

Appendix 3c - EXTRA CARE SPECIFICATION

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1.0 Introduction

- 1.1. Extra care housing provides safe and secure self-contained accommodation for older adults who require varying levels of care and support to enable them to live independently in a home environment.
- 1.2. The Service is the delivery of care and support within an extra care housing setting including:
- Onsite staff to provide Background Care and Support and Emergency Response Services. This service benefits all Individuals (tenants and leaseholders) and is not allocated to any one individual.

- b. Planned Care for Individuals who have chosen to have their assessed care needs met by the on-site Service Provider.
- 1.3. The Service is to be provided by on-site waking staff every day, including on weekends and bank holidays.
- 1.4. The purpose of the Service is to enable people with a range of care and support needs to access care at any time, thereby providing a home for life. The Service Provider is expected to ensure adequate levels of care are provided at all times to ensure the successful delivery of the Service.
- 1.5. The Service Provider will work with the Third Party Housing Provider ("Landlord") to ensure that the Individuals receive an integrated and co-ordinated service. It should be noted that the provision of housing is not part of the Service required. Housing is provided by a landlord.
- 1.6. The Service is therefore comprised of: -
 - a. Background Care and Support and Emergency Response provided on a Block Arrangement; and
 - b. Planned Care provided as Spot Commissions Care
- 1.7. The range of Planned Care tasks to be delivered are set out in the Core Specification. The tasks which may be performed during the delivery of the services primarily fall under section 3.5.1, 3.5.2, 3.5.3 and 3.5.4 of the Core Specification. Please note that the range of care tasks is not an exhaustive list and is subject to the following:
 - a. The care needs of Individuals as detailed within Individual Care and Support Plans; and
 - b. The requirements of the Authority as reasonably notified to the Service Provider from time to time.

2.0 Key Objectives, Principles and Service Outcomes

2.1. Objectives

- 2.1.1. The objectives of the Extra Care Service are:
 - a. To provide a home for life and a viable alternative to residential care.
 - b. To promote independence and improve health and wellbeing, including reducing social isolation.
 - c. To provide ongoing care and support which delivers cost savings.
 - d. To provide a community resource for residents living within the Scheme and for the wider neighbourhood.
 - e. To benefit the wider housing market through regeneration and releasing family housing.
 - f. To reduce the number of inappropriate admissions to hospital and to assist with discharge from hospital.

2.2. Key Principles

2.2.1. The key principles of this service are laid out in Section 3.3 of the Core Specification.

2.3. Service Outcomes

2.3.1. The primary service outcomes for Extra Care are laid out in Section 3.4 of the Core Specification. Additional service outcomes relating to Extra Care Schemes are:

- a. To Promote positive and professional relationships with on-site partners (Landlord) and any other stakeholders
- b. To work with the Authority to explore, innovate and develop creative solutions that will enhance independence and best practice within Extra Care Schemes.

3.0 Regulatory and Legal

3.1. The regulatory framework for Extra Care is laid out in Section 3.1 of the Core Specification.

4.0 Referrals and Eligibility for the Services

4.1. Individuals will be referred to the Extra Care service in line with the Allocations Policy for each specific Scheme.

5.0 Service Availability / Capacity

5.1. The Background Care and Support and Emergency Response Service is to be available 24 hours a day, 7 days a week, and 365 days per year.

5.2. The number of hours of Planned Care delivered will need to be dynamic depending on increases or reductions to the needs of tenants. There is no guarantee of the numbers of Planned Care hours that the Service Providers will be required to deliver.

5.3. The Service Provider must ensure that there is adequate staff on site at all times to meet the requirements of the Service. This will vary across Schemes in terms of minimum staffing structures and will be set out in individual Scheme Call-Off documentation. All requirements are subject to review by the Authority.

5.4. The Service Provider will have an appropriate system in place for communicating information internally, and with on-site partners, at the beginning and end of shifts.

