



Essex Care Association,
ECA / ECTP Office 4,
251-255 Church Road,
BENFLEET,
Essex
SS7 4QP

28th July 2020

Dear Moira,

Re: Live at Home Framework Tender

It was helpful to have some initial discussions with you and Steve Ede on Monday about the proposals to retender the Live at Home contract. As we mentioned on the call, some of our members have raised concerns with us about the timing and scope of the exercise as detailed below.

To start with some positives, we are pleased to see that ECC intend to work as far as possible with good and outstanding providers. We can also see that the outputs of the ECA/ECC working groups from last year have helped to shape and influence the direction of travel. We are also pleased that ECC was able to move quickly to introduce a number of mechanisms to support Home Care Providers during the earlier part of the year. Similarly, the work that was done to try to get the 'Infection Control Fund' monies to providers was appreciated.

However, our members tell us that the workforce are tired and exhausted. They have coped admirably with the challenges they have faced, but stresses of managing and sourcing PPE; keeping up with constantly changing and inconsistent guidance; managing staff absences and responding to relatives' concerns on top of simply caring for and supporting vulnerable Essex residents has taken its toll. Annual leave was initially banned; then relaxed and now we are perhaps in the eye of the storm, providers are trying to fit in leave before a second wave hits. At the same time, ECC is seeking to start provider engagement on the new tender. Not only that, but any providers who also want to deliver Supported Living for ECC will have to be completing a tender process for that on a similar timeline. This is not manageable.

Providers are still under a lot of pressure. One of our members (who is a senior manager) joined us on a video call to talk about her concerns. She started by apologising that she was still on call in one of their Extra Care schemes and may have to go at any moment. There is little spare capacity at the moment and we are also concerned that some carers will exit the profession due to fatigue and/or stress. We know that some providers were quite late in submitting bids to you for financial support, because they were so focussed on frontline delivery, they did not have time to step back and work on claim forms.

We are concerned that the opportunities to reflect and learn from the flexibilities that ECC put in place over recent months will now be lost. This would have been the perfect time to see what innovations could be kept in order to prepare us for a potential second wave and to inform a procurement possibly next year. This would benefit Essex residents over the winter and over the life of the new service.

We are concerned that the new service that is proposed does not seem to be much different from what is in place now. Whilst we can see some influence of the engagement we had with your officers last year, in most instances, the changes are not significant which leads us to question what the benefits of seeking to implement something for next February will be other than perceived contract compliance.

We are also concerned that there are significant issues that have not yet been resolved, for example:

- Pricing appears to be simplified, but the ranges not yet defined.
- Volumes for Tier 1 providers are not stated. If providers are clearer on volumes, they can focus on improving recruitment and retention in line with the draft Care Market Workforce Strategy.
- There does not seem to be significant changes to rationalising the number of providers in spite of the stated intent to do so.
- Electronic Home Care Management will be needed from the 'go live' (or by August?), but no requirements have been shared. Providers will have little time to source and cost this for their bids and then get it operational following award.
- Introducing a new EHM system can be very labour-intensive. A larger provider reported that they needed around eight weeks to input all the required data and then a phased launch across different areas.
- There remains significant concern that EHM may be directly linked to payments, despite us having built a good understanding with your officers on how the market feels about this. There are still cultural as well as technical issues to be worked through.
- Test and learn is welcomed as a principle, but it will very likely have an impact on the amount of work that providers take on as alternatives develop. How can they price their services if volumes may fall part-way through the contract?
- It is not clear how integration with Health will be supported under new proposals.

We understand that ECC have considered whether the Covid-19 crisis is sufficient reason to postpone this activity and that the legal advice was no it isn't. We accept that the advice is appropriate for some areas of Council procurement, but that it has not adequately considered the impact of Covid-19 on the care market locally and nationally as we have set out above.

We note that ECC intend to review the approach later in the year, and not go ahead if conditions in the county are unfavourable, but we are concerned that engagement with providers is already going into the diary for August so it will take time and energy away from more pressing operational issues or time that could be spent reflecting, learning and planning for a second wave of Covid, not to mention the usual 'winter pressures'.

We do recognise the point made on the call that if the procurement is delayed, that challenge may come from existing providers wanting to reprice, not just from potential new entrants, which we think unlikely.

We hope that ECC will reconsider the current approach so we can put our energies into resting the workforce; engaging with ECC on lessons learned and preparations for a second wave of Covid-19, then moving to procurement next year.

Yours Sincerely,



Clive Weir,
Chair, ECA



Simon Harniess,
Director of Development, ECA

Cc Cllr. John Spence, Cabinet Member for Health and Social Care
Nick Presmeg, Director of Adult Social Care
Steve Ede, Head of Procurement