

APPENDIX 1

BIRMINGHAM CITY COUNCIL

COMMISSIONING STRATEGY FOR
REGULATED ADULT SOCIAL CARE 2024+

FOR

HOME SUPPORT & QUICK DISCHARGE
SERVICES

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1. INTRODUCTION

“WE WILL HELP MAKE BIRMINGHAM A CITY WHERE ALL CITIZENS SHARE IN THE CREATION AND BENEFITS OF SUSTAINABLE ECONOMIC GROWTH AND CAN LIVE LONGER, HEALTHIER, HAPPIER LIVES.”

Birmingham and its citizens face significant opportunities and challenges and the Council must be bold, ambitious, and confident: Bold in its aspiration, ambitious in setting its priorities, and confident in its ability to delivering them. The Council’s Corporate Plan 2022 - 2026 provides a common basis for our strategic planning and a focus on tackling inequalities and creating opportunities for citizens to live longer, healthier, and happier lives. Our ambitions for Birmingham are:

- A Bold Prosperous Birmingham
- A Bold Inclusive Birmingham
- A Bold Safe Birmingham
- A Bold Healthy Birmingham
- A Bold Green Birmingham

The Council has set out a bold and challenging agenda to ensure Birmingham is a city in which every citizen can live a healthy enjoyable life. Where every citizen, at every stage of their life, in all communities can make healthy choices that are affordable, sustainable, and desirable to support them to achieve their potential for a happy, healthy life. Working with our partners, especially in the NHS, we will work to support our citizens (including families and carers) to understand their own physical and mental health and wellbeing and know how to access and get support in a timely and culturally appropriate way when they need it. We will create a city which is compassionate and inclusive to citizens, including people with disabilities and limiting longstanding illness, when they need support and assistance and work together to help them remain active participants in our city throughout their lives.

The aim of adult social care in delivering the Council’s ambition is to protect and empower the most vulnerable citizens. This means supporting vulnerable people to maximise their independence, health and wellbeing, whilst ensuring that publicly funded care and support provides value for money for Birmingham citizens and is provided only when it is really needed.

The Council’s Corporate Plan has been translated into the Vision and Strategy for Adult Social Care which provides a framework for the actions required to modernise adult social care services in Birmingham and to guide decisions regarding how resources are used. The Vision and Strategy comprises eight key elements:

1. **Information, advice and guidance** - People need access to high quality information, advice and guidance. The range of services that people can access directly will be increased and it will be easier for carers to have their needs assessed.

2. **Personalised support** - Social work and care management services will be re-organised. They will move from assessing people for services to assessing them for the outcomes they want and the assets they have, to achieve them.
3. **Community assets** - Resources need to be made available for local groups to provide the wide range of support that enables people to remain in the community.
4. **Prevention and early intervention** - People need to be able to access prevention and early intervention services quickly and at any time in their lives to help maximise their independence.
5. **Partnership working** - Services need to be integrated and built on partnership working using multi-disciplinary teams and, where feasible, single points of access. The Council and its partners need to work as an entire system and to embrace locality working.
6. **Making safeguarding personal** - We must 'make safeguarding personal' and understand what outcomes people want from safeguarding enquiries and actions. Safeguarding must be seen as everybody's business and kept in the public eye.
7. **Co-production** - All services should be co-produced with users and carers. Ongoing engagement needs to be at the heart of commissioning and service delivery.
8. **Social Justice** - Services should seek to improve social justice by tackling the reasons for discrimination and creating opportunities for all citizens.

It is this more detailed vision that forms the platform of this Commissioning Strategy for regulated home support for adults and children, including Quick Discharge Services. The Commissioning Strategy focusses on services for those citizens who will need care at home and is aligned to the Commissioning Strategy 2023 approved by Cabinet in December 2022 that covers; residential care; nursing care; supported living; and home support sensory loss.

Home support services provide personal care in the citizen's home and can include help with the following:

- personal care including washing and dressing;
- housekeeping or cleaning;
- cooking and preparing meals;
- taking medications or health care needs; and
- companionship or activity based support.

The Quick Discharge Service also provides home support/personal care in the citizen's own home but is commissioned by the Council on behalf of our wider health and care system, to provide short term, rapid home care for those medically fit for discharge from hospital. This Commissioning Strategy recognises that relationships between health, social care and wider community services are integral to the health and well-being of local communities and builds upon the previous Commissioning Strategy for these services (2017). Birmingham City Council, Birmingham Children's Trust and our NHS partners are mindful of their roles as a significant commissioner of these services

and also the underlying price pressures in the social care sector. The Council and our partners are acutely aware of the financial pressures we face as organisations, to meet the growing demand for services and to support the adult social care sector in line with our Care Act duties. A key requirement in meeting these financial challenges is to work more collaboratively with our partners and increase joint commissioning across the wider health and social care system.

The Commissioning Strategy also makes clear the role that these services play in the economy both locally and nationally and the need to reframe the sector as not just a significant cost, but a major economic sector in its own right¹.

This strategy outlines our approach to the commissioning of regulated home support for children and adults and Quick Discharge Services and provides a framework for the future commissioning of services that will support us to achieve our key aims to: improve outcomes; improve quality; and improve resilience and sustainability of the wider health and social care system.

¹ New Economics Foundation – Social Care as a Local Economic Solution for the West Midlands August 2017.

2. OUR VISION AND STRATEGIC AIMS

The vision for regulated home support for children and adults and Quick Discharge Services in Birmingham recognises the role the Council can play across the health and social care system, in ensuring we make fundamental changes to; promote well-being; increase independence within limited resources; and to help people to achieve the outcomes that matter to them in their life.

Most children and adults can enjoy access to mainstream services independently or with help and support from their families, friends and social groups. However, for some citizens this is only possible with support from social care services and from other public sector agencies such as health services.

The challenges facing the Council to achieve this have never been greater. While it is a great achievement for society that there are more people living longer with more complex needs, inevitably this puts pressure on resources. While Birmingham is one of the youngest cities in Europe, the older population is growing rapidly. There are an estimated 14,000 adults living with dementia, with a further 3,000 people expected to be diagnosed over the coming 20 years. Further, there are nearly 24,000 people living with a learning disability and an increasing number of adults who have disabilities or are living with mental illness. The resources previously available to the Council have been significantly reduced and remain under significant strain, making the use of available resources more important than ever. The public have higher expectations of the public sector, and rightly so, the standards of care they expect are rising. It is increasingly recognised that people want support to enable them to exercise independence, choice and control.

Consequently, the Council has changed and adapted to these new circumstances, which means that the type of services arranged and provided and the way they are organised and delivered has to change. Our vision for commissioned services in Birmingham is therefore:

TO HAVE A VIBRANT, DIVERSE AND SUSTAINABLE LOCAL HEALTH AND SOCIAL CARE MARKET, WHICH SUPPORTS THE ACHIEVEMENT OF BETTER OUTCOMES, INCREASED INDEPENDENCE AND CHOICE AND CONTROL FOR ADULTS².

This vision for commissioned adult social care services (including home support services for children and adults and Quick Discharge Services) is underpinned by three clear aims to:

1. Improve outcomes for those with health, care and support needs
2. Improve the quality of commissioned health and care services
3. Improve the resilience and sustainability of our health and social care system

This recognises that if people are to live better lives and achieve better outcomes then we need to help people, their families and the community to have greater choice and control about the care

² In the case of Home Support services this also includes children and young people with a disability

that they receive, to promote independence and to ensure that all citizens have access to the support that they require to live safely and independently.