6.0 Background Care and Support and Emergency Response

6.1. This element of this Agreement represents the minimum requirement of the Service.

- 6.2. The Background Care and Support and Emergency Response shall be provided 24 hours per day, 365 days a year.
- 6.3. The Service Provider will provide Background Care and Support and Emergency Response to all tenants, irrespective of whether they have an assessed care need.
- 6.4. The Service Provider will maintain a central record of key information about all Individuals, including those with no eligible care needs or those who have chosen a different service provider not on this Agreement to meet their Planned Care needs. This information will be made available where appropriate to the community alarm/telecare provider and the Service Provider of the Planned Care when this is not the on-site Service Provider.
- 6.5. Where an Individual has chosen to have their Planned Care, needs met by a different service provider(s) not on this Agreement, then the Service Provider must ensure that appropriate sharing of information takes place between the Service and the other service provider(s) of the Planned Care. This would include ensuring that the central key information record and the care notes left in the Individual's flat are kept up to date, as both organisations will be involved in supporting the Individual.
- 6.6. In order to ensure that records are up to date and there is an understanding of the needs of all Individuals, a review of the information held, and a basic assessment of needs must take place no later than every 12 months or more often if circumstances require. This will include agreeing the frequency for contact for those Individuals receiving no Planned Care.
- 6.7. In order to minimise the cost of the Service and the charges paid by tenants/leaseholders, the Background Care and Support and Emergency Response will be delivered by staff funded through a combination of block funding, Core Charge (in specific Schemes only) and hybrid funding arrangements:
 - a. Block Contract arrangement: The Block arrangement funding only contributes to the cost of the Background Care and Support and Emergency Response.
 - b. Spot Commissioned Care Packages: Any Individual with eligible care needs may choose to receive their Planned Care and Support from the onsite Service Provider. This would be commissioned via a Spot Package of Care. Service Providers may be required to deliver Background Care and Support and Emergency Hours under the following contract arrangements and will be refined at Call-Off within the Call-Off documents:
 - I. Block Contract arrangements are paid directly by the Authority to the Service Provider and are intended to fund a required number of

hours per day (determined within the Call-Off documentation) of Background Care and Support for a particular Scheme.

- II. Core Charge arrangements are intended to fund a required numbers of hours per day (determined within the Call-Off documentation) of Background Care and Support for a particular Scheme. This charge is generally collected directly by the Service Provider from all Individuals, whether they are in receipt of Planned Care or not. Further information around Core Charges can be found at Section 15 of this document. It is anticipated any new Extra Care Schemes will be funded via this process.
- III. There are also hybrid arrangements where a Block Contract arrangement is paid to the Service Provider, who then works to recoup a reduced Core Charge.

6.8. Therefore, as Care Workers will be onsite to deliver Planned Care, it is recognised that those Care Workers can also respond to any emergencies that arise.

6.9. Planned care will be delivered during the majority of the day. However, there will be quieter times in the afternoon and during the night. The funding from the Block Arrangement is being made available to provide Care Worker cover during the hours that Planned Care is not being delivered.

6.10. The Service requirements for the specific Scheme are the minimum to be delivered, and are subject to review by the Authority and will be refined at Call-Off within the Call-Off documents:

- a. This could include 1 or 2 Care Workers at night, fire safety plan highlighted simultaneous evacuation or fire safety plan highlighted stay put, or fire safety plan highlighted stay safe.

6.11. Emergency Response

6.11.1. Care Workers are expected to answer calls as outlined in Key Performance Indicators for the specific Scheme.

6.11.2. After answering the call, Care Workers are expected to provide an appropriate response within a reasonable period.

6.11.3. When an Individual is admitted to hospital, the Service Provider is expected to have procedures in place to ensure effective communication between Service Provider, landlords, tenants, and families.

6.11.4. On the death of an Individual the Service Provider is expected to have procedures in place to ensure and appropriate and dignified response which includes ensuring effective communication between the Service Provider, landlords, families and the Authority.

