

Open Report on behalf of Glen Garrod, Executive Director of Adult Care and Community Wellbeing

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| Report to: | Councillor Mrs W Bowkett, Executive Councillor, Adult Care and Public Health |
| Date: | 28 February - 4 March 2022 |
| Subject: | Carers Support Service Re-Procurement |
| Decision Reference: | I022920 |
| Key decision? | Yes |

Summary:

The Carers Support Service is designed to support adult carers over the age of 18, young carers transitioning from early help arrangements, parent carers, former carers, and families of substance misusers. It provides the universal (available to all) prevention offer to carers, including information and advice, benefits advice and support, peer support, carer learning and access to a wide range of preventative, community-based support. It provides the face-to-face statutory carer assessment, support planning and review function. It provides a broad range of personalised tailored support, relieving carer burden, and enabling carer breaks, funded as required via a carer personal budget. And under a strategic engagement and influencing function, provides pro-active hospital in-reach, employment support, and proactively engages and influences to help identify and support carers early in their caring journey.

Following a procurement process in 2016, a contract for a countywide Carers Support Service was awarded to Carers First, commencing in June 2016 for a maximum duration of five years. The contract has been further extended for a period of 16 months as a consequence of the impact of the Covid-19 pandemic, to ensure continuity for this vital service. The current contract expires on 30 September 2022, and it is therefore necessary to make decisions about the future scope and procurement of the service.

This report seeks approval from the Executive Councillor for Adult Care and Public Health to procure a new contract for Carers Support Services.

Recommendation(s):

That the Executive Councillor:

- (1) Approves a procurement be undertaken to deliver a contract to be awarded to a single provider of a county-wide Carers Support service for a period of three years with the possibility of a further two-year extension.
- (2) Delegates to the Executive Director of Adult Care & Community Wellbeing, in consultation the Executive Councillor for Adult Care and Public Health, the authority to determine the final form of the contract and to approve the award of the contract and the entering into of the contract and other legal documentation necessary to give effect to the above decision.

Alternatives Considered:

1. Negotiate a revised contract with the current provider

Continuing with the current provider is not viable as there is no legal basis on which to extend the contract.

2. To do nothing

The service is a critical mechanism in maximising and maintaining the independence of Lincolnshire's residents. Without this service the impact on Lincolnshire's carers, the people they care for, and the wider health and care system would be far reaching and highly disruptive. It would also not address the statutory requirements of Lincolnshire County Council relating to promotion of the wellbeing of carers, and to prevent, reduce and delay the onset of need under the Care Act 2014.

3. Deliver the service in-house

A review of alternative delivery channels considered the potential to in-source service delivery at the conclusion of the current contract. This aspect of the review concluded that there would be significant additional cost and complexity associated with in-house delivery and as a result, this option should not be pursued.

Reasons for Recommendation:

1. The Carers Support Service offers a critical support function which is at the forefront of maintaining the independence of Lincolnshire's residents. Without this service the impact on Lincolnshire's carers, the people they care for, and the wider health and care system would be far reaching and disruptive. Not

only is an effective Carers Support service beneficial for health and wellbeing of Lincolnshire's unpaid carers, it also reduces reliance on other commissioned health and care services by the people they care for, and therefore delivers savings by preventing, reducing and delaying the presentation of eligible needs to the Council.

2. The alternatives considered have been deemed unacceptable in delivering the required outcomes of the service.
3. The service addresses and supports the statutory requirements in relation to preventing, reducing, or delaying needs under the Care Act 2014.

1. Background

- 3.1 The Carers' Support Service is a key component of the County Council's response to its duties under the Care Act (2014). The Care Act and the Children and Families Act (2014) give carers full legal recognition, placing their needs and rights on an equal footing with those for whom they care. The Acts place a general duty on councils to promote the wellbeing of carers, and to prevent, reduce and delay the onset of need. Statutory guidance for both Acts emphasises the need to take a 'whole family' approach to meeting need.
- 3.2 The Council has used its powers under the Care Act (2014) to commission services in support of its functions of carer assessment, eligibility determination, support planning, authorisation of carer personal budget and review from its commissioned service providers, Carers FIRST and Serco as part of the arrangements described below at 1.3 to 1.5.
- 3.3 The Carers' Support Service supports adult carers over the age of 18, young carers transitioning from early help arrangements, parent carers, former carers, and families of substance misusers. It provides:
 - Information and advice
 - Access to a wide range of preventative, community-based support
 - Face to face statutory carer assessment, support planning and review
 - Emotional and practical support, informal advocacy
 - A very broad range of personalised tailored support, relieving carer burden, enabling carer breaks, funded as required via a carer personal budget
 - Peer support, carer learning, and a wide range of wellbeing activities
 - Access to carer breaks
 - Benefits support, pro-active hospital in-reach, employment support
 - Strategic partnership: engagement, planning and influencing
 - Added value with various carer projects (e.g. September) successfully funded externally

