

## Decision Report - Executive Decision

Forward Plan Reference: FP/24/10/06

Decision Date – 02/12/2024

Key Decision – yes

Confidential Information – appendix B



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### **Dementia Residential Block Beds, Lead Member and Officer Key Decision.**

Executive Member(s): Lead Member for Adult Services

Local Member(s) and Division: Countywide

Lead Officer: Mel Lock, Director of Adult Social Care

Author: Gemma Beasley - Senior Commissioning Officer, James Sangster – Service Manager

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### **Summary**

1. Adult Social Care Commissioning is seeking approval to award 9 Block Bed Contracts in care homes following a competitive tender exercise. Appendix A details the 'Tender Evaluation Report'. It concludes that we have made the decision to award 9 contracts following the procurement exercise consisting of, 94 Dementia Residential Block Beds, at the cost of £826.60 per bed per week, costing approximately £4.047m per year. No bids were received in the Wellington area and commissioners will now work with the care home market to explore the opportunity to direct award a further 20 beds to meet demand. These additional beds would cost a further £0.861m per year leading to a total cost of £4.908m per year.
2. This approach will support the development of a market that delivers high quality care and a person-centred approach to Dementia Care across Somerset, ensuring the people of Somerset remain in their local areas and communities. This will contribute to the reduction of hospital admissions and delayed discharges by ensuring Somerset Council has access to beds within Dementia Residential Care Homes when required. It will offer guaranteed services in the following areas:
  - Taunton – 14 beds
  - Wellington – 20 beds (Direct Award)
  - Frome – 5 beds
  - Shepton Mallet/Wells – 7 beds
  - Burnham-on-sea/Highbridge – 15 beds
  - Williton – 19 beds
  - Chard/Ilminster/Crewkerne – 15 beds
  - Yeovil – 10 beds
  - Langport/Somerton – 9 beds

## Recommendations

3. The Executive approves:
  - a. the outcome of the procurement process to award contracts to the suppliers named in Tender Evaluation Report Confidential Appendix B for Dementia Residential Block Beds, for the length of 5 years (plus permitted extensions).
  - b. Commissioners to work with the care home market to explore a direct award for a further 20 beds.
  - c. the case for applying the exempt information provision as set out in the Local Government Act 1972, Schedule 12A and therefore to treat the attached confidential Appendix B in confidence, as it contains commercially sensitive information, and as the case for the public interest in maintaining the exemption outweighs the public interest in disclosing that information.
  - d. to exclude the press and public from the meeting where there is any discussion at the meeting regarding the confidential tender evaluation report (Appendix B) (to be treated as exempt information).

## Reasons for recommendations

4. The current contracts for Dementia Residential Block Beds are due to expire the 2<sup>nd</sup> February 2025. We need to ensure a continued supply for high quality care and Dementia understanding services that continue to meet the needs of an aging population and the increasing levels of Dementia which are only predicted to continue rising.
5. New contracts will need to in place on 3<sup>rd</sup> February 2025 to ensure the continuation of these services so that Somerset Council meets its statutory obligations under the Care Act to:
  - Meet need, promote health and well-being.
  - Promote greater choice and control for people in what care and support services they receive so that they can live their life the way they want to.
  - Ensure a more diverse market of care and support services that responds to people's needs and choices, that places a strong emphasis on quality
6. The accompanying confidential Appendix B contains commercially sensitive information relating to the contract and the Council's financial and business affairs. Officers recommend that this is treated as exempt information. "Exempt information" is defined by Section 100 of the Local Government Act 1972, and by Schedule 12A to that Act:

“Information relating to the financial or business affairs of any particular person (including the authority holding that information)”

The public interest test is then applied and, in this instance, it is considered that the public interest in maintaining the exemption outweighs the public interest in disclosing the information.

