

Care and Wellbeing Service Mobilisation

Paul Higginbottom
Strategic Commissioning Manager

26 February 2024

Welcome and Introductions

Vision and importance of our new Care and Wellbeing Service

Alexis Chappell
Strategic Director of Adult Care and Wellbeing

Care and Wellbeing Service – Our vision

Workforce front and centre with care workers able to benefit from working on shifts.

A highly skilled and trained workforce fit for the future with a joint commitment to development

A workforce that is valued and has parity of esteem across Health and Social Care

Locality based service provision with the move from provider competition to collaboration.

Neighborhood working that connects people to their communities with a strengths based approach.

Collaborative working that supports integration and a seamless experience of care

Providers empowered to deliver flexible and responsive services with care workers able to respond timely to changes in need.

Move away from “time and task” to outcome based service delivery.

Consistently high quality services for all, with a commitment to technology and innovation.

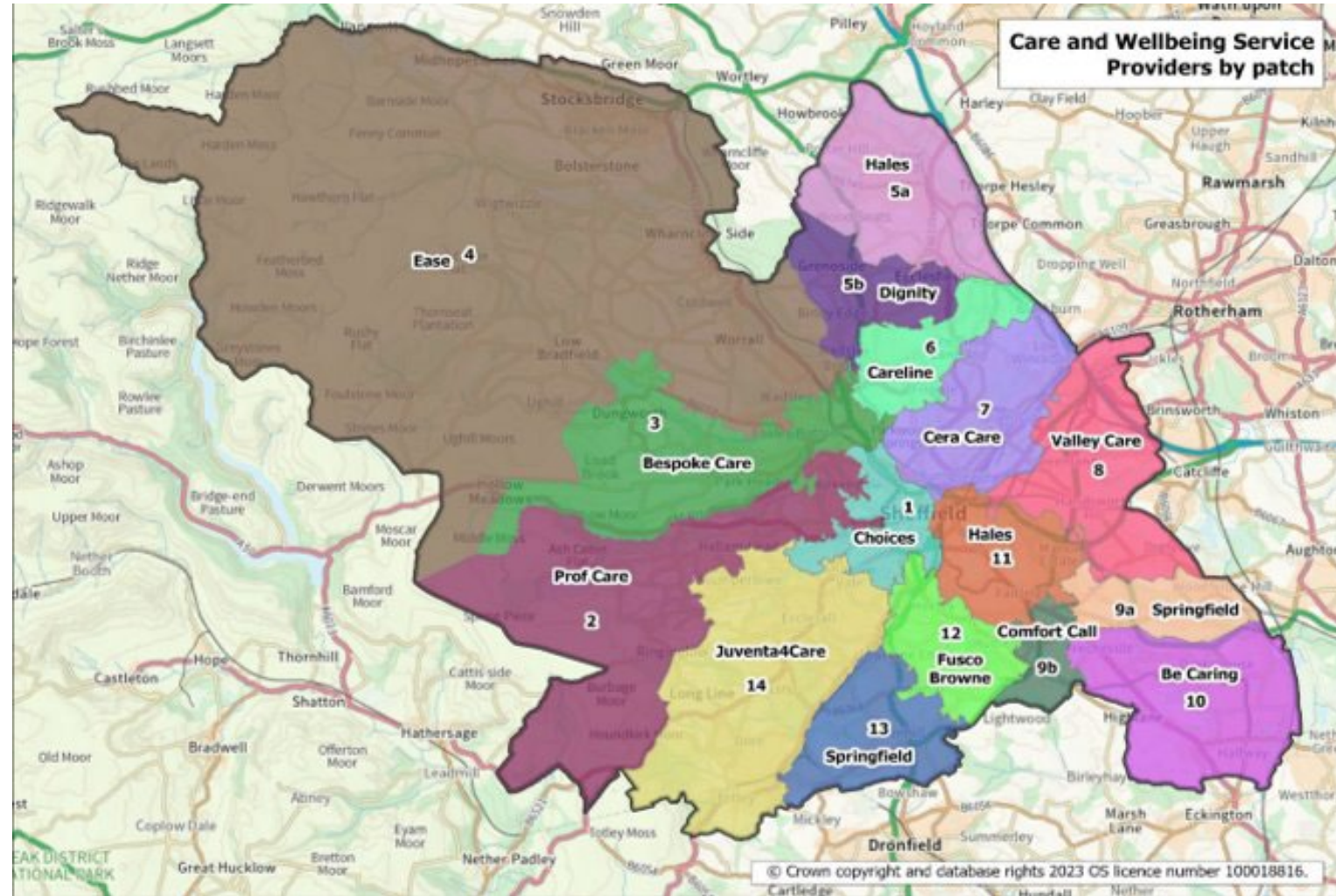
Our new Care and Wellbeing Service

Go Live Monday 3 June 2024

Care and Wellbeing Services Development – Timeline



Care and Wellbeing Service – Contracted Patches



CWBS Providers by Area

North West

- Ease Healthcare
- Choices
- Prof Care
- Bespoke

North East

- Careline
- Hales Care
- Dignity Direct
- Ceracare

South West

- Hales Care
- Springfield Care
- Juventa 4 Care
- Fusco Browne Healthcare

South East

- Valley Care
- Springfield Care
- Comfort Call
- Be Caring

What will be different?

Workforce are placed front and centre, with a move to care workers being able to benefit from working on shifts.

Joint commitment to workforce development, with a well trained and skilled workforce fit for the future.

A well led workforce that is valued and has parity of esteem across Health and Social Care.

Fewer providers benefit from contracts with optimised care hours, which deliver economies of scale, supporting a sustainable market.

Locality based service provision with the move from provider competition to collaboration, with providers part of the Operational SMT family.

Move away from “time and task” to outcome based service delivery. with services based on ‘what matters to you’.

Neighborhood working that connects people to their communities supported by a strength-based approach to care and support.