3.4 Serco was commissioned separately and corporately to provide the Customer Service Centre (CSC). Within their Care and Wellbeing Hub is the Carers Team which also provides support to carers. The telephone-based service includes:

- A promoted 'front door' phone number for the Lincolnshire Carers' Service
- Administration of new contacts
- Brief interventions including:
- Information and advice
- Access to community-based preventative support
- Triage and pathway to full range of Carers FIRST service provision
- Statutory carers' assessments, support planning and review
- Personalised, tailored support funded by carer personal budget as required
- Access to carers breaks
- Carers Emergency Response Service – individual plans and crisis response
- Out of hours crisis response (Emergency Duty Team)
- Administration of direct payments for carers

3.5 Together, the services commissioned from Serco CSC Carers Team and Carers FIRST make up the Lincolnshire Carers' Service.

4. Current Service Summary

4.1 Carers FIRST was appointed to provide the Carers' Support Service in 2016. The original five-year contract ends on 30 September 2022, following extension by an additional 16 months due to the pandemic.

4.2 The Serco contract comes to an end on 31 March 2024.

4.3 The current model of delegated statutory support to carers is performing well, benefiting from the expertise of Carers First, a national provider of services dedicated to carers' support. Along with the implementation of the Care Act (2014) and Children and Families Act (2014), and introduction of strengths-based approaches to the service, support for carers in Lincolnshire has been significantly consolidated and strengthened in recent years.

4.4 In addition to the core commissioned services making up the Lincolnshire Carers Service, initiatives funded by the Better Care Fund (BCF) have enabled an extended reach. These are summarised as follows:

- Offering pro-active early help to carers in health settings, including Lincolnshire's main hospitals, working with Healthy Living Pharmacies, personal budget authorisation and increased benefit support capacity - delivered through a variation to the Carers First Carers Support Service Contract.
- Supporting carers in employment and promoting the 'Employers for Carers' initiative - delivered through a stand-alone contract with Carers First, ending 30 September 2022.

- The Carers Quality Award (CQA), a quality framework for services and organisations to deliver in practice the principles set out in the Lincolnshire Carers Charter. Delivered by the charity EveryOne to the health, business and employment sectors concluding 30th September 2022.

4.5 The diagram below gives a visual representation of the current arrangements:



- 4.7 The Carers' Service has continually sought to develop its practice and offer. It has benefited from consistent, long-term support from the Customer Service Centre, Principal Practitioner, Commercial Services, Quality Assurance, Performance and Children's Service colleagues.
- 4.8 The Carers Support Service contract, Employment for Carers Contract and CQA Grant all expire on 30 September 2022, and it is therefore necessary to make decisions about the future scope and procurement of the service.

5. Service Review

- 5.1 Over the past 18 months, with a hiatus due to the pandemic, commissioners have taken a thorough approach to reviewing service performance, impact, benchmarking, literature, and engaged with carers and other stakeholders, including the provider market, to inform the design of the new Carers Service. The review has highlighted strong service performance, and no concerns with the quality and impact of the provider's service delivery. It also highlighted the need to resolve the presentation of the perceived two provider model, with a strong, single, unified service identity moving forward. There is much consensus across the findings from

the various review strands, confirming the strengths of the current approach and lending weight to the need for improvements to the existing model.