To deliver this vision a whole systems approach is required which recognises that much of the need for care and support is met by people's own efforts including their families, friends or other carers, and by community networks. The Council's approach to assessment of needs and social work practice, has adapted to focus on delaying and preventing the need for regulated adult social care services wherever possible. This is critical to ensuring we can manage the demand for our services within available resources. This Commissioning Strategy recognises this approach and relies upon it to reduce demand for regulated services wherever possible. However, where this level of care and support is ultimately needed, the Commissioning Strategy will ensure it can be commissioned at the right time, with the right support, with good quality providers delivering value for money.

3. DRIVERS FOR CHANGE

3.1 NATIONAL DRIVERS FOR CHANGE

Home support for children and adults and Quick Discharge Services operate within a complex statutory framework. The legislative and regulatory requirements underpin the approach to assessment, commissioning and the way in which these vital services are delivered. It is important that commissioners, providers and regulators work together to ensure the delivery of a range of services that meet citizens' needs, provide choice and are of good quality.

The key statutory driver for the work of adult social care is currently the Care Act 2014. The Care Act places clear duties on providing care and support to meet the assessed eligible needs of individuals and ensuring that wellbeing is promoted when carrying out any of the Council's care and support functions. The Care Act also sets out a range of commissioning and market shaping duties for Local Authority commissioner to ensure a range of quality and type of services are available to meet needs.

The "Build Back Better: Our Plan for Health and Social Care" published by Government in September 2021 sets out significant reform for the health and social care sector. The plan aims to address the catastrophic impact of the Covid-19 Pandemic on the NHS and social care sector, focussing on addressing extensive hospital backlogs, but also reforming the adult social care system in England in order to meet the increasingly complex needs of an ageing population, as well as the needs younger adults who need support.

Part of the Build Back Better policy change is the Government White Paper "Joining up care for people, places and populations" published in February 2022. This sets out a challenging agenda for the NHS and Local Government to further integrate through the planning, commissioning and delivery of co-ordinated, joined up and seamless services to support people to live healthy, independent and dignified lives and which improves outcomes for the population as a whole. The goal being that "everyone should receive the right care, in the right place, at the right time."

The regulatory framework for adult social care services³ sets out an approach to how the Care Quality Commission powers can and will be used to; protect people who use regulated services from harm; to ensure they receive health and social care services of an appropriate standard; and to hold providers and individuals to account for failures in how services are provided.

In relation to the Quick Discharge Service, this is a key element of our Integrated Care System response for those citizens ready to leave hospital but who may benefit from short term rehabilitation and/or support when they return home. This service is one element of our local

³ As contained within the Health and Social Care Act 2008, the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 and the Care Quality Commission (Registration) Regulations 2009. Also note that the regulatory framework for Personal Care also applies where commissioned for Children in Need under Section 17 of the Children's Act 1989.

response to the national Delivery Plan for Recovering Urgent and Emergency Care published in January 2023.

These key pieces of legislation and policies taken together, are powerful vehicles to help drive change in services and to ensure the provision of high-quality services to meet the needs of individuals.

It is therefore critical that the Council, the Birmingham Children's Trust, the NHS and providers shape and deliver the services that are needed by citizens to meet these requirements. This Commissioning Strategy sets out a number of ways in which this agenda will be further embedded across home support services for children and adults and Quick Discharge Services in Birmingham.

3.2 LOCAL DRIVERS

In 2012 the Council moved away from traditional block contracting, spot purchasing and large-scale internal provision of some commissioned adult social care services, to an open market approach with dynamic pricing. This approach delivered a number of benefits for the City Council and for citizens. Whilst the overall approach had allowed the Council to move away from more traditional delivery and contracting arrangements and provide some structure to the market to allow it to develop, it did not address all of the drivers for change and the needs of the market.

In 2017 the Council adopted a Commissioning Strategy for Adult Social Care which set out a range of ambitious changes to improve the quality and resilience of the sector. This Strategy has seen significant improvements with:

- An average of 75% of citizens are now supported by either Gold or Silver quality rated care providers across the commissioned regulated adult social care market. However for home support services specifically, 82.9% of citizens are now supported by a Gold or Silver rated provider (equivalent to CQC Outstanding or Good).
- Council Officers have worked with over 30 Inadequate rated regulated adult social care providers since May 2018 to either improve or decommission their services safely.
- Moving to a geographic model of commissioning home support to reduce travel time/costs, reduce missed and late calls and to improve the quality of care our citizens receive.
- The Council has invested over £70m in the regulated adult social care sector as a whole in annual fee increases since 2018, including increasing around 75% of home support packages at the start of the new contracts in 2019.
- Developed and implemented four cost of care exercises (some were paused due to the Pandemic) to review fees and help set the Council's regulated adult social care budget.
- Improved relationships between providers and commissioners, with regular opportunities for dialogue and a named commissioner for every care provider.

- The geographic approach to commissioning has improved relationships amongst providers, allowed linkages with other local provision/support and ensured commissioners are closely aligned to local social work teams.
- All packages of care are now allocated based on the quality rating of the provider, rather than focussing on the cost of care.
- There has been an increase in citizen satisfaction and use of citizen feedback in our commissioning processes.
- We have implemented a new IT solution which has saved the Council over £400k per annum and has improved the speed and efficiency of identifying care providers for citizens.
- All contracted regulated adult social care providers are now required to pay the Birmingham Care Wage for under 23's – encouraging young people to enter the care sector in Birmingham.
- increasing

However, there were and remain a number of wider local challenges for the regulated adult social care market we must continue to address and these have been clearly set out in our Market Sustainability Plan.

Given the national and local drivers for change and the positive impact of the previous Commissioning Strategy, the future commissioning arrangements for the sector will remain largely unchanged but will focus on preparing the sector for greater joint commissioning across the Integrated Care System with our NHS partners.

3.3 LOCAL NEEDS

The Council has published a number of Market Position Statements which identify current capacity and predicted demand. These are available on the Council's website by following the link below:

[Market position statement - May 2023 | Birmingham City Council](#)

The Council's Market Sustainability Plan also sets out key aspects of the regulated adult social care market in Birmingham and how the Council intends to work with the sector to develop the market.

Further information about current and future needs and demographic data about Birmingham, including any relevant Joint Strategic Needs Assessments can be found here:

[Birmingham City Observatory](#)

The proposals contained within this Commissioning Strategy and the detailed documents that will result from this, have all been designed to ensure that individual assessed eligible care and support needs can be met in high quality services, that citizens are given choice and control over their care and that commissioned services represent value for money for the public purse.

4. COMMISSIONING INTENTIONS

We need to continue to develop the sector and this will involve the need to take our own staff, citizens, providers, partners and professionals on that journey with us. We will continue to support the local economy and the care sector and have set out below how this will be implemented and supported to deliver our vision.

4.1 COMMISSIONING PRINCIPLES

Whilst the commissioning approach adopted in 2017 has created many positive changes, there is still a great deal of work to do to reshape services to meet current and future demands and to address national and local drivers.

The 'preparation for integration' phase of this strategy from 8 April 2024 to 7 April 2029 has been designed to take that next step on the transformation journey and will be focussed on:

- **Integration** – preparing the sector and commissioners across the Integrated Care System for a move towards joint and/or delegated commissioning arrangements, including implementation of a revised Integrated Quality Assurance Framework and a move towards joint commissioning and contracts.
- **Investment and stability** – investing existing resources into the care sector in a more structured way, including with our NHS and other partners, to provide stability of care, but also recognising the role of the social care and health economy in the region and to allow all parties to plan their businesses.
- **System support** – a package of support from commissioners and partners across the system that promotes quality improvement. Including ways in which social value will be delivered by the care sector and other partners.
- **Incentivising quality** – implementing an Integrated Quality Assurance Framework that recognises the best care provision and informs choice.
- **Market shaping** – developing mechanisms and specifications that support reduced reliance on the Council and support ongoing development and sustainability of the market.
- **Efficiency and modernisation** – developing integrated systems and processes that are efficient and fit for the future.
- **Robust contract management** – clear specifications focussed on enabling, independence, choice and control and that make clear the requirements, with robust and consistent management against these.
- **Employment and skills** – having a health and social care system that acts as an economic driver for change at a local community level; ensuring the sector is an attractive prospect for those entering the job market; and that those within the sector are supported and trained to remain and develop their skills.
- **Reduced reliance on commissioned social care services** – the Council will do further work to; develop alternatives to more traditional models of care commissioning and delivery which will incentivise providers to enhance the independence of citizens; and support the development and understanding of community-based services.

