Care within the Home Services in Surrey Provider Welcome Pack (Version 1 October 2021)





Contents

Care within the Home Services in Surrey	1
Provider Welcome Pack	1
(Version 1 October 2021)	1
Welcome to the Contract	4
How to use this welcome pack and other key information	5
Packages of Care - the brokerage process and system	5
Delivery areas	6
Joint Brokerage Team	6
Surrey Information Point	7
Relationship Leads	7
Payment	8
Key contacts for specific issues	8
 Issues regarding ASC individuals or individual packages of care/ supp 8 	ort plans
ASC Invoice queries	8
Quality assurance issues	9
Changes to delivery areas	9
Rate Changes	9
Provider Novations	10
Provider Engagement	10
Monthly drop in group discussion	10
Contract Monitoring requirements	11
How to submit Key Performance Indicators	11
The SCC Provider Support and Intervention Protocol	12
Further Support for Providers	12
Training from Surrey Skills Academy	12
E-learning	13
Safeguarding	13
Data Protection requirement	13
Live-in Care	13
NHS Continuing Healthcare (CHC)	14
Referrals	14
Invoices	14
Delegated Health Tasks – CHC High Needs	14

Queries and Information sharing	15
Future Intentions	15
Provider Reviews	15
Carer Breaks	15
End of Life Care (EOLC)	15
Resident Expectations	16
Care folders basic requirements	16
Frequently Asked Questions	17
Background	17
Awarding Packages	17
Delivery of Care	
Hospital Discharges	
Terminating a Package of Care	19
Continuing Healthcare (CHC)	19
Live in Care	20
Old business and new	20
Appendices	21
Appendix 1- Useful Contact details	21

Welcome to the Contract Dear Provider,

I want to take this opportunity to personally thank you for your interest in working with us to deliver Care within the Home services which provide invaluable care and support to Surrey residents, their families, and unpaid carers. This contract marks a new approach for Surrey offering longer-term arrangements with providers in order to develop better and stronger relationships over time and maintain good sustainable services for residents.

The new Dynamic Purchasing System (DPS) and contracts will be in place for up to 6 years (2 years plus 2 extensions of 2 years). We will use this time to iteratively learn and develop together to achieve our ambition for Surrey to be a unique place where everyone lives healthy, active, and fulfilling lives, and make good choices about their wellbeing. We believe that everyone has the right to get the health and social care support they need, and that Surrey should be a place that encourages good providers to grow and thrive.

The new contractual arrangements demonstrate this ambition clearly. We have focused on meaningful key performance indicators that will be used to enhance relationships and manage the market better. We will, through the Provider Support process, good commissioning and intelligent brokering, be proactive in developing and maintaining a robust, sustainable and diverse market whilst focusing on good quality care provision within an often limited financial context.

Being part of the DPS will ensure that Providers have clear lines of communication with Surrey, understanding how to do business and where to go to resolve any issues or raise comments and concerns in a timely and satisfactory manner.

We are continually looking to enhance our working relationship with providers through embedding strength-based practices, sharing expertise in reviewing packages of care and looking at ways, through carers breaks, to maximise valuable staff hours.

This welcome pack sets out clearly what Providers on the new DPS can expect from Surrey and equally what we expect from you. Throughout the life of the contract, we will also facilitate opportunities to share information more regularly and work sector wide to address the key issues facing the care industry.

I would therefore like to take this opportunity to welcome you again and say that I and the team look forward to working with you in the coming years.

Dan Stoneman Head of Commissioning Older Persons Surrey County Council (SCC) How to use this welcome pack and other key information

Much of what you will need to know can be found in the documents shared with you when you tendered for this contract and therefore this welcome pack must be read in conjunction with the following:

- Care within the Home Service Specification Schedule 1
- Package Placement Protocol Schedule 2
- Pricing & Invoicing Protocol Schedule 3
- Performance Monitoring Framework Schedule 5
- Care within the Home Contract Terms and Conditions

Documents relating to the <u>HBC contract 2021-2023</u> are available on the SCC website.

The <u>resources for providers</u> section of the SCC website will be updated throughout the contract lifetime with resources for providers, including training opportunities. Providers are asked to check <u>resources for providers</u> for further updates. See also page 12 of this welcome pack for further sources of support for providers.

Packages of Care - the brokerage process and system

SCC and NHS Continuing Healthcare use a brokerage system, known as e-brokerage presently, and providers must have an active account in order to pick up new business from October 1st 2021. Providers will be asked to activate their account via email before the contract begins.