6.12. Other Background Care and Support

- 6.12.1. Background Care and Support and unplanned care comprises of the same tasks that may be delivered under a Care and Support Plan but owing to the urgency or temporary nature of the care, those tasks have not been included in the Individual's Care and Support Plan.
- 6.12.2. The Service Provider will ensure that where the need will be ongoing then a referral is made for:
- a. a social care assessment where Individual's do not have a Care Package in place.
 - b. a review of a current Care and Support Plan where a care plan is in place following the requirements outlined in Section 8.
- 6.12.3. The Service Provider will educate Individual's in relation to the appropriate use of community alarm/telecare systems and the most appropriate way to raise concerns with staff.
- 6.12.4. The Service Provider will co-ordinate and deliver a flexible range of wellbeing activities and events and will support tenants to access those activities and events.
- 6.12.5. When developing a programme of events, the Service Provider should:
- a. Work with Individual's to maximise their role in the organisation of the events and to identify the type of activities which tenants/leaseholders wish to attend
 - b. Liaise with housing management staff in relation to the organisation of events and agree roles and responsibilities.
 - c. Identify local community groups who could support the organisation and delivery of wellbeing events and activities
 - d. Identify local community activities which Individuals could attend in their local area.
- 6.12.6. In addition to co-ordinating the delivery of activities of events, the Service Provider will also provide and run activities where appropriate, subject to the availability of Care Workers.
- a. The co-ordination and provision of events will be a standing item at contract review meetings. A list of the activities which have been organised in the service, and any related staffing issues, should be included within the reports prepared by the Service Provider for the contract review meetings.

7.0 Planned Care – Spot Commissioned Care

- 7.1. In addition to the Background Care and Support and Emergency Response, additional service requirements may be placed with the Service Provider. These additional requirements will be known as "Spot Commissioned Care" or "Spot Contracts" and are not guaranteed.
- 7.2. Spot Commissioned Care will be used to purchase Planned Care when the Individual chooses to have their care needs met by the on-site Provider.
- 7.3. Planned Care are those tasks identified in an Individual's Care and Support Plan.
- 7.4. Individuals in receipt of a personal budget or funded care package will have been assessed for financial assistance under the Authority's fairer charging policy.
- 7.5. Planned Care can be purchased through a direct payment, Individual Service Fund, or other purchasing arrangement. Individual Care and Support Plan plans will define the full scope, including times of visits, of the service required for each Individual.
- 7.6. The level and frequency of care required to an Individual will be set out by the referrer. The Individual can choose to vary the times and durations of visits in consultation with either the Service Provider or the referrer dependent on capacity and needs. The Service Provider must have the ability to flex the level of support available to the Individual where capacity allows so it reflects the Individuals actual need, specific goals and desired outcomes.
- 7.7. Individuals can choose to use an alternative provider to arrange their individual planned hours, however this should be discussed with an Individual's Social Worker prior to finalising decision making. However, the Background Care and Support and Emergency Response must be delivered by the on-site Service Provider.
- 7.8. The precise pattern of service delivery, and therefore of workforce deployment, will be flexible according to the individual needs and preferences of the Individual. However, there should be consistency and continuity in the allocations of care workers to support Individuals.
- 7.9. The process for arranging changes to the provision of Planned Care is outlined in Section 8.
- 7.10. If at any time between Individual reviews and reassessments there is a need to provide additional temporary waking night cover this will be authorised by the Authority for a fixed period or until the next review meeting. This temporary waking night cover will also form part of any Unplanned Care.
- 7.11. In terms of the types of tasks that may be included as part of a requirement for Planned Care and/or unplanned care, the Service required will be set out in the Individual's person-centred Care and Support Plan. Therefore, the

following list of types of care and support tasks required is not intended to be exhaustive or needed in all cases and should not preclude creative solutions which may better suit an individual where it is part of their agreed Care and Support Plan. Examples of the tasks which may be required and which the Service Provider must provide may include:

7.11. Types of Care and Support Tasks

- 7.11.1. Types of Care and Support Tasks are laid out in Section 3.5 in the Core Specification. Additional requirements for Extra Care schemes are laid out below.

7.12. Escorting and social activities

- 7.12.1. Supporting and facilitating access to social, vocational, and recreational activities as stipulated in the Care and Support Plan, including but not limited to:

- a. Supporting to attend day services and any appointment which promotes the Individual's continued health and wellbeing
- b. Assisting with shopping, including accompanying to the shops
- c. Assisting to access local community based services
- d. Helping Individuals to make their way to places and to assist in road safety and learning routes.