## **Other options considered**

7. The decision to tender these services across 9 locations is based upon data led commissioning, these are the area's the people of Somerset wish to reside. The decision not to re-tender was not put forward due to:
- The current contract ends on 2<sup>nd</sup> February 2025 after which we would not be meeting our statutory obligations under the Care Act. There would be a reputational risk for Somerset Council if no contract is in place.
  - More admissions to hospital which could have been avoided and/or delayed discharge from hospital.
  - Transitioning all Dementia Residential block beds to spot placements will escalate the weekly expenditure depending on the prevailing spot rates. This substantial increase in costs could strain the council's budgetary allocations, undermining our financial sustainability and impacting other essential services and initiatives.
  - Transitioning from block contracts to spot contracting arrangements could result in people having to move to homes more affordable for Somerset Council. This would cause significant disruptions for resident living with frailty and dementia, a vulnerable population requiring specialised care and consistent environments.
  - There is limited market access for Somerset Council in Dementia Residential settings.
- It is crucial to retain these allocations to ensure consistent and high-quality care for the people of Somerset.

## **Links to Council Plan and Medium-Term Financial Plan**

8. The recommendation to approve the block bed contract for Dementia Residential provision within care homes links with: The Somerset Adult Social Care Strategy 2024-2027 the key priorities being: Right Support, Right Place, Right Time, and Future Focused. The Medium-Term Financial Plan has been based upon key assumptions in line with up-to-date design and cost modelling including demand increases in adults' services and significant increases in placement costs.
9. The proposed decision supports the Council's priorities and impacts on the delivery of these priorities positively. The contract has been designed and based upon data led commissioning, financial analysis and research surrounding the development of Dementia, including how best to support those with assessed eligible needs due to their Dementia. The contract has been created whilst experiencing the impact of the care home crisis which has impacted social care considerably. Due to this there is the inclusion of regular contract review and commissioning oversight, ensuring the service is working as expected and flexible to demand changes therefore offering future planning, ensuring the right support in the right place and at the right time.

## Financial and Risk Implications

10. Somerset Council has a statutory requirement to meet the social care and support needs of its population. No additional funding is being requested because of this decision as the cost is covered within the existing budget. The expected gross cost of the block contracts for is £4.908m. The contract is set to be increased annually in line with the MTFP.
11. There are risk implications in relation to ensuring sufficient continuity of existing Dementia Residential Provision after 2<sup>nd</sup> February 2025. These have been mitigated through this procurement exercise to secure specialist care within high demand areas of Somerset.

### Please enter risk description

In the instance that the new contracts are not agreed, there is the risk of destabilisation of the care home market. Including the loss of guaranteed services and incurring significant additional financial cost to the local authority. The loss of guaranteed services surround Dementia Residential care will reduce the continuity of care and may result in placements being lost and the person therefore being impacted.

<b>Likelihood</b>	<b>4</b>	<b>Impact</b>	<b>5</b>	<b>Risk Score</b>	<b>20</b>
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## Legal Implications

12. The procurement process for awarding contracts to care homes has been conducted in accordance with all relevant legal frameworks, including but not limited to the Public Contracts Regulations 2015 and the council's internal procurement policies. Due process has been followed throughout the exercise to ensure fairness, transparency, and equal treatment of all bidders.

The Contracts and Procurement team has been involved throughout the process, ensuring compliance with all statutory requirements. We have been supported by one of Somerset Council's Contracts Solicitors, who has provided legal oversight and confirmed that all necessary steps have been taken to mitigate any potential risks. The Contracts Solicitor has formally signed off on the process, affirming that it meets the required legal standards.

Furthermore, the proposed contracts incorporate necessary legal provisions concerning safeguarding, data protection (in line with the UK GDPR), and compliance with relevant regulatory bodies, including the Care Quality Commission (CQC). These measures ensure that the council's interests are protected and that providers meet their statutory and contractual obligations.

13. There are no outstanding legal issues, and the risk of legal challenge has been assessed as low. Should any challenges arise, the Contracts Solicitor is confident that the process is robust and compliant with applicable laws.

## **HR Implications**

14. There are no relevant HR implications for Somerset Council.

## **Other Implications:**

## **Equalities Implications**

15. A full Equalities Impact Assessment Process and Report has been undertaken and signed off by Somerset Council's Equalities Officer. No negative outcomes were identified. The full report is included below.

