

LCC Home Care Forum

6th November 2024

9:30 – 12:00pm

Caroline Cosh, Clifton Homecare Limited (Chair)
 Carol Hargreaves, Masterstaff (Deputy Chair)
 Adam Livermore, Commissioning Support Officer, Lancashire County Council
 (Notes)

Agenda Item	Notes
1) Welcome and Introductions	Caroline Cosh welcomed everyone to the meeting. She asked all providers to put their email in the chat if they were not receiving emails from the forum email account so that they could be added to distribution lists.
2) Controcc update, LCC Survey Findings, Feedback from previous forum	<p>Tom Brown informed the panel that LCC will be taking on a new brokerage system. It will provide better data quality, and a secure platform for back-and-forth communication. It will also allow providers to maintain their own accounts and change the wards they cover. It will use an algorithm to send out packages to relevant providers, allowing for a more efficient allocation system. Training will be offered. Sessions will be confirmed at a later date.</p> <p>There will be two testing phases before go-live. The first will be internal, and the second will involve some providers. The intention is to go-live in the first quarter of 2025, ideally February.</p> <p>Caroline Cosh asked if providers would have to do any set-up. Tom Brown answered LCC plan to preconfigure accounts before go-live.</p> <p>Falcon Care asked if the system covers invoicing. Tom Brown answered that the system only covers brokerage.</p> <p>Caroline Cosh asked if the new system would provide the statistics around accepted packages providers have been asking for. Jon Blackburn answered that the ebrokerage system additional functionality for reporting and market management that the current Oracle system does not have.</p> <p>Jon Blackburn updated that LCC had sent out a provider survey after the last meeting, and they had a response rate of over 70%. He gave a presentation on feedback from the</p>



survey. It included an overview of the CQC ratings on the Lancashire PDPS. The outcome of Round 2 of the PDPS will be out in November,

The number of referrals to Care Navigation for Homecare is trending significantly lower than previous years. LCC feel it is the result of multiple factors, including internal changes to how reablement referrals are handled. Jon proposed that the introduction of the new brokerage system would be a good opportunity to audit the wards that providers can cover so that LCC have an accurate picture of capacity across Lancashire. There is also a plan to have a provider working group to discuss issues.

Jodie Nolan asked when providers can expect an announcement about increases in rates. Jon answered that LCC will be starting the work shortly, but that there are several processes required including cabinet approval. LCC hope to announce rates in the new year.

Sarah asked where the reablement referrals go if not to Care Navigation. Joe Cragg answered that operational staff refer directly to the short-term care at home block contract providers instead of sourcing through care navigators.

Bowland Care asked if there is a shortage of social care assessments being undertaken, and Ejaz Hussain asked if there is a shortage of social workers. Jon Blackburn answered this would be a factor.

Joe Cragg (Commissioning Manager-LCC) gave a presentation on Short Term Care at Home, the end-to-end service replacing Crisis. The service is intended to provide stability and maintain independence while making decisions on long-term needs.

Caroline Cosh asked if double-up packages were being allocated to short-term care upon discharge from hospital to reassess for potential single-handed care. Joe Cragg answered that it depends on the situation. If there is no existing package, the person will come to the short-term care service and there will be assessment to see if the double-up package can be reduced to a single-handed package

Caroline Cosh stated that there was some discussion that LCC are looking at recommission packages of care to long

term providers, which would make sense. Joe agreed that it is something LCC need to explore. One of the questions asked at discharge is about restarts of care and have been discussions about what should be done with those restarts operationally. There are occasionally issues with how quickly a provider can restart a package, and LCC must balance that against hospital pressures. Caroline suggested having provider representation at hospital discharge meetings, which may help create a smoother process. Joe agreed to consider if there were any ways to influence that from LCC's side.

Sarah asked if the same amount of care packages are being directed away from where they used to be. Joe Cragg answered that some care packages are. LCC used to have two home based Intermediate Care type services (crisis and reablement), which have been combined into one service from April. There are now 5 geographical areas rather than 3.

Sarah asked why the care restart process changed, as service users used to nearly always return to providers. Now some service users are telling providers they must stay in Finney House rather than go back home with our existing care package. Jon Blackburn asked for examples to be sent to LCC so that they can investigate. Joe Cragg added there is no directive to have changed the process, and they could pick it up with operational staff.

Jon stated that LCC don't have the capacity issue for assigning packages of care but there is a backlog at the assessment stage. Caroline Cosh asked if there were plans to reduce the backlog. Jon answered that it is an operational issue, but he would make enquiries with operational staff and feedback.

