

Shaping Care in North Yorkshire

Community Support, Skills and Independence Framework

Provider Consultation on Proposed CSSI Framework Arrangements and Fees

1. About this Consultation

North Yorkshire Council is developing a new **Community Support, Skills and Independence (CSSI) Framework**. CSSI was previously referred to as Community Based Support.

The new Framework is intended to provide a fair, clear and consistent basis for commissioning services that help people:

- Make friends and enjoy themselves;
- Take part in their local community;
- Develop and maintain daily living skills;
- Build confidence and independence;
- Develop skills to help people prepare for, enter or remain in paid or unpaid employment; and
- Achieve the outcomes that matter to them.

The proposals have been informed by extensive engagement with providers, research into relevant best practice, benchmarking with other local authorities, the Cost of Care exercise, provider rate information, wider market intelligence and financial modelling. This evidence has been considered alongside the need to support safe and sustainable services, provide value for money and ensure the new arrangements are affordable.

The Council is consulting providers on a number of proposed changes to the CSSI commissioning, pricing and contractual arrangements. The consultation therefore seeks providers' views on:

- The scope of CSSI, including the distinction between provider-organised programmes and individually commissioned community support;
- The proposal to pay for planned care, including the associated controls and attendance-recording requirements;
- How existing services and rates would move to the new Framework;
- The proposed maximum hourly rates (ceiling rates) and annual inflation arrangements for the new Framework;
- The use of alternative commissioning arrangements for specialist or bespoke services that may not fit the standard CSSI tiers and rates;
- The potential effects of the proposed changes on providers and people using services; and
- The risks, practical implications and measures that could support fair and effective implementation.

The proposals are intended to create clear and consistent arrangements for what is commissioned through CSSI, how providers are paid and how services move to the new Framework. Alongside this, the Council is proposing a more consistent approach to pricing, with providers submitting rates at or below defined ceilings informed by the cost of delivering services, market sustainability, value for money and affordability.

This consultation is an opportunity for providers to comment before the final arrangements are agreed.

2. What is included in CSSI?

CSSI is defined as a provider-organised, structured programme that helps people achieve their assessed outcomes. Support may be delivered from a provider's venue, in the wider community, or through a combination of both.

There would be a strong expectation that providers include meaningful community access within each person's programme where this supports their assessed needs, interests and agreed outcomes. CSSI services should not be limited to activities within a building.

Providers would be expected to organise opportunities for people to access local facilities, activities, groups, services and other ordinary community settings. This could be delivered:

- As part of a provider-organised group activity;
- On an individual basis where this forms part of the person's wider CSSI programme;

OFFICIAL - SENSITIVE

- From a provider's venue or community base or;
- In the wider community;

Community access is therefore in scope where it forms part of a provider-organised CSSI programme, whether it is delivered to a group or to an individual within that wider programme. Under these arrangements, community access would be included within the provider's CSSI rate and would not be treated or priced as a separate service.

What is out of scope

Under the new framework, CSSI will not include support that is commissioned specifically for one person to access activities of their own choice outside a provider-organised CSSI programme. Providers will therefore no longer be able to deliver this type of individually commissioned support through the CSSI Framework or submit a separate rate for taking a person out into the community.

Instead:

- **CSSI** will cover community access delivered as part of a provider-organised, structured programme of support. This may include support where a person attends a provider's site or programme and accesses the community as part of their planned CSSI activity.
- **Homecare or Supported Living** will cover individually commissioned support where a person is supported from their home to access activities in the community and returns home, outside a provider-organised CSSI programme. This support may be regulated or non-regulated.

Providers wishing to deliver this type of individually commissioned community support will need to apply to deliver it through the relevant Homecare or Supported Living Framework.

This creates a clearer distinction between the commissioning routes and clarifies where different types of community-based support should be commissioned.

Existing arrangements will be reviewed to identify the appropriate future commissioning route, with transition arrangements designed to protect continuity of support and minimise disruption for people.

3. Annual inflation

The new Framework will include an annual inflationary adjustment using a methodology set out in advance.

This will provide providers with a clear basis for understanding how inflation will be considered during the life of the Framework.

The Council will publish the inflation methodology as part of the Framework documentation. This will explain:

OFFICIAL - SENSITIVE

- The measure or measures that will be used;
- How the annual adjustment will be calculated;
- When an adjustment will take effect; and
- How any revised rates will be communicated.

Providers can therefore be assured that annual inflation will be applied using a defined and transparent process. When setting their initial rates, providers should not include additional amounts to cover possible inflation in later Framework years, as this would risk inflation being counted twice.

4. Proposed payment for planned care

The Council currently makes deductions in some circumstances when a person does not attend their service. These deductions can have a significant financial impact on providers and can also take considerable time and staff resource to administer.

Under the proposed new approach, providers would be paid for the planned care set out in the person's contract, including periods of planned or unplanned absence.

For example, if a person is contracted to attend a CSSI service for an agreed number of hours each week, the provider would be paid for those contracted hours even if the person was temporarily absent.