E-brokerage is a web-based sourcing tool used to send care requests to providers that are on the DPS for Care within the Home services. SCC will send log-in details for the referral contact email addresses you have stated you want to use for e-brokerage referrals.

All usernames and log in details will be created for you by the brokerage team. An account can be created for each user that requires access, and log in details will be sent to their nominated email address together with a copy of the user guide.

Important - When providers receive an email with account details, providers must activate the account within 24 hours.

It is a contractual requirement for providers to respond to all referrals that they receive for the delivery areas that they have been allocated to. Commissioners will use this information in contract monitoring and performance management meetings, and so it is essential that providers comply with this process.

Please note: **do not alter or amend** any entry in the **locations or levels field** for your company. If you believe the information is incorrect, please email <u>homebasedcare@surreycc.gov.uk</u> with the details.

For any e-brokerage system queries please email:

asc.marketengagement@surreycc.gov.uk - and label your enquiry with FAO: Care within the Home – E-brokerage

Delivery areas

Surrey is covered by 94 postcode areas as set out in the tender documentation. These areas are referred to as delivery areas and referrals for individual packages of care will ONLY be sent to providers who have said that they are able to provide services in that delivery area.

The delivery areas you are signed up to are set out in your contract, this also applies to providers delivering Live-in Care alongside hourly care as per the contract. Providers are asked to ensure that they are clear which delivery areas they have been contracted to work in.

For more information, refer to the *Delivery Areas and Pricing Guidance document* within the tender documentation. You can also view the <u>interactive map</u> which has been created to demonstrate the delivery areas.

See section 6.4 of this welcome pack for information about what to do to make changes to the delivery areas.

Joint Brokerage Team

From the 1st of October 2021 Surrey County Council will operate a joint brokerage approach to sourcing packages of care. This means that Social Work practitioners will make referrals through e-brokerage and responses will be managed by the Joint Brokerage Team (JBT). This is part of our approach to intelligent brokering which will involve;

- identifying packages and rounds of care delivery that support provider growth and sustainability in areas where appropriate
- ensuring that commissioners are managing finances effectively when securing placements based on available market rates
- providers are identified (where possible) who can meet specialist needs where required

Only providers who have been accepted on to the DPS contract will be sent referrals. Commissioners and social work teams will not approach providers who are not on the contract or that are not regulated with CQC.

If providers are approached directly this will be through commissioners or the JBT only, providers should not arrange placements outside of this process or they risk not being paid. Commissioners and the JBT will approach providers directly where a package is urgent, requires more information or perhaps contributes to the formation of a care round that providers may not be able to see through e-brokerage alone.

From time to time Commissioners and JBT may issue blocks of hours / packages of care through the brokerage process.

Surrey Information Point

<u>Surrey Information Point (SIP)</u> is a valuable local directory that details a wide variety of care and support options available for residents. The directory contains thousands of services from small community groups that help people stay independent, safe and healthy, to charities and advice services that connect people to relevant support as well as more formal care such as residential homes and home care agencies. The site also holds information pages about a range of health and social care topics and further links to helpful websites, films and resources.

- If your organisation does not already have a SIP profile on our directory, then a profile will be created for you based on your current website or information you have provided.
- If you have any queries on the Surrey Information Point directory of services or would like to update anything on your profile then please email <u>Info@surreyinformationpoint.org.uk</u>.

Relationship Leads

Providers accepted on to the DPS will be supplied with named leads in order to support them with their business in Surrey. It is envisaged that named leads will cover geographical areas and potentially multiple providers. These will be from Surrey County Council and CHC contracts team. These roles will include

- **Commissioning Development Officer** Acting as a first point of contact for providers and social workers with any queries regarding general matters such as postcode coverage, capacity, system pressures and day to day practice issues.
- **Quality Assurance manager / officer** Support providers with Provider Support and Intervention Protocol and all other quality related matters
- Older Persons Broker(s) key links in the brokerage team to support with sourcing process
- CHC Contracts Team CHC packages only
- **Commissioner** Arranging performance review meetings, contract monitoring and reviewing key performance indicators and discussing pricing / coverage
- Senior Commissioning Manager Escalation of strategic concerns, market information and updates and wider sector management

Providers will still need to work closely with social work teams and individual case holders regarding specific support requirements and reviews of individual packages of care. See Appendix 1 for contact details.

Payment

The Pricing & Invoicing Protocol (Schedule 3) sets out clearly how providers will be paid, and all invoices submitted shall be in accordance with the agreed rates as per your Pricing Schedule terms. **Please note** that there are different invoice payment processes for both ASC funded packages and CHC funded packages so do refer to these schedules.

