

Service users

1. Previous analysis of home service users records in Southwark found:
 - 64% of those who receive care are older people – which is characterised by higher than London and national averages of people living alone and with lower levels of income.
 - People with Learning Disability, Physical Disability or with Mental Health problems make up the other 36%. A significant proportion of these people are in “middle age”. Direct Payment take up tends to be higher amongst younger adults.
 - Over 65% of those aged 65 or over are women. This is expected given the natural longer life expectancy for women as opposed to men.
 - 37% of those aged 65 or over receiving care are from BME groups. This is higher than the proportion of BME older people identified in the 2011 census (19%) and is thought to be linked primarily to economic inequalities. The largest BME group tend to be from African Caribbean communities.
2. The client record systems used by adult social care do not routinely record faith and religion, sexuality, gender re assignment and marriage and civil partnership. However it is recognised that these groups also use home care, and there will be requirements for care at home providers to ensure that particular characteristic requirements for these population(s) are sensitively and routinely addressed. The care at home providers offer adult services only. Children home care will continue to be purchased under separate contractual arrangements from providers who require an additional CQC registration status to adult providers.
3. Within its diversity, Southwark home care service users include a number of distinct cultural, ethnic and religious communities which have been generally regarded as ‘hard to reach’. In the provision of home care there are occasionally particular linguistic needs that may be more challenging to meet. For example a relatively small number of people living with more advanced forms of dementia may lose the ability to speak a second language (English) and revert to only their born mother tongue. There are also elderly and disabled people who do not possess an understanding of English. There are currently around ten service users who are using Service Level Agreement (spot) providers due to their specialist linguistic requirements. These currently relate exclusively to people from Chinese speaking and South Asian communities.
4. In order to ensure parity of care between user groups and across age categories and allow for effective strategic planning and partnerships within the wider Local Care Network community, the council’s requirements in this area were robustly tested through the evaluation methodology. Due to the wide range of different service user demographic factors, the council took an informed and considered view that it would not procure “specialist” home care that specifically targeted particular client groups or people living with specific conditions. Instead given the level of diversity, all care at home providers would be required to work with a range of different client groups with different levels of needs, values and beliefs.
5. As a result, the tender methodology tested how providers would work with service users with varying and complex levels of vulnerability, as well as their understanding of the opportunities and challenges working in such a diverse area as Southwark. The service user presentation which formed part of the evaluation methodology, specifically addressed many of these issues emphasising the importance of communication to

ensure that a quality service can be maintained that respects difference. The service user evaluation panel itself was made up of a diverse group of local residents with a lived experience of receipt of state funded home care. These areas were weighted relatively highly in the quality evaluation scoring.

6. Evidence from service user pre procurement engagement and investigations into “Quality Risk Alerts” in existing home care arrangements illustrate that poorer quality care often is delivered as a result of frequent changes of personnel to a service users’ care worker team. Where the SECC has been applied, it has been shown to improve staff retention with existing incumbent providers in the borough.

Workforce

7. It is also noted that a disproportionate proportion of the homecare work force comes from a Black or Minority Ethnic background that speak a wide range of languages and themselves reflect and understand the religious and cultural requirements of our local service user population(s).
8. Older people make up the bulk of the service users and this proportion of the Southwark population is predominantly white and long term (often life time) residents of the borough. It is noted that this can result in complex caring situations and on rare occasions challenging relationships between care workers and people using the service. The work the council has been doing with both care workers and service users, found that communication is key. Between the care worker and the client/service user and the company office and the client (ie for the office to make contact immediately where a carer is running late for an appointment) Therefore there is great emphasis both within the service specification and through the tender evaluation that lifestyle/beliefs and communication need to be particularly sensitively handled.
9. The “About Me and My Home Hare schedule” of the service specification (Appendix 1) alongside the expectation for providers to engage more with the local community and voluntary sector will nourish the quality of all care giving relationships covered by these contracts.
10. Providers in Southwark sometimes find it more difficult to attract care workers from Chinese and other minority (within a Southwark context) Asian communities. In August there were 7 service users receiving specialist care packages commissioned from two separate specialist Chinese first language organisations, with a further two service users being supported by a separate specialist Asian language speaking care agency.
11. Similarly care at home providers will be encouraged to work in partnership with specialist linguistic and cultural providers and organisations to support the small number of users whose needs may not be addressed through mainstream provision.
12. Where in the future (and potentially for these service users currently receiving specialist linguistic support) these cannot be accommodated by the care at home providers workforce, clients will be supported to take up direct payment options to pay for appropriate first language care workers.
13. When the council introduced the SECC in 2013, an analysis of the directly contracted care work force who would benefit from the charter found that 82% were women and 66% were from BME communities and they disproportionately lived in Southwark. Likewise the SECC places an emphasis upon training and professional recognition of the work force. There is no indication of the work force profile for the SME organisations

affected are any different. So the extension of the charter to this group of care workers will have a wholly positive impact upon both the pay and conditions of the whole care at home work force and subsequently a positive impact upon the quality of the care received by the service users. Currently just fewer than 50% of the users receiving general home care are supported through spot arrangements.

Providers

14. It is noted that a number of SME home care private sector businesses who are either based in Southwark or in local boroughs such as Bromley who provide services under Service Level Agreements arrangements, were unsuccessful in the tender process. The council is aware that these include a number of BME owned or led businesses. However Supreme and Carewatch Care Services Ltd are BME owned / managed businesses or franchisee organisations.
15. The lotting and procurement strategy ensured that there were opportunities for smaller sized operations to apply; with tender documentation methodology clear and clarifications provided to tenderers as required. Such organisations will still have opportunities to continue to work with clients in receipt of direct payments as well as self funders in Southwark following care at home contracts going live. The council will also seek to support these organisations develop an alternative business model and offer services to self funders and direct payment clients.
16. There was a strong requirement for tenderers to demonstrate a commitment to operational and strategic partnership with the council, the wider health and social care economy and the local community and voluntary sector. All of which are being facilitated primarily through the Local Care Networks. This is intended to ensure that there is a more holistic approach to supporting the vulnerable service user group with a greater emphasis on outcomes as opposed to outputs.

Conclusion

17. Taking all relevant factors into account the council is satisfied that the outcome of this procurement will have an overall positive impact upon the people who use and deliver home care services in Southwark.