Why we are proposing this change

The Council recognises that many provider costs continue when a person is absent. These may include:

- Staffing costs;
- Premises and utilities;
- Transport arrangements;
- Management and administrative costs; and
- The cost of keeping the person's place available.

Paying for planned care could:

- Give providers more predictable income;
- Recognise the ongoing cost of maintaining capacity;
- Reduce the need for attendance reconciliation and payment adjustments;
- Simplify invoicing;
- Reduce invoice queries and disputes;
- Make expenditure more predictable; and
- Enable some providers to offer a lower, more sustainable hourly rate.

OFFICIAL - SENSITIVE

Proposed controls

Payment for planned care would not mean that payments continue indefinitely where support is no longer required.

The contract would include controls to ensure payment reflects the support that remains planned and available. These would cover:

- Changes to, or the ending of, a person's planned support;
- Extended or repeated absence requiring review; and
- Support not being available or relevant changes not being reported.

Providers would still be required to record attendance and share this information with the Council.

Detailed requirements and exceptions would be finalised before implementation. The Council is seeking providers' views on how these controls can operate fairly and consistently without creating unnecessary administration.

Any proposal to change how people's assessed contributions are calculated would be considered separately and would require appropriate financial, legal and equality assessment and approval.

5. Proposed CSSI Ceiling Rates

The Council would like to thank providers who contributed to the Cost of Care exercise. Although the exercise did not produce a sufficiently conclusive single cost on which to base the proposed fees, it provided useful evidence and highlighted the diversity of the sector, including the different service models, operating costs and circumstances of individual providers.

Given these findings, the Council has considered the Cost of Care evidence alongside a wider range of information, including:

- current rates paid through the Approved Provider List, known as the APL;
- responses to the recent survey on provider rates;
- information about different service and delivery models;
- wider market intelligence and relevant benchmarking;
- the affordability of the proposals; and
- the potential benefit of paying providers for planned care.

The rates set out in the below table are ceiling rates. A ceiling rate is the maximum hourly rate that the Council would normally agree for that tier. It is not a standard or automatic rate that every provider would receive.

The proposed ceilings have been designed to:

OFFICIAL - SENSITIVE

- Recognise that providers have different delivery models and costs;
- Allow reasonable variation in provider rates;
- Provide consistency and transparency;
- Support a sustainable and diverse provider market;
- Protect the Council's ability to secure value for money; and
- Provide a clear maximum rate for each tier.

CSSI Tier	***Definition***	***Proposed maximum hourly rate (ceiling)***
Standard Support	The person can access and participate in the service and achieve their agreed outcomes through the provider's core staffing and support arrangements. This may include general oversight, guidance and direct support as required. The person does not require additional dedicated 1:1 staffing.	£12.00
Intermittent 1 to 1 Support	The person can access and participate in the service and achieve their agreed outcomes through the provider's core staffing and support arrangements for most of their attendance but requires additional 1:1 support at identified times. This may include support with personal care, communication, behaviour, mobility, transitions or specific activities. The additional dedicated 1:1 support is not required throughout the person's attendance.	£16.00
Continuous 1 to 1 Support	The person can access and participate in the service and achieve their agreed outcomes through the provider's core staffing and support arrangements, with an additional dedicated 1:1 member of staff required throughout their attendance. This dedicated 1:1 support is provided alongside the provider's core staffing arrangements and is required for the full duration of the person's attendance.	£24.00

OFFICIAL - SENSITIVE

Employment Skills Rates

Providers wishing to deliver Employment Skills support would need to apply for this part of the Framework separately to the Community Based Support Lot and demonstrate that they meet the relevant specification requirements before they can deliver the service.

Employment Skills – Development	The Development tier provides structured support to help the Person develop the skills, confidence and independence required to progress towards employment, volunteering, training or other agreed employment-related outcomes. Support is tailored to the Person's Employment Skills Plan and may include intermittent 1:1 support where required for specific activities, learning opportunities or agreed goals.	£16.00
Employment Skills - Enhanced	The person is progressing towards the later stages of their employment journey and requires targeted, dedicated 1:1 support to access work experience, volunteering, employment or other agreed employment-related outcomes. The support is focused on helping the person apply their skills in realistic work environments and progress towards their agreed employment goals. Dedicated 1:1 support will form part of the support provided within the Enhanced tier and is included within the tier rate.	£24.00

A Person's commissioned support plan may include more than one tier where their support requirements vary across different activities or periods of attendance. For example, a Person may require Standard Support for a craft activity but Intermittent 1:1 Support for a farm-based activity where additional 1:1 support is required at identified times. The applicable tier for each activity or period of attendance would be agreed between the Council and the Provider, based on the Person's assessed needs and agreed outcomes.

The hourly rate for each tier must incorporate all staffing and support required within that tier, including any 1:1 support specified. The applicable tier rate would be paid for the relevant hours and would not be paid in addition to another tier rate for the same period of support.

For example, five hours of Intermittent 1:1 Support would be paid at the Provider's agreed Intermittent 1:1 rate, rather than the Standard rate plus a separate payment for 1:1 support.