- **Partnership with providers** – having transformed the Council’s relationship with the market by being open and transparent, the Council will have a range of high- quality providers who want to work with the Council to deliver services in the future, are clear about what is required and are able to work with the Council/NHS to influence the future direction.

4.2 THE ROLE OF OTHER PARTNERS

The Council is clear that it plays a significant role in the commissioning of services that make up the health and social care system across Birmingham and beyond. However, we also recognise the crucial role of families, carers, communities, third sector organisations and partners such as the NHS and Birmingham Children’s Trust. Together, they provide advice, guidance, support and care to a whole range of citizens that the Council may not have visibility of. It is therefore crucial that the Council works with these partners to improve the quality of home support and quick discharge services.

4.3 CURRENT RESOURCES

The financial sustainability of the social care system is a nationally recognised and widely reported issue, for which there has been much lobbying from the local government sector. The Government has set out a range of reforms, albeit the funding and timescales has yet to be confirmed for all aspects of change.

The Council continues to face financial challenges and has set out a Financial Plan that sets out the expenditure, income and savings the Council expects to deliver in 2023/24 and beyond. Based on current spend and expected increases in demand it is estimated that £404m will be spent on adult social care by Birmingham City Council in 2023/2024, which is nearly half of the Council’s overall net budget.

It is estimated that the Council will spend around £75m per year on home support services through the contracts which are the subject of this strategy and around £15m per annum for quick discharge services, funded from the Adult Social Care budgets and the Better Care Fund. The Birmingham Children’s Trust are also expected to spend around £2m per annum of home support services.

As set out above, the Council’s approach to assessment of needs and social work practice has a strong focus on delaying and preventing the need for regulated adult social care services which is critical to ensuring we can manage the demand for our services within available resources. This Commissioning Strategy recognises this approach and relies upon it to reduce demand for regulated services wherever possible. However, where this level of care and support is ultimately needed, the Commissioning Strategy will ensure it can be commissioned at the right time, with the right support, with good quality providers delivering value for money.

5. HOW THE STRATEGY WILL BE IMPLEMENTED

The following section describes how the Commissioning Strategy will be implemented to support delivery of high-quality services, the achievement of better outcomes, increased independence and choice and a more resilient and sustainable health and social care system over the next five to seven years.

5.1 HOME SUPPORT 2024+ COMMISSIONING MODEL

To ensure the providers we commission and approve to enter the Flexible Contracting Arrangement are of sufficiently high quality, we have developed a key set of quality entry criteria as detailed in section 5.2 below. This will ensure that only the best available provision is commissioned at the start. Once we commence the Flexible Contracting Arrangement, successful providers will be managed in line with section 5.3 as we recognise that sometimes things can change and providers may need support to make improvements. This will ensure we are proactive in addressing any quality concerns, but also recognising good quality services and sharing best practice.

From feedback we have received from citizens, it is clear that the most important aspect of their care is the quality of care staff and the care they provide, alongside the timeliness and reliability of the service. To ensure we can continue to address these issues and provide high quality care to citizens, the focus of the home support flexible contracting arrangement will not only be on the quality assurance arrangements, but on continuing to commission home support through a locality approach, to reduce these missed, late or short calls.

5.2 ENTRY CRITERIA INTO THE COUNCIL'S HOME SUPPORT AND QUICK DISCHARGE FLEXIBLE CONTRACTING ARRANGEMENTS 2024 +

The Council will operate Flexible Contracting Arrangements or Framework Agreements for the majority of commissioned regulated adult social care services, however these arrangements will be adapted to reflect current market conditions and service needs. For home support and quick discharge services, these will both be Flexible Contracting Arrangements – this will give the Council the greatest flexibility to ensure demand for care and support can be met.

This Commissioning Strategy builds on the 2017 Commissioning Strategy for home support and quick discharge services, but also the more recent Commissioning Strategy 2023 for Regulated Adult Social Care which covered care homes, supported living and home support sensory loss. There is a consistency of approach across these strategies, which builds upon what has worked, feedback and learning.

The Flexible Contracting Arrangement for home support services will be developed to allow new providers to be onboarded at times where additional capacity may be needed (subject to the relevant entry criteria being met). The details of these arrangements will be set out in the Procurement Strategy and associated documentation in more detail. However it is expected that the Flexible Contracting Arrangement may reopen in the following circumstances, although these circumstances may never arise dependent on the number of providers onboarded to the Flexible Contracting Arrangement;

- Where providers have been decommissioned, which takes the number of provider lots below the minimum number
- Where providers have terminated their contracts/exited the market, which takes the number of provider lots below the minimum number
- Where the number of Children's home support providers is below the minimum number of provider lots
- Where supply is insufficient to meet demand
- During times of additional demand e.g. winter/Pandemic
- Where providers are removed due to being inactive and which takes the number of provider lots below the minimum number. Inactive providers will be defined within the contract, however this will include providers who have not bid on any new referrals or have bid but withdrawn offers without acceptable reason (with a 6 month period).

To drive up quality and in recognition of the significant quality improvements across the sector, the Council will only allow provider locations who meet all of the following criteria, to enter the Flexible Contracting Arrangement for either home support or quick discharge services at any time:

- Provider locations which have a current Care Quality Commission (CQC) quality rating at the time of any tender submission – those unrated will not be able to enter
- Provider locations which are not recorded as 'dormant' by the Care Quality Commission at the time of any tender submission – those registered as 'dormant' will not be able to enter
- Provider locations which have the CQC service type of 'Homecare Agencies' and the registration of Personal Care
- Provider locations wishing to support Children who have the CQC Service User Band or 'Specialism' of ⁴ 'Children 0-18 years' at the time of any tender submission
- Provider locations which are rated by the Care Quality Commission as either Good or Outstanding at the time of any tender submission or onboarding to the Flexible Contracting Arrangement – those rated as Inadequate or Requires Improvement will not be able to enter
- Provider locations which are within 2 miles of the Birmingham Council Tax boundary
- Provider locations wishing to apply for the main Quick Discharge Service who employ 200 or more staff at the time of any tender submission

Beyond this, a more detailed set of entry criteria will maximise the quality of providers that can enter the Flexible Contracting Arrangement and to reduce potential risks to all parties. The details are set out in the Procurement Strategy and the associated Invitation to Tender and application documents, however, this will include (but not be limited to) provision of the following:

- Bank account details and copies of financial accounts
- Employers Liability and Public Liability insurance certificates with the relevant level of cover
- Company registration details
- Details of any bankruptcy or convictions of owners/responsible persons
- Data protection and modern slavery compliance
- Details of electronic call monitoring system for Home Support providers
- Agreement to the Birmingham Business Charter for Social Responsibility

⁴ As set out in the latest CQC guidance: [Service user bands - Care Quality Commission \(cqc.org.uk\)](https://www.cqc.org.uk/service-user-bands)

Providers will be onboarded to the Flexible Contracting Arrangement based on the combination of their Company Name, CQC Provider organisation and CQC location and each CQC registered provider location must apply and will be assessed separately.