Please note: E-invoicing requirements are **mandatory** for **Adult Social Care (SCC)** invoices **ONLY.** As part of this contract therefore, the use of the SCC Provider Portal will be mandatory for submission of invoices for SCC Clients (this is not mandatory for NHS CHC clients).

Providers will be required to register for an account for the SCC Provider Portal prior to go-live of the contract and be familiar with Portal use. Full support and Training will be made available. To register for access or request a demonstration, please contact the Provider Portal as follows: <u>adults.providerportal@surreycc.gov.uk</u>

SCC will **not process invoices** manually sent in via **paper** or **e-mail** and will be returned to originating provider as per the Contractual arrangements.

For CHC Invoices please refer to the Pricing and Invoicing protocol (Schedule 3) for payment processes and section 14.2 of this welcome pack.

Key contacts for specific issues

Issues regarding ASC individuals or individual packages of care/ support plans

- Please contact ASC Duty Teams (see Appendix 1 for contact details).
- Please also see Section 8, Package Purchase Protocol (Schedule 2) -Communication between the Commissioner and the Provider for more information.

ASC Invoice queries

- Surrey County Council Area Finance Teams should be contacted to deal with the following queries:
 - Hospital admissions
 - Cancelled/non-delivered visits
 - Unpaid invoices
 - E-Invoicing issues
 - Permanent changes to packages (increases/decreases)
- See the contact detail section (Appendix 1) for each of the finance teams at Surrey County Council.

Quality assurance issues

Providers can send any queries about how we carry out our duties to monitor and support our care market to: <u>ascquality.assurance@surreycc.gov.uk</u> or directly to the ASC Quality Assurance Lead Julian Temblett-Wood: <u>julian.temblettwood@surreycc.gov.uk</u>.

Changes to delivery areas

Providers who would like to make changes to the delivery areas allocated to them should contact the <u>homebasedcare@surreycc.gov.uk</u> email which is regularly checked.

Before agreeing to any changes, the commissioning team will take into consideration;

- the provider's current coverage,
- current delivery of care,
- responses to e-brokerage requests,
- plans for expansion,
- staffing structure,
- office location and,
- quality

These steps are essential in order to be able to ensure how providers will be able to meet the needs of clients safely and maintain a sustainable business in these areas and existing.

Commissioners will also be able to provide an indication of any delivery areas where we are seeking additional or less home-based care capacity in order to meet demand across the county.

Please update your relationship lead if there are delivery areas you no longer wish to receive package requests for. This will help us understand available capacity and save you time responding to e-brokerage requests for packages you cannot accept.

Rate changes

We have specified our approach to uplifts given the length of contracts being awarded under the DPS and Section 2.8 of the Pricing and Invoicing Protocol (Schedule 3) covers opportunities for Providers to discuss their rates.

There will be opportunities for providers to speak with commissioners should they feel their rates need adjusting, either up or down depending on business continuity and / or market competition. Changes to rates will be dealt with on a case-by-case basis and there is no guarantee that rates will be adjusted but the commissioner will work with providers to be transparent regarding the outcome of these discussions.

Commissioning do wish, over time, for all packages of care to be purchased in line with Providers rates on the DPS, this process is referred to as Harmonisation. This may also see 'legacy packages' being moved onto new rates (including with new providers potentially) either over time or as wholesale changes for non-DPS providers to current DPS providers.

For rate enquiries please email the following address: <u>asc.marketengagement@surreycc.gov.uk</u> and label your enquiry FAO: Care within the Home – Rate enquiries

Provider Novations

We recognise that the provider market is ever changing, and some may choose to sell their business (novate) to another provider. In these instances, the provider must notify the Commissioner as soon as possible when a novation (takeover) is being considered or planned.

Please note that;

- The (new) provider is not guaranteed business from the commissioner
- The provider must be compliant, may have to tender for the DPS and therefore have rates agreed prior to being considered for new business and in order to keep existing SCC/CHC packages.

In summary the new provider will be required to be on the new DPS to work with SCC and CHC. Early notification with commissioners will ensure these issues are addressed and 'new' providers can be set up on e-brokerage, SIP and e-invoicing in particular.

To notify the commissioner of any changes to business ownership please email <u>homebasedcare@surreycc.gov.uk</u> or contact your Relationship lead directly.

Provider Engagement

Monthly drop in group discussion

Providers who are accepted on to the contract will be able to join a monthly informal group discussion with commissioners. This session is held on the last Thursday of each month at 12:00 via Microsoft Teams and will be by invite only. If a session is not being held for any reason providers will be advised.

