

Brokerage Service Role, Objectives for Domiciliary Care and Residential/Nursing Care Placements

1. Background

- 1.1 Health and Adult Social Care (HASC) spends around £85m gross (excluding income) per annum on purchased care and support for around 6,500 people. The Brokerage team ensure that the Council purchases care and support whether in the community or in residential/nursing homes that is appropriate to need and quality and represents value for money to the Council. This supports the Council's and People Department's strategic objectives achieving best value quality services and meeting residents identified needs appropriately and safely.
- 1.2 Currently, the DPS is used for Domiciliary Home Care, Residential and Nursing Care, Learning Disability that features supported living accommodation and community activities suitable for people with learning disabilities.
- 1.3 Enfield Council does not have contracts in place for the provision of domiciliary care, residential or nursing placements, so providers are not guaranteed any level of business or spend.

2. Access to Brokerage Services

- 2.1 People who have been assessed as eligible for care and support under the Care Act 2014 can be referred to the Brokerage Team. The broker will act on behalf of the Council and the service user/their representative.
- 2.2 Where a person is in receipt of a personal budget for community care and support services, they can opt to make their own arrangements, subject to the needs and outcomes identified within their assessment and support plan being met appropriately. They can also request support from the brokerage service to do this on their behalf.
- 2.3 Full cost clients – if the client lives in their own home and they are not entitled to financial support from the council, but have eligible care needs the service user/their representative can ask the Brokerage Team to arrange care on their behalf. This would include looking for a Home Care provider or Residential/Nursing placement. If the request comes to Brokerage for to arrange care, a flat rate fee of £260 will be charged. This fee will cover the council's costs in finding a care provider/care home and negotiating the rate if required.

3. Objectives of the Brokerage Service:

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- Work with service users/families, health and social care professionals and providers to secure care and support that is appropriate and safe;
- Support service users/families to exercise choice and control in the selection of providers to deliver care and support;
- Secure care and support provision in a timely fashion to meet a variety of care and support needs across all areas of service delivery;
- To ensure transparency and an evidence-based approach to the allocation of business to care and support providers, is provided;
- Communicate to service development any market capacity issues or gaps in provision;
- Maintain a good level of understanding and awareness of market provision, including community assets and services outside of statutory, regulated provision;
- Deliver value for money in terms of care and support service provision and evidence to support this;
- To explore access opportunities for service users and families to community assets including universal services as viable and appropriate alternatives to statutory care and support;
- To explore new opportunities for joint working and co-operation across London, the North Central London sub-region and NHS Enfield CCG.

4. Support Available from the Brokerage Service

- Exploring solutions to emergency events, for example, emergency placements
- Liaising and negotiating with homes;
- Sourcing care homes in and out of the borough.
- Sourcing culturally specific homes.

5. Some of the Services commissioned may include:

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- Residential/Nursing Care;
- Temporary breaks/respite support for carers;
- Specialised transport;
- Transfers from in or out of borough
- Day opportunities
- Blitz Clean

6. Resources

The Brokerage service is under Resources and sits with the Service Development service. The Brokerage service is resourced as follows:

1 Team Manager

1 Deputy Manager

5.5 Brokers

1 Direct Payments Support Officer.

7. The Role of the Broker

- 7.1** The role of the broker is to seek the best and most appropriate care option for the service user.
- 7.2** Where a placement or domiciliary care service is required, the Council uses a Dynamic Purchasing System (DPS). The DPS will contain details of homes/domiciliary care providers who have met a set of criteria including an appropriate Care Quality Commission (CQC) registration.
- 7.3** All homes/domiciliary providers who are on the Council's DPS will have been visited by the Quality/Contract monitoring team to ensure staffing levels are appropriate, DBS checks are in place along with other appropriate documentation including verification of their staff records, for example, training and immigration status (they have the legal right to reside and work here).
- 7.4** Domiciliary Care providers, Residential and Nursing homes can request access to this DPS. It is not a contractual arrangement, however. Simply being on the DPS is no guarantee that business will be received.
- 7.5** When brokers receive information from care management services (an assessment and support plan), anonymised details will be uploaded on to the DPS indicating a summary of needs, geographical location, any specific

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needs that must be met, for example, a need to speak a certain language if English is not the first language or experience of working with PEG feeds/Stoma bags/medications. There may often be a time critical element, particularly where discharge from hospital is involved or an emergency placement is required to prevent crisis.