5.3 QUALITY ASSURANCE THROUGH THE INTEGRATED QUALITY ASSURANCE FRAMEWORK

The Council has adopted an Integrated Quality Framework (IQAF) with partners across our Integrated Care System. This framework sets out the approach to quality assurance and the full detail of which will be incorporated into relevant contracts. The key principles of the IQAF, as set out in the NHS National Quality Board Shared Commitment to Quality (2021):

Delivering quality care in systems: key principles

Based on learning from systems to date, there are six key principles that should underpin decisions around quality in health and care systems:



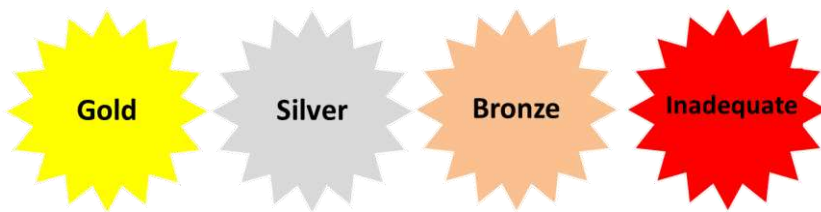
Once onboarded to the Flexible Contracting Arrangement for home support and quick discharge service using their CQC rating and having passed all relevant entry criteria, ongoing quality assurance and contract management of providers will assess providers by giving them a Provider Quality Rating. This will be based on whichever is the most recent of the below and between them, these will act as a baseline of quality assurance for all commissioned services:

- The view of the regulator: the CQC inspection rating
- A baseline of all quality standards; the Quality Monitoring Visit rating

In addition, the following elements may be considered:

- An assessment of health care quality: the Healthcare Quality Assurance Level
- The view of the Provider: Provider Quality Assurance Statement (PQAS)
- The views of the Service User: Customer feedback

The Provider Quality Rating will be measured, and each service given an overall quality rating of either 'Gold', 'Silver', 'Bronze' or 'Inadequate'. The statements below reflect what services in the different quality categories should look like.



WHAT DO THESE SERVICES LOOK LIKE?

'Gold'

- People describe the service as exceptional and distinctive, with staff going out of their way to meet personal preferences and individual outcomes.
- The provider is striving to be a leader in their field.
- The provider exceeds the standards set down by CQC, and contractual terms and core standards.
- The exceptional level of service is delivered consistently over time.

'Silver'

- People describe the service as good and that it meets their needs and delivers good outcomes.
- The provider meets the standards set down by CQC, and contractual terms and core standards.
- The good level of service is delivered consistently over time.

'Bronze'

- People describe the service as not always good and that it does not always meet their needs or deliver good outcomes.
- The provider is working towards meeting all of the standards set down by CQC and contractual terms and core standards, but improvement is still required.
- A good level of service is not consistent over time.

'Inadequate'

- The provider does not meet key standards set by CQC and contractual terms and core standards.
- People using the service are not safe and they are at risk of harm.
- Significant improvement is required, the service will be at risk of losing its registration.

THE CORE QUALITY STANDARDS

The Council not only has a statutory duty to meet assessed eligible care and support needs but a wider responsibility to the people of Birmingham to ensure the care sector is fit for purpose and supports the wider health and social care system.

To ensure citizens and their families are clear about the standards they can expect from their provider and that providers are clear about what is required, the Council has set out a series of service specifications and core standards. These will be used as the foundation for all quality monitoring assessments undertaken by the Council, NHS, or any other party acting on the Council's behalf.

In meeting all regulatory, legal and contractual requirements, each provider will be required to meet the five core standards which will deliver the following outcomes:

1. Involvement and information

- a. Service Users understand the care and support choices available to them. They are encouraged to express their views and are always involved in making decisions about

the way their care and support is delivered. Their privacy, dignity and independence are respected and their (or their carer's) views and experience are taken into account in the way in which the Services are provided.

- b. Where they are able, Service Users give valid consent to the care and support they receive. They understand and know they can change any decision that has been previously agreed about their care and support. Their human rights continue to be respected and are taken into account.

2. Personalised care and support

- a. Service Users experience appropriate, effective, care and support in an enabling way that safely meets their needs, protects their rights and maximises their independence, health and wellbeing.
- b. Service Users are enabled and supported to have a choice of nutritional and balanced food and drink to meet their diverse needs.
- c. Service Users receive safe, coordinated care and support where more than one Service Provider is involved, or where they are moved to another Service Provider.

3. Safeguarding and safety

- a. Service Users are protected from abuse or the risk of abuse and their human rights are respected and upheld.
- b. Service Users experience care and support in a clean environment that protects them from, and reduces the risk of, infection.
- c. Service Users will have the medicines they are prescribed, at the times they need them, and in a safe way.
- d. Service Users, together with those who work in or visit the premises, are in safe and accessible surroundings that promotes and protect their wellbeing.
- e. Service Users, together with those who work in or visit the premises, are not at risk of harm from unsafe or unsuitable equipment (including furnishings or fittings). Service Users benefit from equipment that is comfortable and meets their needs.

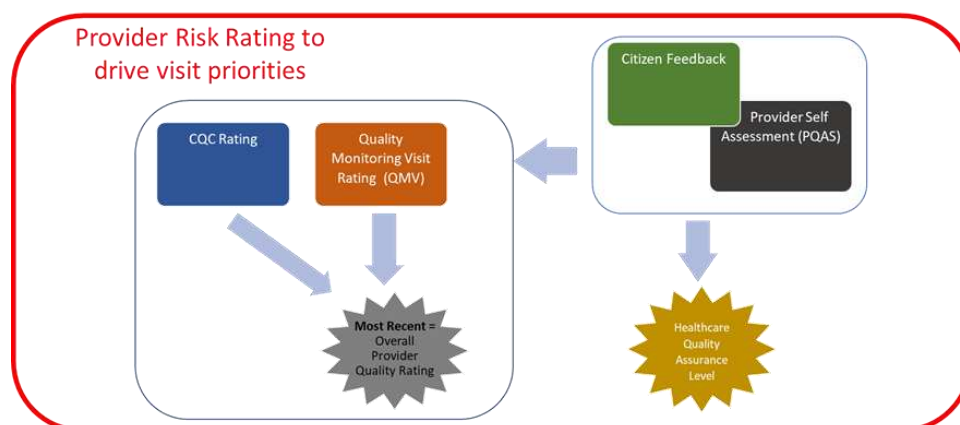
4. Suitability of staffing

- a. Service Users are safe and their health and welfare needs are met by staff who have been appropriately recruited and who have the right qualifications, skills and experience.
- b. Service Users and their health and welfare needs are met by sufficient numbers of appropriate staff with the right qualifications, knowledge, skills, approach and experience.
- c. Service Users are safe and their health and welfare needs are met by staff who are appropriately trained, well supervised, and receive the development opportunities they need to carry out their role effectively whilst keeping their skills and training up to date.

5. Quality of management

- a. Service Users benefit from safe, quality care due to effective decision making and management of risks to their health, welfare and safety because lessons are learned, and the quality of Services is effectively monitored.
- b. Service Users and / or their nominated representative can be sure that the Service Provider listens to and acts on their complaints and comments. Service Users know that they will not be discriminated against for making a complaint or raising an issue.
- c. Service Users are confident that the records kept by the Service Provider about their care and support (including those that are required to protect their safety and wellbeing) are accurate, fit for purpose, held securely and remain confidential.

WHAT INFORMATION WILL DRIVE THE QUALITY RATING?