OFFICIAL - SENSITIVE

Any 1:1 support required within the Development or Enhanced Employment Skills tiers is similarly included within the relevant tier rate.

What we would expect from providers

Providers applying to join the Framework would be asked to submit an hourly rate for each service tier they wish to deliver. The rate submitted should:

- Be fair and reasonable;
- Reflect the actual cost of delivering the service;
- Support safe and effective delivery;
- Allow for reasonable organisational overheads and surplus;
- Reflect the provider's delivery model; and
- Remain at or below the ceiling for the relevant tier.

The ceiling is a maximum, not a standard rate, and providers should not assume that they must submit it. Although providers will not be required to provide detailed evidence of their costs, each submitted rate should be based on their own clear and reasonable understanding of the cost of delivering the service.

The Council's responsibility is to pay a fair and reasonable price for the care and support it commissions to meet a person's assessed needs. This does not mean meeting the full cost of operating a provider's wider service or organisation. Providers should therefore consider how Council funding can be used alongside other appropriate sources of income, funding and support to strengthen their sustainability, develop their offer and continue to thrive.

Taken together, this approach is intended to allow providers to submit rates that properly reflect their delivery model and circumstances, while avoiding the ceiling automatically becoming the standard market price.

6. Existing rates and transition arrangements

The Council has agreed that provider rates under contracts that pre-date the current APL will be brought into line with the equivalent APL rate from 05 April 2027.

This will provide a clear and consistent starting point before services move to the new CSSI Framework arrangements.

Where a current service does not have a directly comparable APL rate, or where there are exceptional circumstances, the Council will consider the appropriate approach with the provider.

Moving from the APL to the new CSSI Framework

Depending on their current arrangements and the CSSI tier that applies, providers may see their rates increase, decrease or remain broadly the same.

OFFICIAL - SENSITIVE

The Council is seeking providers' views on when and how existing APL services should move to the new Framework rates and terms and conditions, including whether different approaches may be needed where rates increase or decrease.

The transition approach should:

- Be affordable and manageable for providers;
- Remain affordable for the Council;
- Give providers time to plan;
- Protect continuity of care and support;
- Allow existing arrangements to be mapped to the correct CSSI tier;
- Ensure that changes are applied consistently; and
- Identify services that may not fit the standard CSSI pricing model.

Provider feedback will help the Council determine a fair, practical and clearly defined transition approach.

7. Alternative Commissioning Arrangements

The Council recognises that a small number of highly specialist or bespoke services may not fit safely or appropriately within the standard CSSI tiers and ceiling rates.

This may be the case where:

- A service supports a small and clearly defined group of people;
- Specialist staffing, skills or facilities are required to meet assessed needs;
- There are significant fixed costs that are essential to meeting people's assessed needs and cannot reasonably be covered through the standard hourly rates;
- There is an evidenced market need for the service, but it would not be viable if commissioned only through individual hourly arrangements;
- A person requires a particularly individualised form of support.

Where this applies, the Council may need to consider a different commissioning model.

This could include:

Block contracts: A block contract could be considered where the Council needs to secure a defined level of specialist capacity or maintain access to a strategically important service. Any block arrangement would need to demonstrate sufficient demand, clear outcomes, appropriate use of capacity, value for money, manageable risk for both the provider and the Council, and a clear review process.

Direct Payments or Individual Support Funds (ISF): Increased use of Direct Payments or ISFs may be appropriate where a person (or group of people) wish to arrange highly personalised support that cannot readily be commissioned through the standard Framework.

OFFICIAL - SENSITIVE

Any use of a Direct Payment would remain subject to the person's assessment, support plan, agreement and the applicable Direct Payment arrangements.

Other Commissioning Arrangements: The Council may also consider other lawful and proportionate approaches where these provide an appropriate way of meeting assessed needs and maintaining a suitable specialist service.

This does not mean that services charging above a ceiling rate would automatically receive an alternative contract. Each case would need to be considered on its circumstances, including the needs being met, available alternatives, provider evidence, affordability and value for money.

8. How consultation responses will be used

Responses should be submitted using the attached questionnaire. The Council will review all responses and consider them alongside:

- Cost of Care evidence;
- Current fees and contractual arrangements;
- Provider survey findings;
- Market intelligence and benchmarking;
- Financial modelling and affordability;
- Equality considerations;
- Legal and procurement advice; and
- The need to maintain safe, suitable and sustainable services.

Consultation responses will inform the final Framework. However, taking part in the consultation does not commit a provider to bidding for the Framework or to the rates included in its response.

Similarly, the consultation does not commit the Council to a particular fee, contract award or commissioning arrangement.

A summary of the consultation findings and the Council's response will be produced following the consultation and shared with providers.

9. Responding to the consultation

Please submit your response using the attached questionnaire by:

Closing date: Tuesday 03 November, 12.00pm
Email address: hasservicedevelopment@northyorks.gov.uk

If you require the consultation in an alternative format or would like support to respond, please contact:

HASservicedevelopment@northyorks.gov.uk

OFFICIAL - SENSITIVE