6. Proposed Changes to Current Arrangements

- 6.1 The review concluded that the existing contract model works well, and it is proposed to re-commission the service in largely the same format. The intention is that the service will continue to assist the Council in meeting its legal duties to carers, providing services for face-to-face carer assessment, eligibility determination, the planning and provision of support, authorisation of personal budgets and review. The core contract will incorporate the successful elements of the currently BCF funded initiatives, and build several changes and improvements summarised in points a. and b. below.

a. Improvements and refinements

Service development opportunities will be addressed in the new specification and associated operational processes, intended to support improved service awareness and access, improve partnership working, support the management of service demand, and improve focus on the setting and monitoring of outcomes for carers. These are summarised as follows:

- A single service identity not tied to either provider organisation
- A clearer, simpler carer pathway that reinforces the Serco CSC Carers Team Centre as the 'front door' and single point of contact for enquiries to the service (as illustrated at 4.2 below).
- Serco CSC Carers Team will undertake all Triage/Carer initial conversation activities and the new support provider will undertake all full carer assessment and review activities.
- A central point of information
- A focus on identifying carers early requiring the provider to plan and have a strong offer of service promotion and carer awareness to all stakeholders
- Improved digital access and with an offer of inclusion
- A strengthened offer of carer involvement in the service, such as co-production of service improvements and volunteering opportunities
- Integrated CCG and Health provider approach to carer support including embedding a whole family approach where there is an increase in combined assessments and reviews
- Mosaic workflow will be redesigned and the whole service will use it for case management. The redesign will enable outcome focussed reporting for stakeholder accountability and commissioning intelligence
- The Carers Emergency Response Scheme (CERS) will build in self-help, advance planning, and prompts to update plans
- Strengthened leadership and support for joined up statutory professional practice across Adult Care, Children's Services, LPFT and the Carers' Service provider through a Lincolnshire County Council Carers Practice lead.

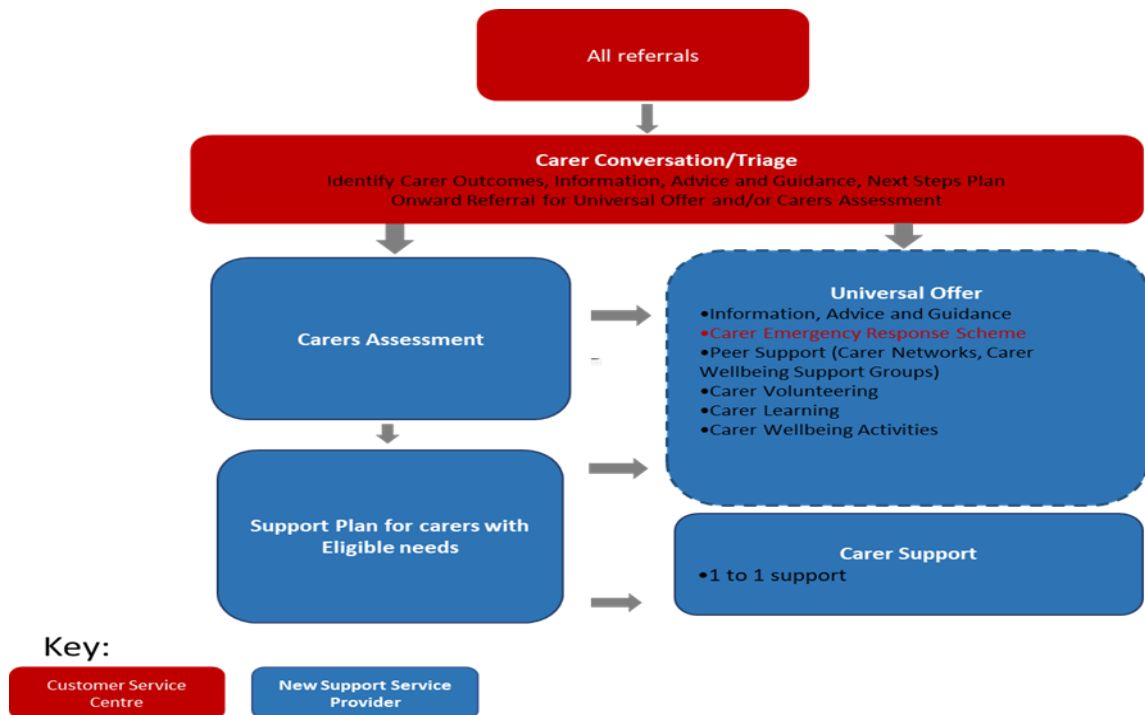
It should be noted that several of the improvements proposed, such as better joint working and performance reporting across both elements of the Lincolnshire Carers Service through a redesign of the Mosaic carer workflow, and strengthened leadership for quality professional carers' practice, need to be Lincolnshire County Council rather than provider led improvements, and as such are noted as key dependencies in this report.

b. Separate Substance Misuse Family Support and Young Carer Engagement

It is proposed to remove two elements of the existing service from the scope of the new service.