The drop-in session will be the forum for commissioners to share general market updates, discuss overall themes regarding the provision of homecare in Surrey and allow homecare providers to share information in an open discussion. Issues regarding individual cases or provider specific issues will not be discussed in the group discussion.

Providers who wish to be invited to the monthly drop in session and who have not received an invite should write to <u>homebasedcare@surreycc.gov.uk</u>

Commissioners will also arrange **market events** where providers and commissioners can meet in person to share information and network as a group. These events, subject to any restrictions due to the pandemic, will be advertised via booking systems and will be held at a central location in Surrey at least once a year. Commissioners will also circulate a **newsletter to providers** with information periodically.

It is also the ambition for Surrey County Council to develop a 'Provider Portal' which will ensure providers are able to manage their business with commissioners more easily. The portal will bring together key tasks (accessing e-brokerage / e-invoicing) and provide better opportunities for information to be shared between providers and commissioners. We also hope this space will support future intentions including providers being able to self-serve in terms of maintaining information on contact details, branch information and / or general business change.

Contract monitoring requirements

Commissioners will monitor the key performance indicators (KPIs) for the full duration of the contract. Providers are required to send in their completed performance template each month. Commissioners will review the performance submissions and will respond to matters proportionally according to size of the provider, area of coverage, and nature of any issue identified from the completed performance submission.

How to submit Key Performance Indicators

Providers need to complete an online form each month (using Microsoft Forms):

This online form contains all the questions required under the terms of the contract and submitting it via MS Forms will make the process simple for providers.

Providers will be sent monthly reminders (e.g., on 3rd/4th of the month) to complete the return.

You will also be provided with a spreadsheet for you to collate the information ready to be entered into the MS forms each month. This will contain definitions for each of the KPIs, and this will be your record of the KPI information you submit. Once it has been submitted via MS Forms it will not be visible to you until it is reported back to you by your relationship lead via Tableau which is the tool used by SCC for synthesising data.

You will not be able to amend figures after submitting but you can submit again, and the Contract monitoring team will maintain the most recent record for that month. In addition, if you are keeping track on the template you can submit that to the Contract monitoring team, and they can change it in the master data set.

The e-mail address for the Contract monitoring team is address for CCSS is <u>asc.contractmonitoring@surreycc.gov.uk</u>.

The mandatory use of an **Electronic Care Management** (ECM) system will also be an integral part of understanding KPI's and quality of care delivery which the commissioner maintains the right to request access to as and when required.

The SCC provider support and intervention protocol

In Surrey we want to take a more proactive response to managing the quality of care and support in the market. This means not simply waiting for issues to arise but tackling these early and trying to ensure we have capacity to help Providers achieve and do well.

The care provider support and intervention protocol (PSIP) sets out the roles and responsibilities of Surrey County Council in the event of serious concerns arising about the quality or sustainability of a care service or care provider. It outlines how to manage an operational response to meet the needs of residents and mitigate risks and focuses on supporting our Providers.

Commissioners, in collaboration with social work teams and QA managers, will advise providers if a meeting under the Protocol is required. Providers will be advised what information they will need to provide in the meeting and will be expected to fully participate with the process and any identified actions and outcomes. Again, meetings held under the protocol are supportive and are intended to ensure that risks to the interruption of services can be minimised.

Examples of scenarios when a meeting under the PSIP have been held with commissioners include, but are not limited to:

- CQC rating, change to previous rating or RI or below
- Multiple and consistent safeguarding concerns
- Poor customer feedback received by commissioners (most likely this will be concerning multiple packages of care)
- Change of ownership of provider e.g., takeover, merger
- Provider gives notice on many HBC packages
- Provider exits the market

A copy of the PSIP is available on request – please email <u>ascquality.assurance@surreycc.gov.uk</u> or the ASC Quality Assurance Lead Julian Temblett-Wood: <u>julian.temblettwood@surreycc.gov.uk</u>.

Further support for providers

Providers of social care services in Surrey can access a range of networks and resources to support them to deliver good quality services.

For more information on the support available please see the <u>resources for providers</u> on the SCC website:

Training from Surrey Skills Academy

As providers of social care in Surrey, you have access to a range of training and grant opportunities from <u>Surrey Skills Academy</u>. By following the weblink, you will find classroom courses (virtual and in-person), as well as details about the grant funding

and the managers' network meetings. No account is required to access courses available from Surrey Skills Academy.