7.13. Cleaning and domestic support around the home:

- 7.13.1. Where it is stipulated in the Care and Support Plan that cleaning and domestic support is required around the home, the Service Provider will provide this or support the Individual to do so. This may include vacuuming, sweeping, washing up, polishing, cleaning floors and windows, bathrooms, kitchens, toilets, and general tidying, using appropriate domestic equipment. The Service Provider will also:

- a. Make beds and change linen.
- b. Dispose of household and personal rubbish.
- c. Assist with laundry.
- d. Clean areas of any potential slip or trip hazards.
- e. Identify and mitigate as far as possible any hazards or risks around the household.

- 7.13.2. Where possible an enabling approach should be taken, and the Individual is encouraged to undertake as much of a task as they are able to.

7.14. Health/medical care:

7.14.1. Health and medical care for Extra Care are laid out in Section 3.13 in the Core Specification.

8.0 Care and Support Planning

8.1. Care and Support Planning requirements for Extra Care are laid out in Section 3.10 in the Core Specification.

9.0 Managing Individual Service Funds

9.1 The Authority may introduce a requirement for the Service Provider to manage an Individual Service Fund on behalf of the person, if they choose this option for all or part of their personal budget. The requirements and obligations for the Service Provider will be clearly stated, should this be a requirement of this specification

9.2 Within any ISF arrangements, the Authority reserves its right to terminate ISF provision.

10.0 Risk Assessment and Management

10.1 Risk assessment and management requirements for Extra Care are laid out in Section 3.11 in the Core Specification.

11.0 Health and Safety

11.1 Health and Safety requirements for Extra Care are laid out in Section 3.12 in the Core Specification.

12.0 Keeping Individuals Informed and In Control

12.1 Keeping Individuals Informed and in control requirements Extra Care are laid out in Section 3.7 in the Core Specification.

12.2 The Authority will engage in feedback exercises throughout the Contract and as part of any potential Call-Off. This may include, but is not limited to, Anonymised

surveys, Individual engagement sessions in specific Extra Care Schemes, feedback sessions with landlord and other on-site partners.

13.0 Recording

- 13.1 Recording requirements for Extra Care are laid out in Section 3.8 in the Core Specification.
- 13.2 It is recognised that in some cases recording of Care Records and Time Management Systems within Extra Care Schemes may remain paper based due to the differing scope and remit of these schemes.
- 13.3 It is expected that Service Providers demonstrate an ambition to work towards digital transformation.

14.0 Out of Hours Service

- 14.1 Out of hours service requirements for Extra Care are laid out in Section 3.9 in the Core Specification.

15.0 Charging (only applicable to Schemes operating a Core Charge)

- 15.1 Within Schemes that apply a Core Charge it is expected that all tenants/leaseholders will be required to pay this charge on a weekly basis to the Service Provider – subject to a financial assessment (where applicable) – Individual circumstances may vary. If a Scheme is not operating a Core Charge, please disregard the rest of section 15.
- 15.2 The Service Provider is required to ensure that the Care and Support Agreement is signed when the Individual moves into the Scheme.
- 15.3 Those Individuals with an eligible care need and in receipt of a personal budget will have the Core Charge paid from their personal budget.
- 15.4 Where the Authority is managing the personal budget on behalf of the Individual, the Authority will make payment for the core charge to the Service Provider along with the payment for any required Planned Care.
- 15.5 Where the Individual opts to have a direct payment, the Individual will pay the Core Charge to the Service Provider directly.
- 15.6 The Service Provider will be responsible for collecting the core charge from any tenants/leaseholders who have moved into the service since the start of the contract and do not have an eligible care need or have an eligible care need but have been assessed as ineligible for financial assistance.
- 15.7 The Service Provider will be expected to collect charges from existing Individuals in line with current agreements and practice, and to work with the Authority in trying to address the best way of addressing historical complexities.
- 15.8 Further information on Core Charges can be found within the Core Charges documentation set out at the time of Call-Off.

16.0 Partnership Working

16.1 Partnership Working requirements for Extra Care are laid out in Section 3.14 in the Core Specification.

17.0 Supporting the Wider Care System

17.1 Supporting the Wider Care System requirements for Extra Care are laid out in Section 3.15 in the Core Specification.