The Integrated Quality Assurance Framework aims to capture a range of views of the quality of services and use them to produce an Overall Quality Rating for all services and a Healthcare Quality Rating for those services providing FNC/CHC/Section 117 health and care support. These views will be used to inform care commissioning processes and will help people to make informed choices. The Overall Quality Rating will therefore draw upon a range of data sources and be published regularly:

- The view of the citizen or service user: Customer feedback and social worker feedback
- The view of the regulator: The Care Quality Commission (CQC) inspection rating
- The view of the Commissioner: Birmingham City Council or NHS quality monitoring rating, based on the Core Standards
- The view of the provider: Provider Quality Assurance Statement

The Integrated Quality Assurance Framework will be used to develop and improve commissioned regulated adult social care services and will set out all detailed quality improvement processes.

CUSTOMER FEEDBACK

Service user feedback will be used to evaluate what service users think about the service they use, how the service involves and consults with service users and how responsive the service is. The Integrated Care System (ICS) will take into account customer feedback using a range of methods including (but not limited to):

- The ICS will assess the service delivery against the 'Involvement and information' and 'Personalised care and support' domain of the agreed quality toolkit.
- The ICS will use data gathered through the social work and clinical assessment and review process about how well the provider delivers outcomes for service users using the Friends and Family Test. All care providers will be required under the terms of their contract, to use and promote the Healthwatch feedback tools and to use data collected to improve services.
- The ICS will work with Healthwatch to further develop their tools and usage of these to support quality improvements in adult social care services.
- The ICS will continue to work with partners including the Care Quality Commission to obtain feedback on commissioned services and ensure coordinated action to support service improvement.
- The ICS will work with citizen groups and partners to ensure our quality standards reflect professional, contractual and regulatory compliance but also those issues that are important indicators of quality for service users and potential service users.
- The ICS will work with citizen groups to ensure feedback can be obtained from everyone who receives service in a way that meets their individual communication needs.

The Council may take into account customer feedback recorded on other websites where it feels that the feedback is relevant.

PUBLICATION OF THE QUALITY RATING

The Council will publish online each provider's overall Provider Quality Rating, alongside their CQC inspection rating, any NHS quality rating and customer feedback data. This will enable citizens to make informed choices about the care providers they choose to meet their needs and how they compare with other providers in the care market. This will also allow the Council to share market intelligence more readily on a regional and national basis.

PROVIDER SUPPORT

The Council and partners are committed to ensuring that the care market is supported to make the necessary changes described in this strategy.

Due to the wide range of providers operating within Birmingham, from national organisations to some of our smaller and more specialist providers, it is important that, regardless of the wider assets and resources a care provider has, they have equal access to the Council and partners support in making changes and improvements in quality.

All providers under the Flexible Contracting Arrangement for home support and quick discharge services (and other commissioned regulated adult social care providers) will therefore be entitled to a package of support from Birmingham City Council and its partners, to incentivise improved quality which will include:

- A **dedicated commissioning team** will continue to be aligned at a local geographic level. This will allow commissioners to work locally to support the further shaping of all sectors of the market, development of and linking to community assets and to have a real understanding of the availability and quality of care in their area. They will provide advice and guidance in relation to the contract; be proactive in picking up potential quality issues to reduce more intensive interventions in future; signpost providers to targeted and specialist training; support the development of social value and to continually improve quality.
- A **quarterly contract review meeting with commissioners for those providers with the largest market share**. This will be used to discuss market intelligence, quality, performance, improvements, innovation and address questions and concerns either party may have about the contract and how it is operating.
- A **training and support programme** delivered jointly with the NHS and partners, aimed at driving up quality, will be developed to ensure the care sector is an attractive employment choice for people.
- The Council is keen to **explore new ways of working with providers** and to ensure that the market remains sustainable in the future. The Council will look to develop models through its Social Value Policy and the Birmingham Business Charter for Social Responsibility to **connect organisations that can support and benefit one another to** improve areas of their business and quality.

5.4 LOCALITY APPROACH TO COMMISSIONING OF HOME SUPPORT SERVICES

As set out in section 5.1, a key measure of quality of home support services for citizens is the timeliness and reliability of the service. We know that time is a key factor in the quality of care⁵ with care workers themselves recognising they can spend as long travelling as delivering care, confirmed by research showing that up to 19% of a care workers day can be spent travelling⁶.

The Council recognises the challenges travel time can pose to care quality, costs, staff wellbeing and efficiency of care scheduling and have taken proactive steps to address this, through a locality commissioning model for home support services and use of only local provider/s for the quick discharge service.

The Council's Birmingham Business Charter for Social Responsibility⁷ sets out six guiding themes to support the local economy. It is these that continue to influence our approach to the commissioning of home support and quick discharge services on a locality basis as summarised below:

⁵ Fragmented time and domiciliary care quality: 'No one sets out to provide bad care, but you're dragged to it, dragged into the gutter, Professor Carol Atkinson Dr Sarah Crozier, 2016

⁶ [Majority of homecare staff are unpaid for travel between visits | News, Press release | News | UNISON National](#)

⁷ [Birmingham Business Charter for Social Responsibility | Birmingham City Council](#)

Theme 1 – Local Employment

- only doing business with providers within 2 miles of the Birmingham Council Tax boundary will ensure that providers are locally based and are more likely to employ local people
- limiting home support providers to a small number of areas of the city to operate in for commissioned services, will reduce travel time which in turn, reduces the number of late or missed care calls that our citizens experience

Theme 2 – Buy Local

- use of local providers means they are more likely to source local suppliers for the goods and services needed to operate their care services
- using local staff is more likely to result in those staff spending locally e.g. shopping locally, living locally, travelling locally

Theme 3 – Good Employer

- use of local providers means care staff have ready access to local management to provide support and supervision
- use of local providers means they have the ability to oversee the quality of care more readily and are able to undertake direct observations of care delivery to improve quality
- limiting home support providers to a small number of areas of the city to operate in for commissioned services, will reduce the travel time for staff and support their ability to provide high quality care and support their wellbeing

Theme 4 – Ethical Procurement

- use of local providers will allow Commissioners to have oversight of the quality of services and undertake in-person quality visits
- use of local providers will allow Commissioners to build strong relationships for the benefit of citizens

Theme 5 - Partners in Communities

- use of local providers will allow the majority of existing providers to re-apply. This supports those local relationships that have already been established in the community to continue
- commissioning local providers will minimise the impact on citizens of needing to change providers – as most of their existing providers will be able to re-apply
- providers will be encouraged and supported to develop links with their local community to support vulnerable people

Theme 6 – Green and Sustainable

- limiting home support providers to a small number of areas of the city to operate in for commissioned services, will support reductions in travel and therefore reduce the environmental impact of the service

- using local providers, employing local staff will support the use of public transport or walking to deliver care calls, rather than reliance solely on cars to move between care calls

The focus of this Commissioning Strategy is to secure high quality care for citizens and ensure a financially sustainable home support market. Taking the learning from the 2017 Commissioning Strategy for home support services and feedback from care providers about opportunities for growth - all successful provider locations onboarded to the Flexible Contracting Arrangement will be allocated up to two geographic areas in which to operate (also referred to as ‘provider lots’ below). However, the Council will ensure that the relevant procurement and contracting mechanisms allow for the number of geographic areas to be varied if there is evidence that further market capacity is needed⁸.

Whilst home support providers will be asked to confirm their preferred geographic areas in which to operate, these will be balanced with the Council’s duties to meet individual citizen care needs. The detail of this process is set out in the Procurement Strategy.

The Council will not set a maximum number of providers or provider lots, however a minimum number of provider lots will be set for each geographic area based on current demand data. These are described as provider lots because individual provider locations will be able to apply for up to two geographic areas in which to operate (subject to Footnote 9).