E-learning

There are range of <u>e-learning courses</u> which you can also access:

To access the e-learning, you will need to create an account. To obtain the registration code to set up an account, please email <u>surreyskillsacademy@surreycc.gov.uk</u> with your organisation name and address.

Safeguarding

If providers need to raise a safeguarding concern, then please use the contact details as shown below.

If you suspect that someone is at risk of abuse or neglect, please contact the Surrey Multi Agency Safeguarding Hub (MASH):

Telephone: 0300 470 9100 (9am to 5pm Monday to Friday)

Email: acsmash@surreycc.gov.uk

For more information about the MASH:

Data Protection requirement

We are committed to getting the transfer of data right, meaning we will work with providers to remain complaint with all General Data Protection Regulation (GDPR) legislation whilst trying to ensure providers can receive and share good enough information to keep residents safe and ensure that care and support is appropriate based on individuals needs and circumstances.

As a contracted provider you are a considered to be a data processor of personal data held by the Commissioner and you must therefore comply with Data Protection Legislation as set out in the contract (Clause 33; 33A).

Live-in care

Live-in care will be commissioned along the same requirements as home based care, with full details being found within section 7 of schedule 1, the Service Specification.

We recognise that the needs of individuals change over time and we trust providers to communicate with the locality team if the intensity of a live-in package becomes unsustainable. Due to the nature of live-in care, it is especially important that care workers have appropriate breaks and rests. In line with this, we expect that where replacement break cover is commissioned, this must be delivered by a replacement care worker and not the existing live-in care worker. This is to prevent burn out of staff and ensure we are supporting the workforce through our contracting arrangements and service expectations.

For clarity around package costs, providers delivering live-in care have submitted rates to include and exclude replacement care cover for the live-in care worker's daily break.

Providers have also been invited to submit shared rates, for delivery of live-in care to two individuals living within the same home.

Contracted rates are all inclusive and the individual and the commissioner will not be expected to pay for the keep of the care worker, for example care workers' food or transport.

NHS Continuing Healthcare (CHC)

Referrals

Referrals for home care packages for people who are eligible for CHC will be sent out by the CHC Placements Team, who will source packages as directed by the CHC clinical team (via e-brokerage).

Invoices

New providers to the contract will need to provide bank details on headed paper which can be sent via email to the CHC Contracts Team syheartlandsccg.chcfinance@nhs.net)

Invoices **must not** include patient identifiable data but must quote the Patient ID number which is located on the Individual Service User Placement agreement (ISUP) which will be issued to you by the placements team once a package start date has been confirmed.

Invoices for CHC funded clients can be submitted either by email or post. The correct email address for sending electronic invoices is <u>SBS.APinvoicing@nhs.net.</u> *

*Please note this **email address has changed** from the one featured in the Pricing and Invoicing Protocol (Schedule 3).

Electronic Invoices can also be made via Tradeshift.

All queries related to invoice payments should be directed to the CHC Finance Team – see Contact details section.

Delegated health tasks - CHC High Needs

Information about delegated healthcare tasks can be found on the Skills for Care website:

When a package is advertised on the brokerage system and identified as 'CHC High Needs' providers who respond positively to the request will be provided with full details of the tasks they are likely to be required to undertake. If a provider does not feel that they are able to undertake certain tasks, either at this stage or following their own assessment of the individual, they can choose to withdraw their offer.

The CHC Team does not expect providers to deliver any care task that they are not registered for.

Queries and information sharing

The CHC Duty Nurses team is the first point of contact for all queries or sharing of information, e.g. safeguarding incidents, relating to an individual or an individual package of care.

Package of Care requests can be submitted to either the CHC Duty Nurses or to the CHC Placements team – see Contact details section.

Future intentions

Within the tender documents we highlighted some future intentions for our work with providers under the new DPS arrangements. These will be communicated clearly with providers in due course, and we will continue with our commitment to provider engagement to ensure all providers have equal opportunity to shape these future intentions and tender for these opportunities should they wish to.

Provider reviews

To further develop our relationships with providers and to ensure residents are given greater choice and control over their care and support, including their right to be 'enabled' using strength based practice we will look to introduce provider led reviews. This will see providers undertake or contribute to an individuals' review of their care which is a statutory requirement for Surrey County Council and part of good home care practice.

Carer breaks

Often unpaid carers will require support to take breaks from their caring duties. We will speak to DPS providers about potential plans for implementing Carers Breaks where regulated care activity is required for possibly up to 2hrs and in some cases on a regular basis to facilitate this respite. This service type will also help maximise the use of valuable care hours by building these around existing planned rounds and care delivery where possible.

