



# Day Services - Consultation and engagement summary

Gough, Grace (Corporate)  
Staffordshire County Council

1. To inform the recommissioning of Day Services the Council has been engaging with individuals who currently use Day Services, their families and carers, and care providers.
2. Between February and April 2024, the commissioning team met with individuals at 13 different settings as part of this engagement. The key themes from this feedback were:
  - a) individuals wanted reassurance that the contract would actively monitor quality of services to ensure that they were safe and effective;
  - b) services should provide a purposeful day by offering a range of activities to provide choice to the individual;
  - c) individuals wanted more choice of providers, rather than having a set provider per area, to ensure that it could meet their individual needs and outcomes;
  - d) day services should provide a home from home whilst meeting all diversity and equity requirements.
3. Between February and March 2024 initial conversations with providers took place. The commissioning team offered 1:1 meetings and/or an online survey with all current providers, of which 20 providers engaged with. The feedback from these conversations then formed the basis of the provider engagement.
4. The Provider Engagement took the form of 3 Pre-Market Engagement Events via Microsoft Teams in June 2024. The slides were then made available on Proactis with a follow up survey. The three workshops were:
  - a) workshop 1 – Quality;
  - b) workshop 2 – Contracting Mechanism and Finance;
  - c) workshop 3 – Transport.
5. The summary of feedback for quality is as follows:
  - a) day services should promote independence, by maintaining skills and building on what individuals can do through a variety of activities that align with the individual's strengths, hobbies and interests;
  - b) day services should be in safe and accessible venues and ensure that they are diverse and inclusive;
  - c) 100% of responses stated that they used satisfaction surveys alongside a complaints and compliments log. 80% said they look at case studies, 60% use an outcome tool or STAR method;

- d) 64% of providers stated that they reviewed clients every 1-3 months against their care plan, with all providers stated a review took place if any change in need was noted.
6. For the Contracting Mechanism the feedback is summarised below:
- a) all 3 options put to providers: Block contract, Flexible Framework, and a combination of the two) proposed in engagement were well received, with pros and cons given for all.;
  - b) the market was divided over the preferred option, depending on what suited their current model of care;
  - c) overall, most providers favoured a Flexible Framework to promote choice and flexibility in the market for individuals.
7. For pricing the feedback was:
- a) providers suggested price points of between £48 and £100 a day;
  - b) feedback received suggested that most of the market could meet the needs of the individual at the current rates;
  - c) however, feedback from providers also stated that there was a noticeable increase in the number of persons that were entering the service with more complex needs that previously seen which was having an effect on staffing ratios etc and therefore could not be met at the current rates;
  - d) A tiered rate was the preferred option from providers. The ranking was: Tiered Rates, Set Rates, Providers to choose at point of entry to Flexible Framework.
8. The feedback from providers for transport was as follows:
- a) providers felt that the 2-tier system does not work. The same vehicle is deployed regardless of the need for the individual based on routes for locations of pick up;
  - b) no current providers in Stafford use pick up points and these are not considered appropriate for the needs of the majority of individuals that access the services;
  - c) most providers that took part in the engagement offer transport whether through their own vehicles or accessing community transport schemes;
  - d) some providers do not have any transport offers;
  - e) transport is a key financial concern for providers.
9. Following the engagement events the Council considered all feedback received, this was then balanced against research done by the Council and other key considerations which included:
- 

- a) assurance was needed for the quality of the services as the market is not regulated by CQC;
  - b) services need to be able to meet the individual outcomes;
  - c) an equitable service is required across all districts of the county;
  - d) the pricing model needs to take into consideration both Market Sustainability and Affordability;
  - e) any new contract must comply with procurement regulations.
10. The conclusion of this work was then presented to Providers in a consultation event on the 20/08/2024. This was again hosted on Microsoft Teams with a follow up survey being made available on Proactis with a copy of the slides for providers to be able to give their feedback.
11. The consultation gave a recap of the current model and engagement/research completed to date along with key considerations from the Council.
12. The consultation proposed the following:
- a) that the new contracting model would be a framework along with the reasoning behind this;
  - b) a proposal of what the definitions of a tiered rate could look like if they were to be introduced;
  - c) discussion around price points, with a recommendation that the current rate should be retained for individuals with a 'Expected' level of need;
  - d) a proposal that transport should move to one set rate based on the current average journey length and cost;
  - e) to allow providers to join the framework even if they did not have a transport offer, but only to allow providers to offer care for individuals where they could meet all assessed needs.
13. The feedback from the consultation is summarised as follows:
- a) 83% providers stated that they would apply to a framework dependant on acceptable terms and costs, the only provider that stated that they would not is a provider of home care;
  - b) 83% of providers agreed with the rationale of only opening the framework when there was an unmet need identified;
  - c) 100% of providers were supportive of the introduction of tiered rates, however providers did state that if it was to be introduced that they would want assurances that any change of needs would be addressed in a timely manner;
- 

- d) no provider stated that they could not meet the 'expected' level of need at the current rates, however within the Teams meeting no providers agreed that they could meet the 'enhanced' level at need at this cost (£60.99) due to the increased 1:1 needs of these individual;
- e) providers were equally split between those that did and did not offer transport. With those providing transport between £10-£13 per person per day. With all providers agreeing that providers that were unable to offer transport should still be able to join the framework, but only those that could arrange transport should be able to offer care to those potential service users with an assessed need for transport.

14. Therefore, following the consultation, the conclusion formed were as follows:

- a) the new contract should be offered as a framework; The commissioning approach to secure a framework of providers will mean that there are more providers who can offer day services that the current block arrangements allow.
- b) the specification is to reflect the need for an increased range of activities that meet individuals' needs and outcomes, this should be monitored throughout the contract;
- c) transport needed an urgent review, and this needed to be addressed before the new contract. Therefore, it was agreed that contracted providers would be moved to one set rate of £15.44 with this being backdated to the 1<sup>st</sup> April 2024;
- d) some providers had said in the engagement that they were unable to offer care for some individuals with higher care needs at the standard rate. However, following a provider failure approximately 50% of individuals that access day services needed their care resourcing. These were all resourced at the current rate or below. This included individuals that would have been categorised as enhanced in a tiered pricing structure. This experience demonstrated that the market is therefore able to offer care at this cost.