## **Community Safety Implications**

16. The decision to award these contracts has no relevant community safety implications.

## **Climate Change and Sustainability Implications**

17. The lots within the specification have been based upon the demand of the population within Somerset. This reduces the need of additional travel as they will remain residing near family and friends. The contract also offers an element of sustainability for service provider and reduces the need for newly built care homes in the area allowing more opportunities to be met in the Local Development Framework.

With that in this Decision will have a potential impact (positively) on, including, but not limited to, the following

- Pollution to air, land and water
- Factors that contribute to Climate Change, including the whole-life carbon emissions of this Decision
- Protection of and access to the natural environment
- Travel choices that do not rely on the car, including active, public and other modes of more sustainable transport
- A strong, diverse and sustainable local economy
- Meet local needs locally

## **Health and Safety Implications**

18. The health and safety of staff and people in Care Homes is fundamental to the successful delivery of these contracts. Each successful bidder has their own Health and Safety plan and as part of the tender process successfully demonstrated how they incorporate health and safety considerations into their environment and work force plans.

## **Health and Wellbeing Implications**

19. The decision aims to have a positive impact on the health and well-being of the person being supported via the contract. The specification focuses on person

centred care, strengthening links within the community, maintaining relationships, positive multi-agency working, continuity of care, unnecessary admissions to hospital and the avoidance of delayed discharges from hospital. All of which from research has been shown to positively influence the person's health and well-being. For each of the three priorities below from the Health and Wellbeing Strategy the proposal has ·

- significant positive impacts on health and wellbeing
- significant positive impacts on preventing ill-health (physical and mental health)
- significant positive impacts on reducing health and social inequalities

## **Social Value**

20. As part of the procurement process, bidders were asked to submit proposals of how they will deliver against Social Value as part of these contracts. The successful applicants effectively demonstrated how they will develop and implement plans to deliver the proposals they put forward as part of their submission.

21. The following Priority areas are relevant to this service: ·

- Developing employment, skills and training opportunities, particularly for hard-to-reach/disabled/target groups
- Improving health and wellbeing, maintaining independence and reducing inequalities of local residents and employees
- Helping build community capacity and playing an active role in the local community, especially in those areas and communities with the greatest need

## **Scrutiny comments / recommendations:**

22. This report will be shared with the chair of the Scrutiny Committee and other members as listed below.

## **Background**

23. As a local authority we have a statutory duty to commission services to support the people of Somerset's assessed Care Act Needs. Dementia is recognised under the Care Act as a statutory requirement and recent CQC inspections of local authorities have identified a lack of available services for those with higher levels of Dementia. NHS England estimated that over 10,000 people in Somerset have a diagnosis of dementia and found that the rate of diagnosis among those aged over 65 in Somerset is outpacing the national average. Further to this, projections indicate an anticipated surge of an up to 85% increase in diagnoses of dementia by 2035 in Somerset. According to the Office for National Statistics (ONS) the leading cause of death in England and Wales during 2022 was Dementia and Alzheimer's disease with 65,967 deaths. This highlights the levels of Dementia within the population at this moment in time.

24. The new contract will need to be in place on 3rd February 2025 to ensure Somerset Council meets its statutory obligations under the Care Act to:

- Promote greater choice and control for people in what care and support services they receive so that they can live their life the way they want to.
  - Ensure a more diverse market of care and support services that responds to people's needs and choices, that places a strong emphasis on quality.
25. Somerset Council currently commission on average 32% of the care home market within Somerset. Of this, 797 are registered as Dementia Residential level support and 155 are purchased by Somerset Council. The proposed lots will allow Somerset Council access to these services for the people of Somerset at the local authority fee rate. Ensuring these services are available not only offers long-term support but also reducing carer breakdown and individuals reaching crisis point due to lack of support in their area.
26. A re-commissioning exercise has been undertaken to give an opportunity to improve the quality and robustness of the services to ensure they are fit for the future including strict expectations surrounding Dementia training and person led care. The Local Authority role is seen as critical and under section 5 of the Care Act, the duty to shape and maintain an efficient and effective market of services for meeting care and support needs in the local area is firmly placed with Somerset Council.
27. The re-commissioning plan included a review of the current services with key stakeholders, partners, providers and customers to co-produce a service model that could respond to the following challenges:
- Demographic changes to an increasing elderly population
  - Increased demand on the health and social care services that impact on hospital admissions and delays in discharges.
  - Financial challenges regarding Fair Cost of Care and Cost of Living Crisis
  - Recruitment and retention of workforce
28. The service will support offer value for money as across all Dementia Residential placement there are 5 areas of Somerset where Somerset Council pay above average fees. These are Yeovil, Langport, Wincanton, Bridgwater and Williton. The current position of the block beds has offered fee stability in the areas of Taunton, Burnham-on-Sea, Frome, Wellington, Shepton Mallet, Langport, Ilminster, Williton.
29. The service will be commissioned by Somerset Council however has been co-designed with health colleagues to ensure there is a joint focus and support for the service provider. This is surrounding training, being person led and to ensure community support is being utilised to prevent crisis point being reached.