- 7.6** Domiciliary care provider/homes will then receive alerts through the system detailing, as above, what is required and if they can meet the needs identified within the timeframe, they will respond.
- 7.7** If a single home/domiciliary care provider has responded within the criteria sent out, the broker will communicate this to the service user or their representative and record the decision made on the HASC client information system under the service user's record (Carefirst/Eclipse).
- 7.8** Where multiple homes/domiciliary care providers respond to a referral and these providers can meet the needs identified appropriately, this information will again be shared with the service user or their representative for them to be supported to make the choice of provider.
- 7.9** It can and does often occur that the service user requests that the broker makes the decision. When this is the case, the broker will review a summary record of how much business has been allocated to the providers who have declared an interest in providing a placement within the previous two months. They do this to ensure that access to new business is distributed as equitably as it can be. This, of course, is subject to the provider being able to deliver the care appropriately and in a timely way, where time is a critical factor.

8. Safeguarding

The Brokerage service in conjunction with Social Care teams will ensure the service user is at the centre of any decisions made in relation to choosing the right care provider. This supports safeguarding values as follows:

- People are able to access support and protection to live independently and have control over their lives;
- The individual's views, wishes, feelings and beliefs should be paramount and are critical to a personalised way of working with them;

Brokers will work alongside service users and their representatives to ensure they are able to make an informed choice. Furthermore, they will provide the necessary support and guidance should a service user or their representative wish to raise a safeguarding concern. The Brokerage service works closely with the Council's Safeguarding service and the Multi Assessment Safeguarding Hub. All Brokers regularly attend Safeguarding training to ensure they update with all Safeguarding legislation.

9. SETTING UP A NEW DOMICILIARY CARE SERVICE

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- 9.1** Contact the service user (SU), if they have capacity or the next of kin as they may already know who they want to provide the care.
- 9.2** Explain your role as a Broker and how you will be supporting them.
- 9.3** Discussion to be held with service user or next of kin to arrange a Direct Payment appointment to complete E-Card application form. Broker to send an activity to BROKDP to advise of package details and appt date and time.
- 9.4** If the service user or next of kin are unable to organise their own care and they want the council to arrange the care, please enter the following information on Care Place (DPS):
- **Postcode**
 - **Details of care required**
 - **Gender**
 - **Age**
 - **How the package will be funded, direct payment, council managed, or third party managed**
- 9.5** The service package will then be sent out on Care Place (DPS) to providers to respond.
- 9.6** Following either 2 or 4 hrs (depending on urgency) check Care Place to see which provider has responded. If providers have bided, the Broker should call the service user or NOK to see if they would like to choose a provider.
- 9.7** It is preferable that the service user or representative choose, but it is recognised that this is often a difficult decision and they may request the Broker choose on their behalf.
- 9.8** Should the service user/representative want the Broker to decide or if more than one provider bid on Care Place the Broker must give supporting information relating to each provider that has bided to enable the service user/representative to make an informed choice.
- 9.9** Supporting information is listed below but not all supporting information needs to be provided if the su/representative feels they are able to make decision based on some of the information the Broker has already discussed,

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i.e. CQC rating. However, it's important that the broker evidences the reason/conversation why a particular provider was chosen and record this information in Eclipse (Case Notes).

