

Reference: FOI.ICB-2526/460

Subject: Expenditure and Commissioning of Complex Care Packages at Home and Specialist Community Nursing Services (FY 2022/23 to present)

I can confirm that the ICB does hold some of the information requested; please see responses below:

QUESTION	RESPONSE																
<p>1. Total expenditure on complex care packages delivered at home (including NHS Continuing Healthcare (CHC) and non-CHC complex community health packages) for each of the last three full financial years and the current year to date. Please separate adults and children where the data is held.</p>	<p>The following tables provide the total financial spend in year for the last three financial years by the ICB on complex care from independent private providers. The current year of 2026/27 is currently not available.</p> <p>Please note that Specialist Community Nursing Services are provided through Sirona Community Health for our region.</p> <table border="1" data-bbox="1048 930 2056 1157"> <thead> <tr> <th>Gross expenditure on Adult CHC-funded packages (Inc FT)</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>2023/24</td> <td>£42,255,212</td> </tr> <tr> <td>2024/25</td> <td>£46,114,994</td> </tr> <tr> <td>2025/26</td> <td>£45,841,920</td> </tr> </tbody> </table> <table border="1" data-bbox="1048 1193 2011 1409"> <thead> <tr> <th>Gross expenditure on Children and Young People-funded packages (inc FT)</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>2023/24</td> <td>£4,504,094</td> </tr> <tr> <td>2024/25</td> <td>£3,369,398</td> </tr> <tr> <td>2025/26</td> <td>£3,612,000</td> </tr> </tbody> </table>	Gross expenditure on Adult CHC-funded packages (Inc FT)	Total	2023/24	£42,255,212	2024/25	£46,114,994	2025/26	£45,841,920	Gross expenditure on Children and Young People-funded packages (inc FT)	Total	2023/24	£4,504,094	2024/25	£3,369,398	2025/26	£3,612,000
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<p>2. The number of active complex care packages at home as at the most recent date available, broken down by:</p> <ul style="list-style-type: none"> i. Adults / Children ii. Broad clinical category where held (e.g. learning disabilities/autism, mental health, tracheostomy/ventilation/airway management, other clinically complex needs) 	<p>The number of active Adults complex cases is 240</p> <p>Of those cases, below is the breakdown in accordance with the CHC framework defined clinical categories.</p> <p>Learning Disability and Mental Health = 84 Physical Disability = 156</p> <p>The number of active Children’s Continuing Care complex cases is 30.</p> <p>Unlike the Adult cases, the defined categories are not collected for Children and Young People.</p>
<p>3. A list of all independent, private or voluntary sector providers commissioned for complex care at home or specialist community nursing packages in the period, including (where recorded):</p> <ul style="list-style-type: none"> i. Number of packages per provider ii. Approximate total spend per provider (or top 10 providers by value) iii. Whether provision was via full managed package, spot purchase, framework agreement, or rapid-response/temporary staffing 	<ul style="list-style-type: none"> i. The ICB has applied Section 43(2) to the disclosure of the number of packages per provider. Section 43(2) exempts from disclosure information which would, or would likely to, prejudice the commercial interests of a provider. <p>The ICB has previously contacted a subset of providers who have confirmed that the information is considered commercially confidential to them. The ICB has considered the information provided by the providers when applying the public interest test to the exemption.</p> <p>The public interest arguments in favour of disclosing the information include the ICB’s responsibility to be transparent and accountable in its decision making and to promote public understanding of how the NHS functions. Care packages are paid for through public taxation and therefore the public has an interest in how many packages are being provided by the NHS</p>

and whether these packages represent value for money. Each month the ICB published all spend over £25k, therefore the ICB does publish a high level of expenditure for the public to scrutinise.

The public interest argument in favour of maintaining the exemption includes the confirmation from providers that price per package is commercially sensitive information and could prejudice their commercial interests if disclosed.

The ICB has determined that disclosing the information would prejudice the commercial interests of current providers and possibly impact on patients aligned to their services for care, as disclosure may result in current providers and possibly future providers not offering packages of care to the ICB. Providers may consider that offering packages to the ICB would constitute a risk of competitive disadvantage for them. The ICB has a responsibility to secure the best use of public resources and provide value for money. To achieve this, the ICB needs to have a wide range of organisations willing to provide packages of care. Funding is based on the assessed level of needs of the patient, as well the availability of care at the time the request is made to find a suitable provider.

- ii. BNSSG Top 10 list of providers used in accordance to spend for 2025/26 is highlighted in the table below.

Provider	Total Expenditure
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<p>4. Details of any current framework agreements, block contracts or dynamic purchasing systems for complex home care / specialist nursing / rapid-response staffing, including:</p> <ol style="list-style-type: none"> Provider names Contract start and end dates (or review/renewal dates) Scope (e.g. 24/7 nursing, paediatric, LD/autism/MH, hospital discharge support) 	<p>There are national frameworks on which providers can join, however the brokerage teams noted in question 5 can also be contacted.</p> <p>NHS Standard two-year contracts and some block contracts are in place with providers across Bristol, North Somerset and South Gloucestershire areas.</p>																				
<p>5. The name, job title and contact details (email/telephone) of the commissioner or team lead responsible for sourcing complex care at home packages and rapid-response nursing support.</p>	<p>Bristol and South Glos CHC packages are commissioned via the Funded Care Brokerage Team, based within the ICB. Communication with providers is primarily via email.</p>																				

Bnssg.brokerage@nhs.net

North Somerset CHC packages are commissioner via the Brokerage Team, based within North Somerset Council. Communication with providers is via email. North Somerset Council will hold the current supplier list for this region.

Brokerage.team@n-somerset.gov.uk

The information provided in this response is accurate as of 6 May 2026 and has been approved for release by Rosi Shepherd, Chief Clinical Leadership and Delivery Officer (Nursing) for NHS Bristol, North Somerset and South Gloucestershire ICB.