Area	Proposed Minimum Provider Location Lots
Area One	25 incl 5 Childrens
Area Two	22 incl 5 Childrens
Area Three	22 incl 5 Childrens
Area Four	22 incl 5 Childrens
Area Five	22 incl 5 Childrens

The Council believes that this approach will ensure that there are sufficient care hours in each geographical area to support and encourage growth, with acceptable competition to meet the needs of citizens. However, given the entry criteria set out in 5.2 and the number of potential eligible providers, we are expecting to exceed these minimum numbers.

⁸ However, the Council will ensure that the relevant procurement and contracting mechanisms allow for the number of geographic areas to be varied if there is evidence that further market capacity is needed.

The model comprises five areas as shown in **Appendix One** and summarised below:

- North Area (Area 1). This is everything north of the M6 motorway. This acts as a barrier in that it limits accessibility from one side to the other, so this is being used as the boundary.
- West Area (Area 2). This is in the west of the city. There is not much in the way of direct connection between the north of this area (Perry Barr and Handsworth) and the south (Quinton and Edgbaston), the area also covers the city centre (incl. Nechells), which offers connectivity between all areas.
- East Area (Area 3). This is in the east of the city, comprising everything from Alum Rock across to Shard End and down to Acocks Green.
- South Central Area (Area 4). This is the south central area. It runs from Bordesley and Highgate, straight south through Moseley and Sparkhill down to Druids Heath and Hall Green.
- South West Area (Area 5). This is in the south west, comprising Bartley Green across to Bournebrook, down to Kings Norton and across to Rubery. There is a natural boundary between Bartley Green at the top of this area and the wards above it, caused by Woodgate Valley (with no roads across it), and the road network and connectivity within the area is fairly straightforward.

Whilst the Flexible Contracting Arrangements will enable Birmingham City Council to directly commission with providers, citizens will be able to choose other providers of care if they wish, through taking their Personal Budget as a Direct Payment.

5.5 LOCALITY APPROACH TO THE COMMISSIONING OF QUICK DISCHARGE SERVICES

The Entry Criteria and Quality Assurance arrangements, including those for the Quick Discharge Service are set out in sections 5.2 and 5.3, respectively.

The Quick Discharge Service is critical to supporting citizens being discharged from hospital who need care in their own home or to avoid a hospital admission.

The Council are clear about the benefits of a locality approach and all of the principles set out in 5.4 remain relevant to the quick discharge service. We have, however taken significant learning from commissioning a quick discharge service over the last eight years and from provider feedback. The service is hugely demanding and resource intensive, with around 750 citizens being supported at any time, needing to provide care within 4 hours of a referral and working with hospitals to ensure safe discharge. It is also critical to the effectiveness of the Integrated Care System and to the lives of those needing support after a hospital stay. But relationships, scale and flexibility are essential and commissioning multiple providers in the past has not worked either for the Council or for providers.

The Council will therefore continue to commission a single provider to deliver the main Quick Discharge Service across the whole of Birmingham who can demonstrate experience of delivering this level of service. However, the successful provider will be required to have staff, management and systems that will operate across each of the five localities (each made up of two Constituencies) in Birmingham. These localities have been jointly developed and agreed with the NHS and this will ensure alignment with the wider intermediate care services operated jointly as follows:

- Central: Hall Green and Selly Oak constituencies
- East: Hodge Hill and Yardley constituencies
- North: Erdington and Sutton Coldfield constituencies
- South: Edgbaston and Northfield constituencies
- West: Ladywood and Perry Barr constituencies.

These localities do vary slightly to the home support geographic model, this is because the home support model takes into account travel routes and demand for home support services. However, the localities for the Quick Discharge Service are part of a wider agreement between the Council and NHS about how these (and other) services will be delivered.

The QDS provider will be an integral partner within the Integrated Care System and specifically within the intermediate care service and will work with any current or future Community Integrator to deliver the quick discharge service.

We have also taken further learning from Covid-19 Pandemic and the demand for hospital discharges this created. In addition to the main citywide Quick Discharge Service provider, the Council will ask all providers that are successfully onboarded to the Home Support Flexible Contracting Arrangement 2024, if they wish to receive referrals to meet any additional demand the Quick Discharge Service provider is unable to meet (this will be known as Quick Discharge Service Plus). These Quick Discharge Service Plus referrals will be distributed to these home support providers based on their home support contracted geographic areas, based on the citizens postcode.

5.6 PRICING

The Council undertook a range of comparison, benchmarking and consultation to develop its fee structure in 2017 and to further understand the costs of care in Birmingham. The Council has since completed further cost of care exercises with care providers in 2019, 2021, 2022 and 2023 and has used the results in the setting of fees and increasing commissioner understanding of provider costs/pressures.

The Council publishes its cost of care findings, outputs and all associated reports and analysis, including the Market Sustainability Plan on the Council's dedicated provider webpages at:

www.birmingham.gov.uk/stm

Having considered the above exercises, the Council will continue to operate a **fixed fee** approach for children and adults home support services and for quick discharge services (which includes a premium for the Quick Discharge Service and Quick Discharge Service Plus), to continue to:

- Provide greater transparency of pricing that is fair.
- Enable all parties to plan more effectively.
- Allow investment to drive up the quality of services.
- Enable providers to recruit and retain staff.
- Keep pace with changes to the National Living Wage and general inflationary pressures.

The continuation of a requirement for all providers to open their financial accounts to the Council on an annual basis will allow the Council and providers to continue to discuss costs, identify ways in which we can work collaboratively to reduce costs, increase efficiency and also work on developing a partnership approach.

The following general pricing assumptions have also been adopted:

- The proposed rates will enable providers to pay their care workforce an hourly rate which is in line with the National Living Wage.
- The proposed rates will enable providers to pay staff employed that are under 23 years old, an hourly rate equivalent to the National Living Wage rate for over 23-year-olds.
- In addition to quality incentives and a range of support, the Council will make a commitment to increase fees annually in line with the principles set out in the Price Review Methodology section below. This is in line with our Care Act duties.
- Providers will meet the CQC requirement that they 'must provide sufficient numbers of suitably qualified, competent, skilled and experienced staff to meet the needs of the people using the service at all times and... other regulatory requirements.'
- The Council will continue to invest in IT systems that ensure prompt payment and secure cashflows, to reduce providers' financing/borrowing costs.
- Providers will take all opportunities available to reduce overheads and transaction costs.
- Net Zero – all providers will need to ensure they are familiar with the Council's aims for a Sustainable Birmingham and shall ensure that in its performance of the Service, it uses working methods, equipment, materials and consumables which minimise environmental impact.
- The Council may agree to a discretionary additional payment for a service user who is a delayed discharge from hospital, who the Council has been unable to place due to complex care needs or is under Section 117 aftercare. This will be at the sole discretion of the Council.

The Council will continue to engage with providers to explore the impact of Social Care Reform and requirements of any national grants or policy changes.

The Quick Discharge Service and Quick Discharge Service Plus, will be paid an additional fee to recognise the additional staffing, training, travel and speed of service start.

5.7 PRICE REVIEW METHODOLOGY

The Council recognises underlying price pressures within the care sector, particularly those in relation to employee costs, which make up the largest proportion of the cost of delivering care. We have invested nearly £70m in the sector through our previous Commissioning Strategies for the regulated adult social care sector – however we know there is still more to be done.

The Council is committed to ensuring the care sector remains sustainable, not only as it delivers care to some of our most vulnerable citizens, but also as a major employer across the region.

This is a key part of the Council's duties under Section 5 of the Care Act where we have a duty to shape and maintain an efficient and effective market of services for meeting care and support needs

and to ensure the Council's actions do not have any negative impacts on market as a whole and provide value for money.