Providers are empowered to deliver independence through flexible and responsive services as trusted reviewers, with the ability to respond timely to changes in need. Enablement is embedded into day to day service delivery.

Consistently high quality services for all, with a commitment to technology and innovation.

Care & Wellbeing Service Model

□ **Key components of the Care and Wellbeing Service Model:**

- Joint workforce development enabled through the train the trainer model and increasingly innovative career pathways
- Neighbourhood-based
- Effective voice for people
- Strengths-based approach
- Greater scope for creativity to meet needs and outcomes.
- Flexible planned care payment and charging model
- The ongoing move to an environment where care workers will benefit from weekly contract hours with shifts
- Increased ownership and empowerment for care workers
- Empowering the provider to deliver enablement and undertake trusted reviews
- Smarter use of technology supporting digitisation which will see a collaboration in the development of Technology Enabled Care.

What will success look & feel like?

Home care, ASC and partners working closely, through effective collaborations, based on mutual respect and trust, delivering outstanding services.

Providers achieve economies of scale, and benefit from long-term security, collaborating with us to realise our shared vision, within a supportive system.

People get the right care, at the right time, from a well led, trained, and stable workforce.

Care is built upon understanding 'what matters to you', with your shared service experiences helping to shape future service provision.

There is accountability, transparency, and clear well understood processes, which works for everyone.

People are supported to live independently, through a commitment to enablement supported by trusted reviews, with providers positively held to account.

Resources in home care and ASC are used effectively to deliver whole system efficiencies.

Our responsibilities

We all need to embrace the changes within the new Care and Wellbeing Service, and ensure our teams understand the service and new ways of working.

We all need to adopt a strength-based approach to our work with a greater appetite for risk, with a real commitment to promoting independent living, and delivering the best outcomes for people.

‘People are at the heart of what we do’

All of us need to work collaboratively across the whole system, with a commitment to effective communication.

‘Together we get things done’

We need to empower our new providers, trust and respect them, to deliver their responsibilities under the new Care and Wellbeing Service Contract.