- i. Support for families affected by substance misuse as part of the current Carers Support Service has proved problematic due to the nature of the needs of the group. Families of substance misusers do not typically see themselves as 'carers', and this has proved to be a barrier to engagement. The review shows that most local authorities commission a separate specialist service or include provision within substance misuse treatment and recovery services, and that this works well for them. It is therefore proposed to commission a Substance Misuse Family Support service alongside the County Council's substance misuse treatment and recovery services when the current contracts conclude at the end of September 2023, and in the intervening twelve month period, delivery of this element will be incorporated into the existing Substance Misuse Recovery contract, with which there is good alignment, in order to benefit from established staffing and infrastructure during this interim period.
- ii. Young carer engagement is aligned to Young Carer service provision and the related offer to children and young people, delivered in house by Children's Services. This builds on Children's Services existing relationships with schools and other relevant partners and so it makes sense for this to be led by Children's Services in future. However, support for the transition of young carers who are likely to need support into adulthood will remain in scope of the new Carers Support Service. The service provider will be expected to collaborate closely with Children's Services to maintain engagement with this cohort.

- 6.2 The main changes proposed and described above in 4.1 are illustrated by the new service flow diagram below.



7. Demand and Financial Modelling

- 7.1 Projections from the 2011 census estimate there to be 88,000 unpaid family carers in Lincolnshire. The service data for the Lincolnshire Carers Service (both providers) shows us that over the last 3 years (2018-2021) the service has supported an average of 9990 carers. This is an average of 11.8% of Lincolnshire's caring population
- 7.2 Service data also shows us that the incumbent Carer Support Service provider has supported an average of 6152 carers over the last three years. The effect of the pandemic on service provision, coupled with other factors linked to the way in which data is currently collected, has meant that the usual method of using trends to project future demand would not be reliable at this current point in recovery, therefore, to forecast future demand for the new contract the average carers supported figure has been used as a baseline and incremental growth applied to the penetration rate, increasing from 11.8% to 14%. On that basis the new provider would be asked to directly support between 5,883 and 7,121 carers. The first two rows of table 1 below illustrate this.
- 7.3 To understand if the budget for the new contract can fulfil the requirements of the specification a unit cost has been calculated using the existing budget and the number of carers supported by the incumbent provider. This provides a unit cost of £237.26. Applying this to expected demand for the next 5 years informs us that a total budget of £7,746,875 is required if the provider is to support an average of 6530 carers a year (row 3 of table 1 below).

Table 1: Demand and Financial Modelling Projections

| Penetration Rate (Growth) | 2022 (11.8%) | 2023 (12.5%) | 2024 (13%) | 2025 (13.5%) | 2026 (14%) | Total | Yearly Average |
|--|-------------------------|-------------------------|-----------------------|-------------------------|-----------------------|--------------|---------------------------|
| Carers Supported | 5,883 | 6,264 | 6,548 | 6,834 | 7,121 | 3,2651 | 6,530 |
| Budget Required (£237.26 Unit Cost) | £1,395,798 | £1,486,293 | £1,553,693 | £1,621,480 | £1,689,610 | £7,746,875 | £1,549,375 |
| New Budget | £1,708,868 | £1,708,868 | £1,708,868 | £1,708,868 | £1,708,868 | £8,544,340 | £1,708,868 |
| Difference to New | £313,070 | £222,575 | £155,175 | £87,388 | £19,258 | £797,465 | £159,493 |

- 7.4 The difference between the ‘required’ and ‘new’ budget lines is important to the viability and success of the new model, because this will allow for the management and delivery of the agreed service improvements as well as providing a contingency for unexpected demand above that projected and support the impact of inflation. The identified service improvements are outlined in section 4 above.
- 7.5 Benchmarking with other local authorities confirms that the unit cost of £237.26 for Lincolnshire is broadly equivalent to other outsourced carers services.
- 7.6 It is also important to note that the carers service is preventative in nature as not only does it support carers to sustain their caring role and promote carer quality of life it also reduces and delays the number of people accessing formal long-term care. Carers UK Facts and Figures 2019 report that carers save the economy £132 billion a year which is an average of £19,336 per carer. If this figure is applied to the average 6530 carers to be annually supported by the new contract, the investment made in them would be £1,549,375 while the savings they make to the local economy are estimated to be £126,264,080. So, for every £237 invested in a carer the return is £19,336. Consequently, there is a strong economic case for supporting carers.