## **Background Papers**

N/A

## **Appendices**

- A – Tender Evaluation Report
- B – Tender Evaluation Report CONFIDENTIAL




## Assurance checklist

	Officer Name	Date Completed
Legal & Governance Implications	David Clark	04/10/2024
Communications	Peter Elliott	04/10/2024
Finance & Procurement	Nicola Hix	07/11/2024
Workforce	Dawn Bettridge	03/10/2024
Asset Management	Oliver Woodhams	07/10/2024
Executive Director / Senior Manager	Mel Lock	11/10/2024
Strategy & Performance	Alyn Jones	08/10/2024
Executive Lead Member	Cllr Sarah Wakefield – Lead member for Adult Social Care	08/10/2024
<b>Consulted:</b>	Councillor Name	
Local Division Members	Cllr Sarah Wakefield	08/10/2024
Opposition Spokesperson	Cllr Sue Osborne	26/09/2024
Scrutiny Chair	Cllr Gill Slocombe	Sent on the 26/09/2024 to Cllr Slocombe Sent to Cllr Duddridge on 01/11/2024 Sent to Cllr Scully on 05/11/2024



## Somerset Equality Impact Assessment

Before completing this EIA please ensure you have read the EIA guidance notes – available from your Equality Officer or [www.somerset.gov.uk/impactassessment](http://www.somerset.gov.uk/impactassessment)

<b>Organisation prepared for (mark as appropriate)</b>	 <b>Somerset</b> Council	 <b>NHS</b> <b>Somerset</b>	 <b>NHS</b> <b>Somerset</b> NHS Foundation Trust
<b>Version</b>	<b>Date Completed</b>		
<b>Description of what is being impact assessed</b>			
To tender for the block bed provision of Dementia Residential Block Bed provision in Somerset.			
<b>Evidence</b>			
<b>What data/information have you used to assess how this policy/service might impact on protected groups?</b> Sources such as the <a href="#">Office of National Statistics</a> , <a href="#">Somerset Intelligence Partnership</a> , <a href="#">Somerset's Joint Strategic Needs Analysis (JSNA)</a> , Staff and/ or <a href="#">area profiles</a> ,, should be detailed here			
Office of National Statistic, Somerset Intelligence Partnership, current contract performance data, Eclipse data and area demand profiling.  References: <a href="#">Older People - Somerset Intelligence - The home of information and insight on and for Somerset - Run by a partnership of public sector organisations</a> <a href="#">Mental, physical and speech abilities in later stages of dementia   Alzheimer's Society (alzheimers.org.uk)</a> <a href="#">Death registration summary statistics, England and Wales - Office for National Statistics</a> <a href="#">Sex and intimacy in care homes   Alzheimer's Society (alzheimers.org.uk)</a> <a href="#">Dementia and challenging sexual behaviour   Alzheimer's Society (alzheimers.org.uk)</a>			