‘Openness and Honesty are important to us’

We all need to manage data effectively in line with the Caldicott Principles, ensuring we have accurate information to provide vital business intelligence to help inform continual service improvement.

New Contracts and Fee Uplifts

New Contracts and Fee Uplifts

- Your contracts have been circulated which also set out data protection arrangements.
- We have also circulated the postcodes, care volumes, and geographical areas for your new Patches.
- Should you have any queries in relation to the contracts please contact Andrew andrew.turpin@sheffield.gov.uk in writing.
- The new fee rate from the 8th April will be £22.96 subject to final approval from the Health and Social Care Policy Committee on the 20 March.

Sheffield's approach to the mobilisation and transition of services

Exit Planning - Transition of Services

Our plans for the transition and mobilisation of the new service.

- We value **all** of our care providers and intend to work in a collaborative and communicative manner throughout the process.
- Many of our outbound care providers will continue to work with Sheffield City Council in the delivery of services such as Individual Service Funds and Direct Payments, albeit at a smaller scale when compared with the current care hours delivered. Those relationships are important to us.

Exit Planning - Transition of Services

Key considerations;

- The need to work collaboratively together to ensure the safe transfer of care which safeguards people in receipt of services*
- The need for effective and timely communications from all stakeholders to include information to people in receipt, their family, and carers, and care staff to ensure that they can make informed choices about their future care services and employment.
- There will be new service opportunities, but these will be much smaller in scale when compared to the current care hours delivered under the Call off Contract.

Mobilisation and Transition of Services Team

- ❑ Inbound/Outbound Providers Market Managers
- ❑ Inbound/Outbound Providers Assistant Market Managers
- ❑ Dedicated social worker service transition and mobilisation team
- ❑ Dedicated telephony support for people in receipt of care, their families, and cares
- ❑ Dedicated ICT and Systems Support
- ❑ Dedicated Legal Services personnel
- ❑ Dedicated Commercial Services personnel
- ❑ Teams Managers CWBS Champions covering all service areas; Living and Ageing Well, Mental Health, Adults and Future Options
- ❑ Care and Wellbeing Governance Board Chaired by Alexis Chappell Strategic Director of Adult Care and Wellbeing

Mobilisation of Services

Market Managers Inbound Providers	Assistant Market Managers Inbound/Outbound Providers	Responsibilities
Deborah Willoughby deborah.willoughby@sheffield.gov.uk North East	Di Simpson diane.simpson@sheffield.gov.uk North East	<p>The number of staff available for TUPE, and who they are eligible to transfer to.</p> <p>The staffing capacity of the incoming provider.</p> <p>Any early exits from the existing providers in the patches.</p> <p>Provision of key documentation from outbound providers; Care Plans, TUPE information, Medication Plans, Risk Assessments, Rosters, Key safe information.</p> <p>Feedback of exemption review outcomes.</p> <p>Provide a single point of contact for the inbound providers.</p>
Sarah Swinburn sarah.swinburn@sheffield.gov.uk North West	Dianna Coupe dianna.coupe@sheffield.gov.uk North West	
Robyn Pryor robyn.pryor@sheffield.gov.uk South East	Ros Clarke rosamund.clarke@sheffield.gov.uk South East	
Jade Bann jade.bann@sheffield.gov.uk South West	Clare Wheatcroft-Lee clare.wheatcroft-lee@sheffield.gov.uk South West	

Exit Planning - Transition of Services

Market Managers Outgoing Providers	Assistant Market Managers	Responsibilities
Andrew Shaw Andrew.shaw@sheffield.gov.uk North East and North West	Di Simpson diane.simpson@sheffield.gov.uk North East	Oversee the collection and maintenance of information regarding the transition of care.
	Dianna Coupe dianna.coupe@sheffield.gov.uk North West	Provision of key documentation and data from outbound providers; Care Plans, TUPE information, Medication Plans, Risk Assessments, Rosters, Key safe information.
Emma Dobson Emma.dobson@sheffield.gov.uk South East and South West	Clare Wheatcroft-Lee clare.wheatcroft-lee@sheffield.gov.uk South West	Feedback of exemption review outcomes.
	Ros Clarke rosamund.clarke@sheffield.gov.uk South East	Provide a single point of contact for the outbound providers

Information already circulated

- Contact database for the inbound providers.
- Service user lists detailing those people transferring including the new providers.