8. Budget and Cost Implications

- 8.1 The working assumption is that the new service will be commissioned within the current available budget. A pooled budget with multiple income sources of £1,708,868 is potentially available from existing Public Health budgets to fund the new service.
- 8.2 Demand and financial modelling work indicates the full budget allocated to the Carers Support Service is adequate to meet expected demand, including reasonable growth, and make identified improvements to the service provision in order to take a proactive and preventative approach to identifying and supporting carers, whilst also contributing to the development of carer friendly communities and businesses. The ‘in-principle’ sufficiency of the proposed budget has also been explored and validated as part of the market engagement process.
- 8.3 The tender process will test the deliverability of service expectations within the constraints of the available budget, and competitive tension will ensure value for money is maximised.

9. Risks and Dependencies

- 9.1 The proposed budget needs to support service improvements and account for demographic trends indicating a growth in carer numbers and increasing complexity of need. Demand and financial modelling work suggest this is achievable, but growth in demand in excess of projected levels and rising inflation could still place pressure on the budget during the term of the new contract. The increased focus on early help, prevention and digital delivery in the updated model should help to manage demand and costs, and discussions are ongoing with Lincolnshire Clinical Commissioning Group regarding its budgetary contribution to the service with a view to securing an enhanced contribution in future years.
- 9.2 Redesign of the Mosaic workflow is necessary to support and embed the proposed service improvements and enable whole service reporting to meet management information needs, comprising, service performance, commissioning intelligence, stakeholder accountability and Information Governance. Work on this is underway and represents a key dependency in the future success of the service.
- 9.3 Serco Customer Service Centre Carers Team - This provides the Lincolnshire Carers Service 'front door' and statutory support to carers by telephone, as well as running the Carers Emergency Response Scheme (CERS). Several of the proposed service improvements, in particular those linked to service awareness and access, the re-alignment of roles for referral management, triage and statutory carer assessments, and partnership working, rely on the engagement, buy-in and support of Serco, which has been good to date.
- 9.4 Adult Care and Children's Services professional practice developments - Of prime importance to the success of supporting carers effectively, is the need for professional practice leadership to promote and sustain high quality joined up, Care Act compliant practice, across the Council and the commissioned service from whom it receives services.

10. Commercial Model

- 10.1 Taking account of the findings from the review work undertaken, including the market engagement feedback, demand and financial modelling, and required service improvements, it is proposed the commercial model for the new service will be structured as summarised below.
- 10.2 Delivery will be by a single provider of a countywide service, working in partnership with the Serco CSC Carers Team. This is consistent with the current model for delivery, and its viability is supported by the market engagement exercise. The competition phase will not preclude bids from consortia and sub-contracting models, which should help to maximise the level of competition.

11. Payment and Performance

- 11.1 Payment will be by way of a fixed sum (block payment) for the delivery of the Services. Unit prices will also be generated within the financial submission which can be used as the basis for an additional payment should the volumes of service exceed those projected, subject to approval by the Council, within the available budget.
- 11.2 Utilising the Service Provider's financial submission at tender stage, the contract will include an Open Book Accounting approach as a basis for assessing whether the Service Provider is generating any excess profit. As part of the open book approach to understand the Service Provider's actual costs of service delivery, where the actual costs of service delivery are below the tendered service delivery cost, a mechanism will be included to enable the Council to share in that efficiency saving by way of a gain share mechanism.
- 11.3 Performance management will continue to be embedded into the contract. This will be linked to manageable, measurable and achievable targets aligned to the agreed key performance indicators, and a formalised system of managing and monitoring performance against the contract. A review of contract KPI measures is being undertaken prior to commencement of the procurement process to help to ensure that the required service levels are optimised. KPI measures will focus on the achievement of outcomes for carers and the wider service, and if delivery falls below the agreed Service Levels it will be possible to make proportionate deductions to the contract Fee through the application of Service Credits to relevant Key Performance indicators.

