA) been completed? Yes

Cabinet Members should read and consider the Equalities Impact Assessment in order to satisfy themselves as decision makers that due regard has been given.

The Quality Checking services support opportunities for individuals with disabilities to gain and sustain meaningful employment.

This current model ensures consistency of Quality Checking across LD, PD and MH & Autism.

Data Protection Impact Assessment (DPIA) implications

14. DPIA identified as required. Any DPIA implications associated with this project have been identified alongside colleagues from the Information Management Service (IMS) and included within the project risk register as appropriate.

Social value implications

15. Any newly awarded contract will contain a requirement for the provider to demonstrate social value. It will focus on employment opportunities, engagement with the local community and improving the lives and outcomes of individuals.

A question relating to social value will also be included as part of the tender questionnaire.

Consultation feedback

Consultee – Care and Support Providers

16. A survey circulated to a group of care and support providers who had recently received (during COVID restrictions so some work was completed remotely) a quality check via the EBE service returned the following feedback:

“It worked well”.

“Really good given our current circumstances (lockdown restrictions)”.

“Format was perfectly acceptable”.

“Good process, easy to respond and provide evidence”.

“The format worked well. It was good to talk and clarify that we had made all the amendments needed”.

When asked if the EBE service shared any new ideas.

“Yes, exploring a wider range of activities for the people we support”.

“We found the report we got back after our initial audit very helpful. In light of the report, we were happy to make some changes and were grateful for the insight”.

“The quality team was very understanding and very keen to share their ideas”.

“Yes, helped us look at the service objectively from another perspective”.

“Nothing in addition to what we are already doing”.

“They offered info about some training that was really useful. They also gave some ideas of goals we could be setting people during lockdown”.

When asked how the EBE service has impacted or changed the lives of people supported.

“It is a very person centred approach and we have been able to build on the areas we already had in place”.

“It’s allowed the care provider to get the people we support more involved with their thoughts, feelings and aspirations”.

“It helped one service user broaden her relationships with other staff members”.

“We are now providing access to online family hub to a lot more clients’ next of kin”.

“It is always good to have fresh eyes looking at what is in place and giving advice on areas of improvement or changes that could be offered. It is hoped these new ideas will add more fulfilment to the lives of the people we support”.

Consultee - Experts by Experience

17. “I feel people are being open with us, we are getting honest views from people about staff”

“Some people accept things the way they are, they feel ‘something is better than nothing’ – low standards”.

“We get the information we want, but in a more subtle way”.

“It’s good to speak to staff and managers – are they saying the same things?”

“Zoom has been better for me as a wheelchair user Expert by Experience”.

18. Additional Consultees:

Social Care Operations Teams, GCC

Strategic Procurement, GCC

Legal Services, GCC

Strategic Finance, GCC

Information Management Service, GCC

Cabinet Member - Cllr Williams

Officer recommendations

19. That Cabinet approve the recommendations as set out in this report.

Performance Management/Follow-up

20. The Integrated Disabilities Commissioning Hub have established quality and contract management frameworks, compliance with which will be a requirement of any contract awarded. Work will be done to ensure that any service-specific key performance indicators are both informative and proportionate.

21. The contract will be underpinned by robust and peer led performance monitoring in partnership with colleagues in health, social care operations, commissioning and safeguarding.