Transfer of key information

- You are required to provide the information requested, with Sheffield City Council facilitating the process with returns including:
 - TUPE information returns
 - Care Plans,
 - Rosters
 - Key safe information

- Sheffield City Council will review the information on receipt before circulating to our inbound providers.

- Our market managers will work with all providers to facilitate this process in a collaborative manner.

Mobilisation Planning – Care Providers

Mobilisation Planning – Care Providers

- CQC Registration
- Office accommodation
- Recruitment
- Profiling of care worker resources based on the service user lists circulated (mainly for current providers)
- TUPE list completion and return (current providers)
- General plans and aspirations to support mobilisation

Above list is not exhaustive.

TUPE Requirements

TUPE

- ❑ TUPE Employee Liability Information request circulated to all providers where care services will be transferred which was dispatched on the 13 February 2024.
- ❑ Original deadline for returns 25 February 2024
- ❑ New deadline for outstanding returns **10 March 2024**
- ❑ Consideration needed as to the best approach to TUPE workers from existing providers who will be part of our new Care and Wellbeing Service.

Under legislation the inbound providers are ultimately responsible for collecting the information where Sheffield City Council are unable to facilitate the transfer.

TUPE of Overseas workers

Essie Manomano

essie@easehealthcare.co.uk

TUPE of Overseas Workers

1. Cost of a sponsorship licence £599 for SME under 1.5 million turnover, with £1,536 for larger organisations. If organisations decide to process the application with the support of a legal service, there would typically be an additional £1,500 cost.
2. No other costs incurred by the incoming provider until the workers permits expire.
3. The sponsorship licence expires after 4 years but is renewable.
4. When Visas runout for 3-year work permits, there is a cost to renew of £199 for each certificate of sponsorship per worker, plus £364 per annum Skilled worker charge. This would be £728 taking the worker up to 5 years when they can apply for indefinite leave to remain.

There is then the additional cost for the employee to renew their Visa and pay for an Immigration Health Surcharge for the additional 2 years, BV is confirming the cost which is typically paid for by the employer as it is an upfront cost. If the employer decides not to renew the work permit after 3 years, the worker had 60 days to leave the Country.

5. The Home Office requires Organisations to submit their application for a Sponsorship Licence no later than 20 days from the date on which the worker is transferred under TUPE.
6. If a provider is unsuccessful in their application, we will seek to redeploy that worker to one of the remaining 14 providers who have a licence.
7. Developing a Fact Sheet with our legal partner to include recent changes to legislation.

Service Exemptions

Service Exemptions

- Completed for existing people in receipt of care, currently being approved.
- We will be communicating the outcome to people in receipt of care and care providers week commencing 26 February.

Communications

Care & Wellbeing Service Mobilisation - Communication Timeline



Care & Wellbeing Service & Transition go-live 03/06

Provider / Market Manager Meetings

Provider Mobilisation Meetings ○ ○ ○ ○ ○ ○ ○ ○

Current Provider Data Requests ○ ○ ○ ○ ○ ○ ○ ○ ○

C&W Provider Data Circulation ○ ○ ○ ○ ○ ○ ○ ○ ○

C&W Provider & Charging Changes Confirmation – People in Receipt of Care ○

C&W Service Benefits & TUPE Factsheet – Care Workers ○

C&W Service Benefits Factsheet – Providers ○

Roadshows – People in Receipt of Care ○ ○ ○ ○

Roadshows – Care Workers ○ ○ ○ ○

Social Media / Awareness Campaign

Provider Portal

Jason Smart

jason.smart@sheffield.gov.uk

Questions and Answers

Discuss and agree next steps

Thank you for your time