Hayley Harper asked if the charts in Jon's presentation include all packages of care or just the ones allocated to providers. Jon answered that the numbers he has shown are all for Homecare, coming into care navigation.

Sarah asked if most packages are being assessed as Short-Term Care. Joe Cragg stated that when somebody is referred to Short-Term Care, they would be assessed via that, but there will be referrals into social care that don't go onto that pathway.

	<p>Flexecare asked who providers should contact when they have issues with being told by social workers that the package would have to go back on the portal. Neil Harrison answered that for these issues the first port of call could also be the designated Contracts Officer. If a provider is unsure who their contracts officer is, please email the mailbox contractmgmt.care@lancashire.gov.uk.</p> <p>Karen Thompson asked if there could be an adult social care rep on the forum. Jon agreed to enquire.</p>
<p>3) Provider Only meeting to discuss feedback</p>	<p>As the minutes are handled by LCC, they were not taken for this section.</p>
<p>4) Feedback discussion with LCC reps, Q&As</p>	<p>Caroline Cosh fed back that providers agreed with the confirmation of wards for the new brokerage system, but would like some future information on how that will take place.</p> <p>Providers would like more detail on the data on packages. They would more transparency about the number of hours being awarded and who they are being awarded to, and how that looks in terms of market share. Rebecca Yates answered that Care Navigation award based on responses from providers within that ward on the individual request. They wouldn't factor in how many wards a provider has, and packages are awarded on a case-by-case basis. They don't allocate on hours lost, because they don't always know. Instead, they look at hours awarded within a week, and may factor in previous weeks as well, based on districts. Emma asked if those stats could be shared with providers. Rebecca stated she could share but it might not be exact as the information is held in an internal tool developed for Care Navigation use. Jon Blackburn added that the new ebrokerage system should allow LCC to better share and see these stats, as the current system is not built to provide them and can't differentiate between new packages and additional hours. Caroline stated they had their contract review and the data that the contract management had was incorrect, so it may be affecting providers across the board.</p> <p>Mahfooz Hussain stated he felt there needed to be a fairer system, as providers can't see which providers are getting packages and it was difficult to see how packages had dropped so significantly. Jon agreed and stated that the current systems are limited, and he is hoping to give more</p>

detailed information in February. He added Care Navigation are dealing with 219 wards and there are vast differences of the number of providers in each ward. There is no favouritism towards any provider shown by the data. Mahfooz asked for a quarterly report showing how many hours each provider got during that quarter. Caroline stated that they weren't going to get the granular data easily before the ebrokerage and asked for confirmation it would be available at some point. She asked if there was anything that could be pulled together to show providers in the meantime. Karen Thompson stated LCC can't break down the Oracle system to wards, but that system should be capturing offers and awards. She agreed to liaise with Rebecca Yates to see if that could be provided. Care Navigation have a list of priorities, including provider of preference for the service user, and only look at numbers of previous awards lower down that list of priorities. However, even in that case there isn't a set rubric. Caroline asked if provider notes were considered. Karen confirmed they are.

Jimmy Anyon asked if providers could submit monthly hours to their contract manager along with the KPIs and have the contract managers collate them. Karen agreed that Contract Management could work that out and use it as a piece of intelligence.

Mahfooz asked why service user choice is so prioritised when service users might not be able to make a fully informed choice as they wouldn't know all 77 providers on the PDPS He suggested revisiting the list of priorities to ensure a fair process for providers. Karen stated there is a dashboard where they can see distribution across the PDPS, but LCC may need investigate the data further to see the spread of packages. There is a potential oversubscription to the PDPS. She added that there could be issues caused by providers being subscribed to the wrong wards, which will be helped by the audit.

Neil Harrison stated LCC would share the process of how packages are awarded. Even with providers submitting their hours, it would be difficult to draw an accurate picture, as providers are all different sizes with different ambitions. Jon stated this discussion supports the need for a provider working group. Caroline said that she had already received some volunteers and would send an email for potential volunteers to reply after the meeting.

	<p>Caroline asked for LCC to look at peak-time requests for non-time critical tasks. She also raised an issue where a provider is getting a lot of short-term care packages which are then stopped as the SU is told they don't provide long term care, despite the provider being on the PDPS. Jon asked the provider to get in touch with him or Neil Harrison.</p> <p>Caroline asked if the focus would be on new providers to the PDPS following the outcome of round 2, or on current providers. Karen stated that there is no plan to prioritise new providers, and everyone is weighted equally.</p> <p>The intention is to start the working group towards the end of November.</p>
5) AOB and Close	No further business was raised.