Supporting Information:

- **CQC rating**
- **Geographical location**
- **Culturally specific criteria important to the service user, for example language, gender**
- **Response time – is the start of the package and ongoing support time critical**
- **Specialist experience of working with people with particular needs, for example dementia care, PEG feeds or Stoma bags**
- **If more than one provider meets the criteria for delivering the service, review the previous allocation of new work in order to ensure work is allocated equitably**

9.10 Once the provider has been chosen, the Broker will send the assessment paperwork via Care Place to the provider to arrange an assessment

9.11 Inform the service user or NOK of the name of the provider who will contact them directly to arrange a preassessment giving the contact number for the provider and any other relevant information

9.12 Wait for provider to confirm assessment has taken place and to confirm your stated start date. This information must be recorded in an email and not just taken verbally for evidence.

9.13 Call the service user or NOK to confirm start date.

9.14 Upload the acceptance email onto wisdom under the service user's record

New Placement request for Residential/Nursing Care Home

10. Where the care planning process has determined that a person's needs are best met in a care home, the local authority must ensure that the person has a genuine choice and that at least one option is affordable within a person's personal budget. However, a person must also be able to choose alternative options, including a more expensive setting, where a third party or in certain circumstances the resident

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is willing and able to pay the additional cost ('top up'). However, an additional payment or 'top up' arrangement must always be optional and never because of commissioning failures leading to a lack of choice.

The Broker would contact the family and explain their role and advise how they would be supporting them throughout the whole process. When discussing placement options with Families, the brokers need to ensure those families are aware of the below:

- **Families may not get their first choice as placements are primarily needs driven**
- **All cases are means tested and financially assessed**
- **If the family chooses a more expensive home than the service user's needs require, the family will have to pay a third party top up.**
- **If the family default on their top up payments and if new terms cannot be negotiated with the provider, the council reserves the right to move the placed individual**
- **When discussing placement options with the family the Broker is to advise the family that the council uses Care Place (DPS) for source a care home.**
- **If the family chooses to be placed out of borough, it is essential to maintain the agreed price banding for Enfield whether this is in or outside borough. Should a home be identified that falls outside the banding, the service user will need to pay the difference. The only exception is where Enfield is unable to procure a suitable placement within the price banding and therefore, we will need to pay additional fees to ensure an appropriate placement is made**
- **If the home needs to specialise in certain types of conditions such as: severe physical disabilities, learning disabilities, brain injury resulting from an accident or mental health problems – ensure to cross reference with “previous placements” and use it as a guide in terms of agreeing the weekly care fee**

The Brokers must not place outside the price guides and if providers request a higher amount, the Brokers must seek advice from the Brokerage Managers

If the service user or their next of kin Families would like the Brokerage service to source a care home the Broker will advise that it will be sent out on Care Place (dynamic purchasing system) for the homes to respond. The Broker must explain what Care Place does.

The Brokers would need to enter the following on Care Place (DPS):

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- **Details of care required**
- **Gender**
- **Age**
- **Select Primary need on Care Place (Either Residential or Nursing)**

Following either 2 or 4 hrs (depending on urgency) the Broker would check Care Place to see which Care Homes have responded.

Broker's will then review the bids on Care place and ensure placements are cost effective and note where a 3rd party top up is needed by using:

- **Provider's guide rates**
- **Price bandings**
- **Information provided by care homes via Care place**
- **Cross reference the Case Tracker with previous service users placed at these homes to ensure the appropriate fee**
- **Information provided by other local authorities when placing out of borough**

Discussions will then take place with the Broker and family around the care home options available.

Broker will inform the service user and/or their representative, the choice of homes that are available and to advise them that the care homes will contact them to carry out assessment.

Once assessment has taken place and family are happy to accept home, if required, negotiations will take place between the home and the Broker to support the appropriate sourcing with top rank providers allowing value for money for the service, users and their families.