[The health and care needs of older LGBT+ people | Discover | Age UK](#)  
[Exploring the everyday lives of disabled people - GOV.UK \(www.gov.uk\)](#)  
[Profile of the older population living in England and Wales in 2021 and changes since 2011 - Office for National Statistics \(ons.gov.uk\)](#)  
[Health Matters: Health inequalities and dementia - UK Health Security Agency \(blog.gov.uk\)](#)  
[Health of Homelessness | The BMJ](#)  
[Rough sleeping in the UK - Office for National Statistics \(ons.gov.uk\)](#)  
[autumn-survey-2023-social-care-housing-health-and-winter-final.pdf \(adass.org.uk\)](#)  
[Population Projections - Somerset Intelligence - The home of information and insight on and for Somerset - Run by a partnership of public sector organisations](#)  
[Older people living in care homes in 2021 and changes since 2011 - Office for National Statistics \(ons.gov.uk\)](#)  
[Food: How Cultures Eat And What It Means - Cultural Awareness International](#)

**Who have you consulted with to assess possible impact on protected groups and what have they told you?** If you have not consulted other people, please explain why?

We have consulted with carers groups, the Alzheimer’s Association, used guidance created by people with lived experience, consulted the market, key stakeholders, community, and health groups linked within the care home and Dementia industry.

**Analysis of impact on protected groups**

The Public Sector Equality Duty requires us to eliminate discrimination, advance equality of opportunity and foster good relations with protected groups. Consider how this policy/service will achieve these aims. In the table below, using the evidence outlined above and your own understanding, detail what considerations and potential impacts against each of the three aims of the Public Sector Equality Duty. Based on this information, make an assessment of the likely outcome, before you have implemented any mitigation.

Protected group	Summary of impact	Negative outcome	Neutral outcome	Positive outcome
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<p><b>Age</b></p>	<p>Data show us that we have an increasing older population, people are living longer and being diagnosed with a level of Dementia. There are over 200 number of difference types of Dementia. The service will need to continue to meet the needs of people now and into the future.</p> <p>There are at least 40,000 people under 65 in the UK who have dementia. This group of people may face increased stigma and difficulties particularly if they are carers for young children and are in employment.</p> <p>Currently not all care homes in Somerset are registered with CQC to support people under the age of 65 which is restricting access to services for those with early on set Dementia.</p> <p>This service is to support people under 65 years and over. The specification will reflect and respond to the full range of needs of people irrelevant of age. There is data surrounding the early onset of Dementia therefore in the specification we have encouraged providers to be registered to support under 65 years old to provide more options to the people of Somerset. Providers will need to ensure that individual outcomes are met in a variety of ways such as specialist training to support the person.</p> <p>The Contracts and Quality Team will ensure that the service is being delivered according to the services specification and quality standards and will take account of customer feedback. This will be completed by quarterly reviews, aiming for joint working with Commissioning colleagues to visit the care homes when these commence.</p>	□	□	☒
<p><b>Disability</b></p>	<p>Dementia is likely to impact on an individual's mobility, leading to an increased risk of falls and imbalance. This combined with aging degeneration means the service provision is expected to support a high number of people with a physical disability.</p>	□	□	☒

	<p>The prevalence of dementia is four times greater among people with a learning disability. Dementia is much more common in people with Down's syndrome, and onset often begins earlier.</p> <p>Senses can be overwhelming for individuals and lead to feelings of high anxiety. Living in a home with other people may escalate this and lead to communication which is labelled as behaviour that challenges.</p> <p>The specification will therefore require the provider to reflect and respond to the full range of needs of people with physical disabilities.</p> <p>The ethos of the new service will be to support people to remain/become as independent as possible via the use of assistive technology, person led care, optimal handed care and the removal of restrictive 1-1 where appropriate.</p> <p>The Contracts and Quality Team will ensure that the service is being delivered according to the services specification and quality standards and will take account of customer feedback.</p>			
<p><b>Gender reassignment</b></p>	<p>There is little UK research surrounding older transgender adults. Those who have had gender reassignment may be concerned about being treated unfairly via experiences of being misgendered.</p> <p>Access for Social Care has been identified as a concern for the transgender community due to fears of underfunding leading to local authorities being unable to provide care provisions. The impact of this would mean relying on informal care from family members who have not accepted their gender/sexuality risking individuals being left without care and support. These concerns were mimicked when speaking to the Diversity Group UK, including the fears over their safety and gender being assumed.</p>	<p>□</p>	<p>□</p>	<p>☒</p>