We will therefore increase fees paid for care packages placed under the new Flexible Contracting Arrangements 2024 on an annual basis having considered the following principles:

- Changes in the rate of inflation including consideration of the Consumer Price Index (CPI) and the Consumer Price Index Housing (CPIH).
- Changes in national minimum wage rates including the National Minimum Wage and National Living Wage.
- Other relevant price pressures likely to significantly impact on the care sector e.g. changes to employer pension contributions and National Insurance.
- Regional price comparison data
- Open book accounting/ Cost of Care returns from care providers
- Sustainability of the care sector including the scale of providers existing the market locally
- In accordance with our Market Sustainability Plan where relevant
- Affordability to the Council within the context of the overall annual budget settlement

The Council will use the above principles each year to set a fee increase applicable from April the following year. This will be set out transparently and shared with care providers as early as possible to assist with financial and business planning.

5.8 CARE PACKAGE ALLOCATION PROCESS

Providers will be asked to submit offers for packages of care via an electronic system. The following principles will therefore apply:

Home Support Services

- Care needs will be distributed to the geographic area in which the citizen lives in the first instance. If no offers are received to meet the citizens care needs in that area, this will be offered to providers contracted in the nearest area until an offer is received.
- Each provider submitting an offer will be required to confirm that they can meet the needs of the citizen based on the individual support plan. This will have been provided as part of the requirement to the market and anonymised as appropriate.
- Provider quality ratings will be used when evaluating individual offers to meet care needs. The provider with the highest quality rating will be chosen to provide care to the citizen.
- Where there is no clear difference between the quality ratings of the providers who make an offer to support a citizen, citizens feedback will be used to determine, the successful provider. If the feedback rating fails to separate two or more offers, the first of those offers to be received shall be chosen.

- These same principles will be used for Quick Discharge Service Plus referrals made to providers on the Home Support 2024 Flexible Contracting Arrangement.

Quick Discharge Service

The Quick Discharge Service provider will be required to work with the Council and our NHS partners to submit offers or accept referrals efficiently and effectively. Citizens assessed as requiring this service will be allocated directly to the successful Quick Discharge Service provider.

In the unlikely event that the Quick Discharge Service provider are unable to meet the needs of the citizen in the time required (only with prior agreement from the Commissioner), home support providers registered for the Quick Discharge Service Plus will be asked if they can meet the citizen's needs, in accordance with the above home support allocation process.

5.9 TRANSITION ARRANGEMENTS

The Council is keen to stabilise the care being received by our citizens and the Council believe this is a collective responsibility whilst we continue to transform the market and quality of services across Birmingham.

Home Support Services

For home support services there will unfortunately be some existing contracted providers who will be unable to join the new Flexible Contracting Arrangement due to their CQC quality rating and/or because they do not have a CQC registered location within 2 miles of the Birmingham Council Tax boundary. There may also be existing contracted providers who do not meet other entry or evaluation criteria or choose not to apply for the new Flexible Contracting Arrangement. Some of these providers will currently be commissioned to support existing citizens with care funded by the Council or the Birmingham Children's Trust. We will provide the following support for those citizens and providers effected:

For citizens

1. We will make all affected citizens aware of the changes through the next social work review or reassessment.
2. We will provide clear information that explains their options, how they will be supported by the Council and how we would expect care providers to continue to support them during the transition period.
3. We will provide information, advice and guidance to all effected citizens to help them make an informed choice about whether they wish to remain with their current provider under a Direct Payment or whether they would like the Council to commission them a new provider who is contracted.
4. Where appropriate, citizens will have access to our Direct Payment Support Services providers to help them manage their Direct Payment.

For providers

1. There will be an overall two-year transition period for the market, with a regular review of risks and business intentions between Commissioners and providers to manage the impact effectively. Where providers decide to exit the contract sooner, these will be supported by Commissioners.
2. Citizens will be made aware of the changes through their next social work review or reassessment.
3. Unsuccessful providers will not receive any new commissioned packages of care from the Council.
4. The provider may contact citizens to advise them of the change and ask if they wish to consider a Direct Payment. The Council will endeavour to respond to any such requests in a timely way. However, citizens should be made aware that they have a choice and should not be pressurised or coerced in any way.
5. All home support providers contracted on 1st April 2024 will receive any relevant inflationary increase in fees that is awarded for all existing commissioned packages of care. However, any future inflationary increases will not be awarded after this point for unsuccessful providers.
6. Should citizens choose (having been supported to make an informed choice) to remain with their current provider under a Direct Payment, any fees will be uplifted in line with any relevant inflationary increases awarded for Direct Payment recipients.

Quick Discharge Services

The mobilisation and transition arrangements will be different for the Quick Discharge Service, as citizens only receive support under this contract for an average of 6 weeks. This is part of the Integrated Care System's intermediate care approach and is focussed on ensuring citizens receive support to maximise their independence.

For citizens receiving support under the Quick Discharge Service, there will be no transition period. When it is agreed by the Multi-Disciplinary Team that they have reached their goals, they will stop receiving support from the previous quick discharge service provider.

The Council will agree a mobilisation and transition plan with any successful provider/s.

For successful applicants, the terms of the new Flexible Contracting Arrangements will apply to **all** packages of care commissioned both on and after the commencement of the new Flexible Contracting Arrangements for home support and quick discharge services (or at the date of onboarding if after this date). For successful applicants, the new Flexible Contracting Arrangements will replace all previous contractual arrangements for existing packages of care.

The Council will apply any relevant inflationary fee increase for 2024/2025 from 1 April 2024 for all providers contracted under the 2019 home support contracts. For providers onboarded as part of a reopening of the Flexible Contracting Arrangement, existing home support packages will be uplifted from the date of onboarding.

There will be no fee increase for existing packages of care commissioned prior to the start of the new Flexible Contracting Arrangement for Quick Discharge Services. However, packages of care commissioned under the new arrangement will be at any new rate agreed by the Council.

5.10 SYSTEMS AND PROCESSES

The Council will ensure it maximises the use of technology to operate the Commissioning Strategy and associated contracts efficiently, effectively and with a focus on transparency. Any systems used will deliver the following key functionality as a minimum:

- **Provider enrolment** – an electronic process for those joining the contract to record and capture compliance with the entry criteria and ensure details remain up to date.
- **Quality rating** – an electronic method for calculating and recording provider quality ratings, using these in the tendering process and publishing these scores.
- **Tendering** – a simple system for providing care requirements to the market and for managing the tender, evaluation and contracting processes and linking these to citizens in the Council client records management system.
- **Supplier relationship management** – a single electronic record of each provider that can hold records of all provider/commissioners' interactions including monitoring visits, improvement plans, offers and any correspondence.
- **Data and reporting** – reporting capability that allows the Council to manage providers at both a market and individual level and can provide appropriate public quality information.

5.11 OTHER PRINCIPLES

SERIOUS INCIDENTS AND SAFEGUARDING

The Care Act 2014 Statutory Guidance makes clear that adults safeguarding responses should not be a substitute for;

- Care providers' responsibilities to provide safe and high-quality care and support;
- Commissioners regularly assuring themselves of the safety and effectiveness of commissioned adult social care services; and
- The Care Quality Commission (CQC) ensuring that regulated providers comply with the fundamental standards of care.

Adults safeguarding is therefore not intended to replace either existing governance structures or the effective management/oversight of commissioned adult social care services, but to supplement and support these arrangements to ensure a safety net is in place for all. The Council will continue to work with NHS and other commissioners across Birmingham, to develop an approach to the reporting of serious incidents and safeguarding alerts that:

- gives better oversight of quality concerns to commissioners.
- offers providers the ability to own, investigate and learn from quality issues and serious incidents.