18.0 Social Value

18.1 The Service Provider shall deliver the Services at all times having regard to the approach to social value. The Service Provider shall maintain and keep up to date records in line with the Authority's Social Value Policy as required by the Authority. The Service Provider, at the request of the Authority, is required to provide an annual summary report detailing progress and measurable benefits. The summary report shall include reference to the following outcomes:

<http://www.lancashire.gov.uk/media/898255/approved-social-value-policy-and-framework.pdf>

18.2 In accordance with the Authority's social value policy, the Provider must work towards achieving the following social value outcomes:

- a. More local people in work with support around career progression and training.
- b. Responsible businesses that do their bit for the local community e.g., charitable work.
- c. A local workforce that is fairly paid and well supported.
- d. Reduction in costs by investing in prevention e.g., making use of other services and community assets.
- e. Protecting our environment and reducing climate change.

18.3 The Service must use a range of innovative delivery approaches that provide additional social value, this could include:

- a. Apprenticeships
- b. Developing Community Circles
- c. Working with local networks, groups, and organisations in order to establish opportunities for people to improve their social connections and wider health and wellbeing
- d. Approaches that benefit the whole community not just individuals supported by the Service

- e. Identify people and/or Care Workers who are willing to be involved in ongoing engagement
- f. Proposing innovative support or additional value not identified in the areas above

18.4 The Authority reserves the right to update its Social Value Policy and may change the system used to monitor social value.

19.0 Workforce Requirements

19.1 Workforce requirements for Extra Care are laid out in Section 4 in the Core Specification.

20.0 Quality and Safeguarding

20.1 Quality and Safeguarding requirements for Extra Care are laid out in Section 5 in the Core Specification.

21.0 Performance Management

21.1 The Provider is required to provide, and present in an appropriate format, a summary report to be shared in advance of scheduled contract review meetings which will be attended by the Landlord, the Provider, and the Authority.

21.2 This is to include as a minimum:

- a. Progress and activity to date against an agreed action plan including issues and challenges including usage of Planned Care and Background Care and Support in terms of specific calls.
- b. Monitoring information including changes in Individual profiles and outcomes achieved, number of Block Arrangement care hours, Spot Care Package hours, Unplanned Care hours and waking nights.
- c. Details of customer feedback.
- d. Details of any comments, complaints, and compliments.
- e. What has worked well (successes) and what can be done differently (challenges).
- f. Opportunities or planned developments including collaborative/partnership working, health and wellbeing initiatives.
- g. Quarterly financial statement to be reviewed alongside Care and Support Plans.
- h. Number of Individuals supported per month.

21.3 The Services will be monitored on an on-going basis and via regular face to face review meetings. Monitoring will include an on-going evaluation of delivery against the requirements detailed in this Specification. Qualitative and quantitative

information from the Service Provider's own quality assurance system will be correlated with information directly gained from customers, their Care Workers and partner organisations.

- 21.4 The Authority may make random quality and customer satisfaction checks and at their discretion a sample of Individuals/Residents and Care Workers may be contacted or interviewed to get direct feedback as part of the monitoring process. Information collected will be shared with the Provider.
- 21.5 Providers are required to have a full and detailed exit management plan as per the requirements of the PDPS and its terms and conditions to be implemented in the event of another provider taking over the contract. It is expected that this exit management plan will integrate key timescales for information handover/transfer to any incoming provider and the Authority.

22.0 Relationship with Landlord

- 22.1 The Landlord is responsible for the Housing Management of the Scheme
- 22.2 In order to provide a seamless service to people living in the Scheme, the Service Provider shall:
- a. Work in close partnership with the Landlord in the best interests of the Individuals.
 - b. Work with the landlord to finalise a Service Level Agreement within 60 days of contract commencement
 - c. Ensure that the Manager of the Service:
 - I. is readily accessible to representatives of the Landlord at reasonable times during the working day.
 - II. attends meetings (either face to face or remotely) at the Extra Care Housing Scheme, which seek to facilitate the delivery of a co-ordinated response to Individuals
 - d. Undertake health and safety responsibilities as outlined in the agreement entered into with the landlord
- 22.3 The Landlord requirement in relation to the renting of office accommodation is outlined in individual Scheme Call-Off documentation.
- 22.4 Please note that any risks, liabilities, or costs associated with the Service Level Agreement/Third Party Agreement, lie with the Service Provider, and lie outside the remit of the service being commissioned as part of this open competition. The Authority accepts no responsibility or liability at all for the arrangements between the parties thereto.