12. Contract Commencement and Duration

- 12.1 The existing Carers Support Service contract concludes on 30 September 2022, with the new contract needing to commence on 1 October 2022.
- 12.2 The proposed duration of this contract will be for an initial period of three years with an extension period of two years. The attractiveness of this approach was tested as a part of the market engagement process, and the views of the market provided validation that the proposal is a realistic, reasonable and attractive term for the contract.

13. Procurement Implications

- 13.1 The Procurement is being undertaken in accordance with regulations 74 to 76 of the Public Contract Regulations 2015 under "Light Touch Regime" utilising an Open Procedure method. An OJEU Notice will be published in December 2021 and a Contract Award Notice will be issued on any award to a successful bidder.
- 13.2 In undertaking the procurement the Council will ensure the process utilised complies fully with the EU treaty principles of openness, fairness, transparency and non-discrimination.

- 13.3 The procurement process shall conform with all information as published and set out in the OJEU Notice.
- 13.4 All time limits imposed on bidders in the process for responding to the OJEU Notice and Invitation to Tender will be reasonable and proportionate.
- 13.5 Subject to the maximum available budget and a commitment to deliver the service volume expectations, which have been profiled as described at section 5, the final cost of the service will be determined via competition.
- 13.6 Invitation To Tender evaluation will focus on a combination of service cost and quality, and the capability of the single provider and any organisations they may wish to form sub contracting arrangements with, to deliver the required volume of service and quality outcomes across the county.

14. Public Services Social Value Act

- 14.1 In January 2013 the Public Services (Social Value) Act 2013 came into force. Under the Act the Council must before starting the process of procuring a contract for services consider two things. Firstly, how what is proposed to be procured might improve the economic social and environmental wellbeing of its area. Secondly, how in conducting the process of procurement it might act with a view to securing that improvement. The Council must only consider matters that are relevant to the services being procured and must consider the extent to which it is proportionate in all the circumstances to take those matters into account. In considering this issue the Council must be aware that it remains bound by EU procurement legislation which itself through its requirement for transparency, fairness and non-discrimination places limits on what can be done to achieve these outcomes through a procurement.
- 14.2 A stronger and well-resourced carers' support service will have the potential to deliver increased social and economic benefits to the area by;
- 14.3 Helping people to live at home for longer; helping relieve pressure on acute hospitals, care homes, community care and the wider health system by assisting, supporting and sustaining informal care arrangements and preventing avoidable admissions to hospital.
- 14.4 Ways will be explored of securing social value through the way the procurement is structured. The operation of sub-contracting and consortium arrangements will be explored as a means of ensuring a role for local small to medium-sized enterprises (SMEs) in the delivery of the services. Evaluation methodologies will incentivise the delivery of a skilled and trained workforce.

14.5 Under section 1(7) of the Public Services (Social Value) Act 2013 the Council must consider whether to undertake any consultation as to the matters referred to above. The service and the value which it delivers is well understood. Best practice recently adopted elsewhere has been reviewed. This and the market consultation carried out is considered to be sufficient to inform the procurement. It is unlikely that any wider consultation would be proportionate to the scope of the procurement.

13. Legal Issues:

Equality Act 2010

Under section 149 of the Equality Act 2010, the Council must, in the exercise of its functions, have due regard to the need to:

- Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Act.
- Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it.
- Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

The relevant protected characteristics are age; disability; gender reassignment; pregnancy and maternity; race; religion or belief; sex; and sexual orientation.

Having due regard to the need to advance equality of opportunity involves having due regard, in particular, to the need to:

- Remove or minimise disadvantages suffered by persons who share a relevant protected characteristic that are connected to that characteristic.
- Take steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of persons who do not share it.
- Encourage persons who share a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.

The steps involved in meeting the needs of disabled persons that are different from the needs of persons who are not disabled include, in particular, steps to take account of disabled persons' disabilities.

Having due regard to the need to foster good relations between persons who share a relevant protected characteristic and persons who do not share it involves having due regard, in particular, to the need to tackle prejudice, and promote understanding.