	US research has identified that when compared to cisgender respondents, transgender older people were at higher risk of poor physical health, disability, and depression.			
<b>Marriage and civil partnership</b>	Married/Civil partnership couples may be at risk due to everyone's needs being individual. We can't predict that both persons in a marriage will require the support of a dementia residential provision.	☐	☐	☒
<b>Pregnancy and maternity</b>	Although unlikely the youngest individual to be diagnosed with early onset Dementia was 23 years old therefore the risk of pregnancy may be apparent but extremely unlikely.	☐	☐	☒
<b>Race and ethnicity</b>	<p>People from ethnic minority groups are less likely to receive diagnosis of dementia for several reasons such as:</p> <ul style="list-style-type: none"> <li>- difficulties in accessing health services.</li> <li>- poorer understanding and awareness of dementia.</li> <li>- stigma may be greater in some communities.</li> </ul> <p>A person with Dementia is likely to have their communication impacted from the disease, which can lead to forgetting languages. This is a risk of social isolation and distress for individuals as they may be impacted by language barriers.</p> <p>An individuals' race and ethnicity are a very important part of an individual's identity. There is a risk of minority groups not being recognised within a care home such as typically being English speaking, there is the potential the menu's will be based on traditional English cuisine.</p>	☐	☐	☒

	<p>Food is a vital aspect of cultural identity and heritage, it reflects the history, values and social systems of different regions and communities. Food is also a way of expressing oneself, connecting with other and exchanging culture.</p> <p>Providers are expected to complete a robust risk assessment, and a diverse and person-centred approach. The training requirement for the contract will also encourage carers to be educated surrounding communication i.e. noticing body language.</p> <p>Access to translators is also available as required.</p> <p>People from different backgrounds may need to have information and support provided in a range of formats.</p>			
<p><b>Religion or belief</b></p>	<p>Since 2011, the religious profile of the older population has become more diverse. The percentage of the older population who identified as Christian decreased by 8.2%, while the percentage identifying as other religious groups increased by 0.2%.</p> <p>The largest change has been in the percentage of the older population who reported no religion. It increased from 8.5% in 2011 to 17.5% in 2021, with men more likely to report no religion (21.9%) than women (13.8%).</p> <p>Some culturally specific conceptualisations of dementia as a normal part of ageing or of having a spiritual, psychological or social cause have prevented many groups from seeking support.</p> <p>Providers are expected to complete a robust risk assessment, and a diverse and person-centred approach. The training requirement for the contract will also encourage carers to be educated surrounding communication i.e. noticing body language.</p> <p>People from different backgrounds may need to have information and support provided in a range of formats. We will therefore need to add into the service</p>	<p>□</p>	<p>□</p>	<p>☒</p>

	specification a requirement for the provider to ensure that the information about the service will need to be made available in a variety of formats to suit individual needs.			
<b>Sex</b>	In the UK, 62% of people with dementia are female and 38% are male. This is likely to be down to the fact that women live longer than men and age is the biggest known risk factor for the condition. While some studies have suggested that other factors may affect the number of men and women with dementia, there is no firm evidence that women are more likely than men to develop dementia at any given age. 2022 statistics show that a higher percentage of women than men passed away with Dementia being listed as the cause of death.	□	□	☒
<b>Sexual orientation</b>	<p>Many older LGBT+ people have experienced lifetimes of prejudice, alongside this it is an under researched area. Research does however indicate 16% had negative experiences when accessing health services.</p> <p>The fear of prejudice can lead to individuals repressing their sexual orientation which leads to other issues such as depression, anxiety and unhealthy coping mechanisms such as social isolation or comfort eating.</p> <p>There is a risk of an automatically assuming as individual's are heterosexual rather than asking their preference.</p> <p>Providers are expected to complete a robust risk assessment, and a diverse and person-centred approach. The training requirement for the contract will support this approach.</p> <p>The service specification will require the service provider to conduct its business in accordance with the principles of the care and support being focussed on enabling people to live as individuals and their preferences.</p>	□	□	□