End of life care (EOLC)

This service is commissioned on behalf of NHS Surrey Heartlands Clinical Commissioning Group (CCG), NHS Surrey Heath CCG and North East Hants and Farnham CCG and will ensure all care staff who deliver End of Life Care (EOLC) have been appropriately trained. Emphasis will be placed on the promotion of independence and the achievement of positive experiences for the individual at end of life.

Resident expectations

Providers are asked to ensure all staff are aware of the expectation's residents have regarding the provision of good quality services.

CQC have set out key areas of what you can expect from a good home care agency.

Below are the areas that CQC will review when they inspect regulated homecare branches:

- The provision of services is safe
- The provision of services is effective
- The provision of services is caring
- The provision of services is responsive to people's needs
- The provision of services is well-led

Healthwatch Surrey completed a review of HBC services in 2019. The report of these findings is called <u>Can You Hear Me?</u>

Providers are also asked to make sure that care folders are kept up to date and contain adequate information. This is one of the key tasks in ensuring residents receive good quality care and support services.

Care folders basic requirements

- Ensure information is clear, legible, and current: consider typeface, font size and spacing. Check contents at every review/regularly
- Ensure they contain
 - Agency contacts page
 - Surrey County Council contacts information
 - Service-user centric safeguarding information leaflets or contact details
 - Accessible compliments and complaints information/procedure (not just the long T&C/small print policy)
 - Information about complaints advocacy

The **Surrey Coalition of Disabled People** asked their members to share some of their key expectations for the provision of homecare and these are summarised below. These will form an integral part of how commissioners and quality assurance manage the performance of providers working on the DPS:

- It is important to be flexible and understand that the individual may need flexibility.
- Carers should have a good standard of English this is particularly important when reading instructions for and dispensing medication.
- Being on time is essential. Carers should not arrive too early or too late.
- It is essential that carers inform people if they are going to be late.
- Be patient.
- Be kind.

• Remember that for some people, you may be the only person they will see that day.

Frequently Asked Questions (FAQs)

Background

• What working days does the contract cover?

Providers are be expected to deliver care on the framework for 365 days a year.

• How long is the DPS Contract open for?

The DPS will commence on 1^{st} October 2021 and will initially run for 2 years with the possibility of 2 x 2 year extensions meaning that the contract could run for up to 6 years before services have to be retendered.

• Can I provide Homecare for Surrey funded clients another way?

You may be approached by clients arranging their care via a Direct Payment or a personal health budget. In these instances, the rate for care will be the same as those directly commissioned by Surrey as noted in 8.13 of Schedule 1, *Service Specification*.

• Which delivery areas do we have difficulty sourcing a package?

Some parts of Surrey currently have fewer providers delivering home based care for a variety of reasons including local landscape and rurality of the area. Please refer to *Delivery Areas and Pricing Guidance document* for more information.

For up to date information around areas which seek more providers please speak to your relationship lead.

Awarding Packages

• Why was I not awarded a package?

The selection criteria will come down to price, ability to provide care and responsiveness.

If a provider is not being awarded packages the Commissioner will be able to review reasons why. For example, it may be that it is a competitive area in terms of number of providers responding.

• Will Surrey County Council / CHC guarantee my company packages of care?

There are no guarantees that levels of business purchased will be maintained during the term of the contract (9.13 Schedule 1).

• Who can I communicate with to advise that I have spare capacity?

It is useful for the Joint Brokerage Team to be updated around provider capacity so contact can be made with them directly, or you are invited to update your commissioning contact.

Delivery of Care

• Will I be expected to work alongside other providers?

Yes there is an expectation that providers will work alongside each other where required to meet the needs of an individual's support plan.

• What should happen when someone has been admitted to hospital?

Please see section 8 of the *Purchase Package Protocol* (Schedule 2) for instruction where an individual is absent. 8.7 provides advice around what happens when an individual is absent due to a hospital admission.

Where an individual is admitted to hospital (not in attendance at A&E) the social care / CHC team may require the provider to retain the service during the period of absence. Please note, retainer fees are not paid for home based care.

If you do not hear from the commissioner the provider can regard the package of care as having ceased, and the person will need to have a new package of care arranged for them on discharge. In most instances when arranging care for an individual's hospital discharge, the commissioner will contact the provider who was supporting the individual when they were admitted to hospital. If the previous provider does not respond quickly or has not got capacity available, then the care will be sourced through e-brokerage.

If a service has been retained, the provider is required to resume the service to the individual within twenty-four (24) hours of being informed of the requirement by the commissioner (8.9, *Package Purchase Protocol*).