- ensures providers receive appropriate support and training in investigating and reporting concerns and incidents.
- mandates that all quality issues, serious incidents and safeguarding incidents will be reportable.
- ensures sustainable improvements in quality and information sharing.

A similar approach and response will apply to the safeguarding of disabled children which will be managed by Birmingham Children's Trust.

6. PERFORMANCE FRAMEWORK

A performance framework will be developed to monitor delivery of the Commissioning Strategy and relevant data shared with partners and providers.

Appendix One – Maps of Geographic home support model and previous provider lot numbers

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Area 1 (North) Profile

Commissioners: Anthony Phillips and Valerie Ambrose

Everything north of the M6 motorway. This acts as a barrier in that it limits accessibility from one side to the other, so this is being used as the boundary. Area 1 is the largest in both area and weekly care hours, so has been allocated the largest number of providers.

No of Providers in 2019:	22
Large	1
Medium	2
Small	19
Children's registered	3



Area 2 (West) Profile

Commissioners: Helen Thomas, Jackie Walters and Sue Hampshire

There isn't much in the way of direct connection between the north of this area (Perry Barr and Handsworth) and the south (Quinton and Edgbaston), the area also covers the city centre (Nechells etc.).

No of Providers in 2019:	20
Large	2
Medium	3
Small	15
Children's registered	6



Area 3 (East) Profile

Commissioners: Brigid Doherty and Anthea Marriott

This is in the east of the city, comprising everything from Alum Rock across to Shard End and down to Acocks Green.



No of Providers in 2019:	16
Large	4
Medium	3
Small	9
Children's registered	2

Area 4 (South Central) Profile

Commissioners: Elaine Miller and Sharbina Mohammed

This is the south central area. It runs from Bordesley and Highgate, straight south through Moseley and Sparkhill down to Druids Heath and Hall Green.

No of Providers in 2019:	20
Large	3
Medium	4
Small	13
Children's registered	5

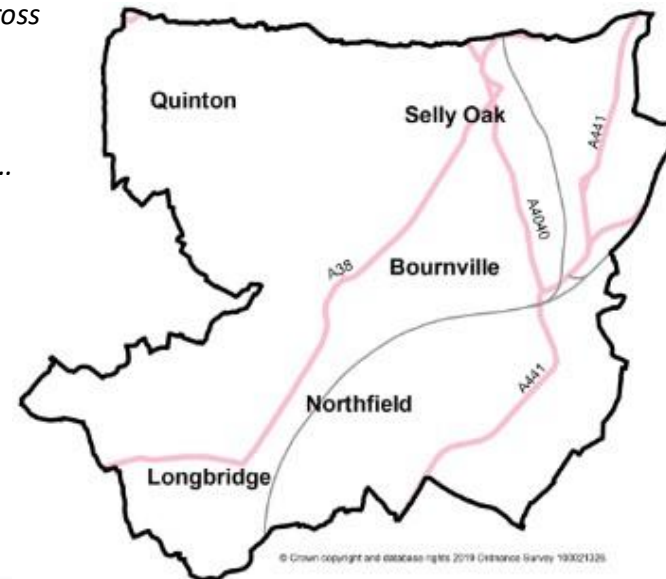


Area 5 (South West) Profile

Commissioners: Ravinder Sandhu and Thair Rashid

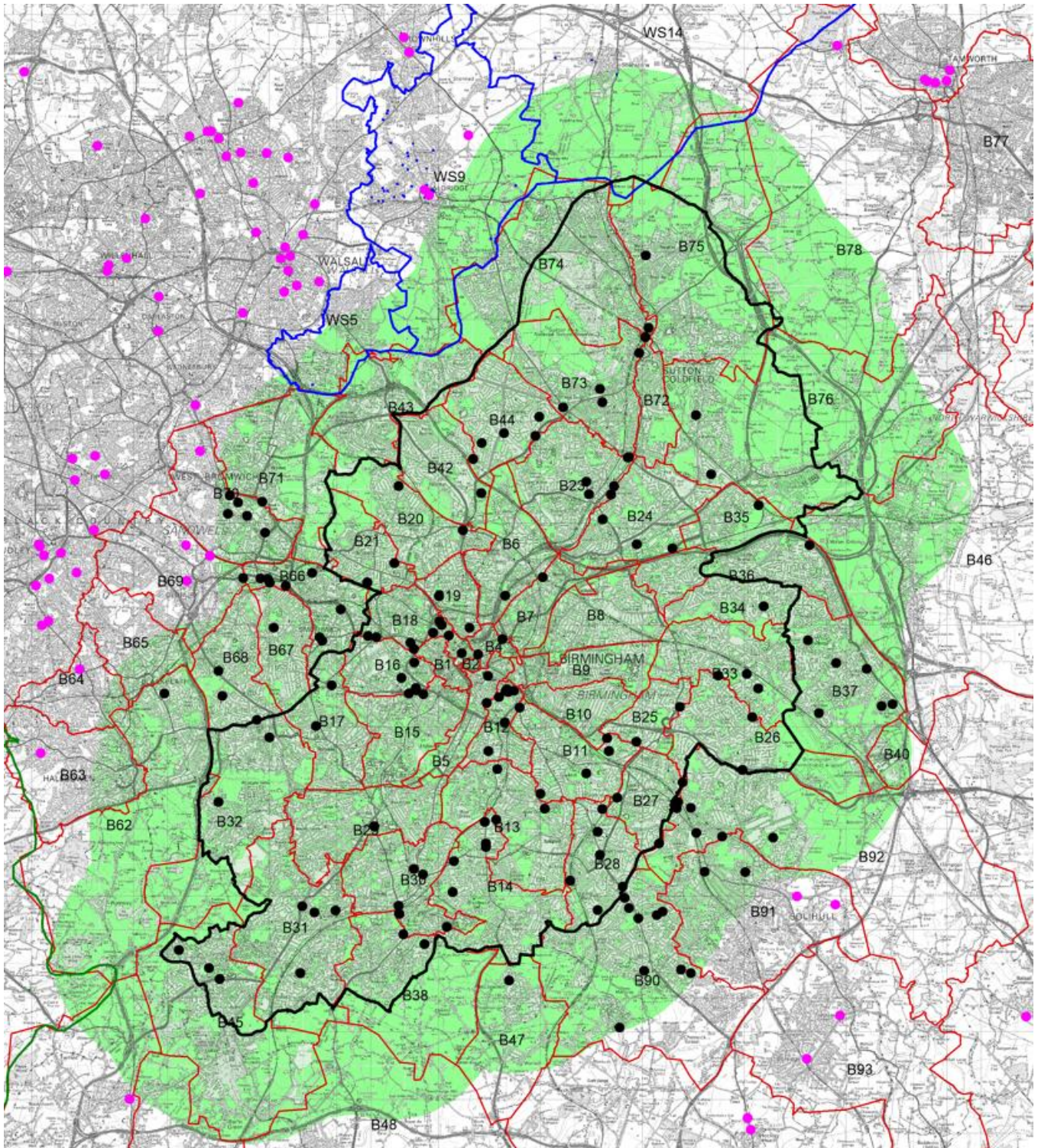
This is in the south west, comprising Bartley Green across to Bournebrook, down to Kings Norton and across to Rubery. There is a natural boundary between Bartley Green at the top of this area and the wards above it, caused by Woodgate Valley (with no roads across it)..

No of Providers in 2019:	14
Large	2
Medium	3
Small	9
Children's registered	5



Appendix Two – Maps of Geographic home support model and previous provider lot numbers

The location of the CQC registered office of each provider has been plotted in accordance with CQC published E and N data. A list of eligible provider locations will be published as part of the tender, along with the below map to ensure transparency for providers:



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