<p><b>Armed Forces (including serving personnel, families and veterans)</b></p>	<p>Veterans living with dementia may find themselves reliving their service years. They can relive the traumas and feelings of anxiety, suspicion, fear, loneliness, and the need for the alertness for self-protection and the urge to fight back. All those issues that may have resulted in post-traumatic stress disorder (PTSD) return.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p><b>Other, e.g. carers, low income, rurality/isolation, etc.</b></p>	<p>The service is open to all people who have been assessed as having a care need via an Adult Social Care Assessment. Within the service specification the provider will be required to ensure that people will have the best possible quality of life.</p> <p><u>Homelessness</u> Homeless people if not supported, treated effectively and given appropriate access to healthcare services are one of the most costly populations that the NHS provides provision for (8 times that of the housed population), with 'homelessness' being a independent risk factor for experiencing emergency department and inpatient admissions high usage status. The lack of access to community-based health care services and lack of appropriate preventive and responsive treatment for homeless people will often lead to increased use of services, especially unscheduled care such as A&amp;E departments and ambulances. This can also impact on a diagnosis of Dementia, due to inconsistent access to community based health care services leading to a diagnosis of Dementia not being obtained and being left untreated. However an admission to hospital may lead to a care act assessment being completed identifying the need for a dementia residential provision leading to statutory support from the local authority.</p> <p><u>Carers</u> The impact on unpaid carers is stark, with over two-thirds (68%) of Directors reporting in the ADASS Spring Survey 2023 an increase in referrals to their council relating to carer breakdown, which is an increase from 65% in 2021/22. Where Directors have seen an increase in carer breakdown the main drivers appear to be, burnout, lack of access to health support and the struggle to find</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>



	<p>the right support services. Most (91%) Directors either strongly agreed or agreed that unpaid carers are coming forward with increased levels of need in their local area.</p> <p>The over-reliance upon unpaid carers is having detrimental impact on their physical and mental wellbeing, as well as their ability to be in paid employment if they so wish. Figures from the Carers UK State of Caring Survey 2022 found that unpaid carers are taking on more than ever, with 41% not taking a break from their caring role in a year.</p> <p>These frustrations were mirrored when attending carer's groups in Somerset to discuss dementia residential provisions. Due to supporting people with Dementia, respite was difficult to obtain as the historical route has been accessing a care home for a weeks' time. The impact of this led to the person being disorientated and their condition worsened meaning on returning home they needed more support or more frequently the respite is becoming a permanent placement.</p> <p>The approach to the re-commissioning of the services includes having data led commissioning leading to higher amounts of services in higher demand areas of Somerset, allowing individuals to reside in their preferred area and maintaining relationships with their family/friends and link with the community.</p>			
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**Negative outcomes action plan**  
Where you have ascertained that there will potentially be negative outcomes, you are required to mitigate the impact of these. Please detail below the actions that you intend to take.

Action taken/to be taken	Date	Person responsible	How will it be monitored?	Action complete
	Select date			<input type="checkbox"/>
Monitor the quality of services delivered against the service specification	Ongoing	Contracts Team	Contract Review Meetings	<input type="checkbox"/>

Monitor the effectiveness of partnership working expectations	Ongoing	Commissioning Team	Partnership forums and working together events	<input type="checkbox"/>
Monitor the effectiveness of the delivery of services	Ongoing	Commissioning Team & Sourcing Care Team	Review of the live dashboards, joint forums	<input type="checkbox"/>
Ensure the service specification is available in different formats	Select date	Commissioning Team		<input type="checkbox"/>
	Select date			<input type="checkbox"/>
	Select date			<input type="checkbox"/>
	Select date			<input type="checkbox"/>
<b>If negative impacts remain, please provide an explanation below.</b>				
<b>Completed by:</b>	<b>Gemma Beasley</b>			
<b>Date</b>	<b>01/07/2024</b>			
<b>Signed off by:</b>	<b>James Sangster</b>			

<b>Date</b>	<b>01/07/2024</b>
<b>Equality Lead sign off name:</b>	<b>Tom Rutland</b>
<b>Equality Lead sign off date:</b>	<b>01/07/2024</b>
<b>To be reviewed by: (officer name)</b>	<b>Gemma Beasley</b>
<b>Review date:</b>	<b>03/02/2025</b>