Once negotiations have taken place and price has been agreed with family and care home, the Broker will record in the service user's case notes, the placement name, negotiation undertaken, homes considered, 3rd party top up amount (if applicable), placement date (if confirmed). The Broker will then ask the relevant budget holder to sign a Delegated Authority form (DAF) therefore approving the placement fee. The authorised DAF is uploaded to wisdom with the PLACEMENT DATE once the client has been placed

The Broker will send a confirmation instruction to the provider via Careplace to confirm placement. This will ensure the placement is carried out as planned and not dependent on receipt of full contract

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The Broker will ensure the date of placement is not recorded if there is no guarantee that the client will be placed on the agreed date to avoid paying any additional charges

The Broker will also

- a. **Email the chosen Provider, the Council’s contract containing terms and conditions, requesting the home’s representative signs the contract, retaining a copy and returning a copy to be stored on the service user’s file.**
- b. **Send 3rd party top up letter to family (if appropriate)**
- c. **Service instruction is completed and send to budget holder via email for signature**
- d. **Documents uploaded in Eclipse.**

11.12 WEEK DISREGARD

Should a service user own their home, the Council we allow up to 12 weeks for the property to be sold, this is known as a 12-week disregard. However, during the 12-week period the service user will need to pay an assessed weekly contribution (please see charging booklet)

If the stay is permanent and the service user’s home is up for sale the value of your home, less any outstanding mortgage, is disregarded from their assets for up to the first 12 weeks of their stay. During this time, the service user will pay an interim charge (their weekly income less their Personal Expenses Allowance) and the Council will pay the shortfall. Service users will not have to pay the shortfall for this period back to the Council unless their property is sold during the first 12 weeks, in which case they become liable for the full cost fees from that date. From week 13 the service user will become liable for all the fees. If the Council continues to arrange the placement from week 13 as a full cost client, the service user will also be charged a brokerage set up fee of £260. If the service user decides to sell their property, they may be entitled to Income Support, ESA, UC or Pension Credit whilst their property is up for sale. Once the property is sold, it is unlikely they will be entitled to Income Support, ESA, UC or Pension Credit because they will have too much capital.

11. Deferred Payment Agreement

The deferred payment option means service users are not forced to sell their home in their lifetime to pay for their care. By entering into a deferred payment agreement, a person can ‘defer’ or delay paying the costs of their care and support until a later date. Deferring payment can help people to delay the need to sell their home and provides peace of mind during a time that can be challenging (or even

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a crisis points) for them and their loved ones as they make the transition into care. It should be stressed from the outset that the payment for care and support is deferred and not 'written off' – the costs of provision of care and support will have to be repaid by the individual (or a third party on their behalf) at a later date.

The Council is required to offer deferred payment agreements to people who meet the eligibility criteria. The Council will also need to ensure that adequate security is in place for the amount being deferred, so that they can be confident that the amount deferred will be repaid in the future. A deferral can last until death; however, many people choose to use a deferred payment agreement as a 'bridging loan' to give them time and flexibility to sell their home when they choose to do so. This is entirely up to the individual to decide.

The regulations specify that someone is eligible for and so must be offered a deferred payment agreement if they meet all three of the following criteria at the point of applying for a deferred payment agreement:

(a) anyone whose needs are to be met by the provision of care in a care home. This is determined when someone is assessed as having eligible needs which the local authority decides should be met through a care home placement.

(b) anyone who has less than (or equal to) £23,250 in assets excluding the value of their home (i.e. in savings and other non-housing assets); and

(c) anyone whose home is not disregarded, for example it is not occupied by a spouse or dependent relative as defined in regulations on charging for care and support (i.e. someone whose home is considered in the local authority financial assessment and so might need to be sold).

12. Quality Assurance

12.1 On a monthly basis, DPS reports are produced to show all new referrals, which homes expressed an interest and which homes were accepted to provide a placement.

12.2 The deputy brokerage manager will, during regular staff supervision sessions, sample the cases they have worked on the month before to make sure that all decisions made with regards to quality and access are appropriately evidenced on Carefirst/Eclipse.

12.3 If any issues are identified, these are addressed during supervision and where appropriate, further training and direction will be given to the broker to make sure process is followed appropriately.

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12.4 The Brokerage manager will review DPS reports on a monthly basis with the team in order to provide further assurance that appropriate choice and control is available to service users or their representatives and that new business is being allocated equitably.

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