If Live-in Care is being delivered, in most instances the care worker must leave the individual's home within 24 hours. A conversation should take place between the provider and commissioner to agree whether the service should be retained. Paid retainers only apply to Live-in care, and only in circumstances were explicitly agreed. Detail can be found within 8.11 of the *Package Purchase Protocol*.

Hospital Discharges

• How quickly do I need to commence a package on discharge from hospital?

Detail can be found within 3.10 of Schedule 2 Package Purchase Protocol

The Commissioner expects the Provider to work towards the discharge being arranged for the same day where at all possible, including at weekends in line with the current <u>hospital discharge policies</u> on the Department of Health and Social care section of the Government website.

Terminating a package of Care

Section 10 of Schedule 2, Package Purchase Protocol

• Can we terminate a package if it is not working?

Terminating a package of care is detailed in 10.6 of the *Package Purchase Protocol*. Before requesting to cease care for a client that you are required to address your concerns in advance with the locality or CHC team. If this has been exhausted as per section 10 of Schedule 2, *Package Purchase Protocol*, you can do so in writing giving 14 days notice.

• What is the notice period if Surrey County Council or CHC want to terminate the package?

48 hours is required for most packages if SCC or CHC decide to advise a provider that a package is to end for an individual, unless it is in relation to the safety of the individual or as a result of failure on the part of the Provider to deliver the service in accordance with the term of the contract and support plan, in which case it can be terminated immediately. This is outlined in section 10 of Schedule 2, *Package Purchase Protocol*.

Continuing Healthcare (CHC)

• Are all CHC cases complex cases?

No, the CHC Team commission a high number of care packages that can be delivered under the Care within the Home specification – particularly for Fast Track patients.

As part of the contract, a High Needs specification is developed for providers who wish to work with individuals with high level, more complex needs e.g. tracheostomy care. More information can be found in section 6 of Schedule 1, *Service Specification*.

It is important to have a separate specification for High Needs owing to the increased levels of training required of staff to deliver various health-related tasks. High Needs providers may also charge a different rate, offer different durations of care calls and operate over different geographical areas (e.g. across the whole of Surrey).

Some providers, as well as delivering this more specialist care, will deliver care against the standard (generic) specification.

• What happens when a client supported by ASC becomes eligible for CHC funding?

When a client funded by social care becomes eligible for CHC funding the CHC Placements Team will take over responsibility for funding the existing package of care from the date that the client became eligible. In some instances social care may already have paid the provider beyond the eligibility date and if this happens the CHC team will arrange to reimburse social care for this period. The CHC Placements Team will talk to the provider to confirm the start date for CHC funding and issue an Individual Service User Placement(ISUP) which confirms the details of the package and that CHC have taken over funding the package.

 How do we know a person is being funded by the CCG under D2A arrangements?

Most D2A (Discharge to Assess) package of care at home are sourced by either the social care team based in each acute hospital or the hospital discharge team. The provider will be advised that the package is D2A by the appropriate team and this should be confirmed in writing confirming the person's details, the package of care to be provided along with a patient ID number (usually NHS Number or a LAS number) to quote on invoices and the invoice address.

Live in Care

• What does the Live-in care rate include?

Live-in care is a personal, full-time care service delivered in an individual's home. Details of live-in care can be found within section 7 of schedule 1, *Service Specification*.

Rates include or exclude the care worker break as required by the individual and agreed by the commissioner. The individual and the commissioner will not be expected to pay any additional costs relating to the care worker, including but not limited to, care workers' food or transport.

There should not be any additional charges made on top of the standard live-in care rate. The only exception is where it is agreed with the commissioner that additional care is required for example to provide double handed care or waking night provision. If this is the case, appropriate cover will be commissioned against contracted hourly rates.

• Do we have to be able to provide care worker break coverage?

Yes, this is a requirement of the DPS as per section 7 of Schedule 1, Service *Specification*: Providers who only deliver live-in care will only be accepted on to the DPS where it is demonstrated within their tender application that the live-in care worker break cover can be arranged where required through a subcontracting arrangement.

Old business and new

• Will our APS packages automatically transfer on to the new DPS?

For providers accepted on to the new contract with existing packages these will remain under the 'old' APS arrangements and at the agreed rates until such point as the package changes or indeed the commissioner and provider agree a transfer to the new arrangements. New packages will be on the new contracts. Appendices

Appendix 1- Useful contact details

Adult Social Care Contact Centre

Open between 8am to 6pm, Monday to Friday:

Telephone: 0300 200 1005

Email: contactcentre.adults@surreycc.gov.uk

• Emergency Duty Team (out of hours)

For emergency situations outside the standard lines' hours above:

Telephone: 01483 517898

Email: edt.ssd@surreycc.gov.uk

• Surrey Multi Agency Safeguarding Hub (MASH)

In an emergency where the immediate safety of a child, young person or adult is at risk, dial 999.