Compliance with the duties in section 149 may involve treating some persons more favourably than others.

The duty cannot be delegated and must be discharged by the decision-maker. To discharge the statutory duty the decision-maker must analyse all the relevant material with the specific statutory obligations in mind. If a risk of adverse impact is identified consideration must be given to measures to avoid that impact as part of the decision-making process.

The key purpose of the service is to support carers' wellbeing and those for whom they care many of which will have a protected characteristic, helping them to achieve a balanced quality of life and giving carers' the ability to have some choice and control in their caring role. In that sense the delivery of the service helps to advance equality of opportunity. The providers' ability to provide services which advance equality of opportunity will be considered in the procurement and providers will be obliged to comply with the Equality Act.

An Equality Impact Assessment (EIA) has been undertaken and is available at Appendix A. This is not the final version as the EIA is a live document that is updated throughout the re-commissioning process. The EIA identifies that the new service model inclusive of the proposed changes does not have any perceived adverse impacts on people with protected characteristics.

Joint Strategic Needs Analysis (JSNA) and the Joint Health and Wellbeing Strategy (JHWS)

The Council must have regard to the Joint Strategic Needs Assessment (JSNA) and the Joint Health & Wellbeing Strategy (JHWS) in coming to a decision.

Carers are one of the seven priorities of the Joint Health and Wellbeing Strategy. Re-commissioning the Carers' Service builds on achievements across Health and Care for carers to date, and helps support the integrated delivery plan to:

- increase the early identification of adult and young carers in Primary Care
- support young carers in schools
- support carers to plan for the future, including employment and emergencies
- influence and shape preventative measures and support for carers

In addition, the service provider will be part of the system wide support to improve the identification and support of carers as set out in a Memorandum of Understanding, approved by the Health and Wellbeing Board. This is monitored on an annual basis through a report to the Board.

Crime and Disorder

Under section 17 of the Crime and Disorder Act 1998, the Council must exercise its various functions with due regard to the likely effect of the exercise of those functions on, and the need to do all that it reasonably can to prevent crime and disorder in its area (including anti-social and other behaviour adversely affecting the local environment), the misuse of drugs, alcohol and other substances in its area and re-offending in its area.

This service is unlikely to contribute to the furtherance of the section 17 matters.

14. Conclusion

- 14.1 Re-procuring the service supports the Council in fulfilling its statutory duties related to support for carers under the Care Act 2014.
- 14.2 From a social care perspective, there is a high probability that Carers Support Services are cost effective in preventing, reducing or delaying the need to higher cost care and support service, by helping to sustain informal care arrangements for longer.
- 14.3 It is expected that the proposed improvements to the carers support service, through the specification and to associated processes, will enable the Council to maximise the service impact and benefit to end users, as well as improving the ability to evidence value for money.
- 14.4 Future alignment of support for families of substance misusers to the substance misuse treatment and recovery provision should benefit both carer and substance misuse provisions; it will provide a smooth pathway, the specialist knowledge required, and best value, and should increase the number of people in treatment and recovery.
- 14.5 Revised Key Performance Indicator (KPI) measures will also help to ensure that the required service levels, outcomes, and impact are optimised.

15 Legal Comments:

The Council has the power to enter into the contract proposed.

The proposal is compliant with the Council's procurement law obligations.

The decision is consistent with the Policy Framework and within the remit of the Executive Councillor if it is within the budget.

16. Resource Comments:

The budget available for the carers contract is set based upon its historic level. For reasons highlighted throughout the report there is no service need to increase the budget.

17. Consultation

a) Has Local Member Been Consulted? N/A

b) Has Executive Councillor Been Consulted? Yes

c) Scrutiny Comments

The decision will be considered by the Adults and Community Wellbeing Scrutiny Committee on 23 February 2022. The comments of the Committee will be reported to the Executive Councillor.

d) Risks and Impact Analysis

See body of report and Appendix A, the Equality Impact Assessment.

18. Appendices – These are listed below and attached to the report.

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| Appendix A | Equality Impact Assessment - Re-commissioning of Lincolnshire's Carers Support Service |
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19. Background Papers

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

This report was written by Carl Miller, who can be contacted on 07879 412886 or carl.miller@lincolnshire.gov.uk.