If you suspect that someone is at risk of abuse or neglect, please contact the Surrey Multi Agency Safeguarding Hub (MASH):

Telephone: 0300 470 9100 (9am to 5pm Monday to Friday)

Email: acsmash@surreycc.gov.uk

• Continuing Healthcare (CHC) Duty Desk

Email: syheartlandsccg.surreydutynurses@nhs.net

• Continuing Healthcare (CHC) Placements Team:

Email: syheartlandsccg.chcplacements@nhs.net

- For out of hours queries on health matters, please contact the District Nursing teams of the relevant Community Health Provider if required
- Continuing Healthcare (CHC Finance Team)

syheartlandsccg.chcfinance@nhs.net

 Continuing Healthcare (CHC) invoicing: <u>SBS.APinvoicing@nhs.net</u>. NB This email is for the submission of invoices please do NOT use for invoice queries. Invoice queries address to the CHC Finance Team please contact <u>Sbs-w.payables@nhs.net</u>

Adult Social Care Duty Teams

- Elmbridge Locality Team: 01372 832695 elmbridgelocalityteam@surreycc.gov.uk
- Epsom and Ewell Locality Team: 01372 832360 epsom.ewelllocalityteam@surreycc.gov.uk
- Guildford Locality Team: 01483 517262 guildfordlocalityteam@surreycc.gov.uk
- Learning Disabilities and Autism Team (countywide): 01483 404770 learningdisability.admin@surreycc.gov.uk
- Mole Valley Locality Team: 01372 833456
 molevalleylocalityteam@surreycc.gov.uk
- Reigate and Banstead Locality Team: 01737 737179 reigate.bansteadlocalityteam@surreycc.gov.uk
- Runnymede Locality Team: 01932 794800
 runnymedelocalityteam@surreycc.gov.uk
- Spelthorne Locality Team: 01932 795292 spelthornelocalityteam@surreycc.gov.uk

Surrey Heath Locality Team: 01276 800205 surreyheathlocalityteam@surreycc.gov.uk

- Tandridge Locality Team: 01737 737500 tandridgelocalityteam@surreycc.gov.uk
- Transition Team: 01276 800270
 <u>transitionteam@surreycc.gov.uk</u>
- Waverley Locality Team: 01483 518990 waverleylocalityteam@surreycc.gov.uk
- Woking Locality Team: 01483 518859 wokinglocalityteam@surreycc.gov.uk

Hospital Adult Social Care Duty Teams

- Epsom General Hospital Team: 01372 735297 epsomhospital.team@surreycc.gov.uk
- Royal Surrey County Hospital Team: 01483 464008 <u>rschospital.team@surreycc.gov.uk</u>
- St Peters Hospital Team: 01932 722526 duty.sph@surreycc.gov.uk
- Surrey and Sussex Hospital Team: 01737 231802 sashospital.team@surreycc.gov.uk

ADULT SOCIAL CARE – AREA FINANCE TEAMS

East Area Team- Tel: 01737 737932

Reigate & Banstead finance.reigatebanstead@surreycc.gov.uk

Tandridge financetandridge@surreycc.gov.uk

Mid Area team - Tel: 01372 832090

Mole Valley finance.molevalley@surreycc.gov.uk

Elmbridge finance.elmbridge@surreycc.gov.uk

Epsom & Ewell finance.epsomewell@surreycc.gov.uk

South West Area Team - Tel: 01483 517799

Guildford financeguildford@surreycc.gov.uk

Waverly finance.surreyheath@surreycc.gov.uk

Surrey Heath financewaverley@surreycc.gov.uk

Transition (cross locality service) transitionfinance@surreycc.gov.uk

North West Area Team – Tel: 01932 795243

Runneymede <u>financerunneymede@surreycc.gov.uk</u>

Spelthorne financespelthorne@surreycc.gov.uk

Woking <u>financewoking@surreycc.gov.uk</u>

Mental Health Finance Team Tel: 01483 518473

This team covers all Mental Health Clients funded by Mental Health locality teams

mh.finance@surreycc.gov.uk

Learning Disability/Autism Finance Team Tel: 01483 517799

This team covers all Learning Disabilities Clients (cross locality service)

finance.ldautism@surreycc.gov.uk