



**Cabinet**  
27 June 2016

**Report from the Strategic Director  
Community and Wellbeing**

Wards Affected:  
[ALL]

**Care And Support Contract - Extra Care - authority to procure**

**1.0 Summary**

1.1 In accordance with the Council's Contract Standing Orders 88 and 89 authority is sought to approve the procurement of the care and support service for the following four extra care schemes (ECS) with a maximum of three associated Care and Support contracts:

- Beechwood Court – Wembley
- Rosemary House – Willesden
- Harrod Court - Kingsbury
- Tulsi House – Sudbury.

1.2 Tenders will be sought through the Council's Dynamic Purchasing System (DPS) for Accommodation Plus Services which went live in February 2016.

**2.0 Recommendations**

2.1 Cabinet are asked to approve the inviting of tenders for the care and support service within four ECS's leading to an award of up to three contracts.

2.2 Cabinet to give approval to officers to evaluate the tenders referred to in 2.1 above on the basis of the evaluation criteria set out in section 6.0 of this report.

### 3.0 Detail

#### Extra Care

- 3.1 The schemes listed below are the property of Network Homes and are situated within the borough. The schemes provide the following numbers of self-contained one and two bedroomed flats for people aged 55+ years who have dementia, learning disabilities (LD), physical disabilities (PD) and/or sensory impairment(s) (SI) and require appropriate accommodation with care and support on hand to live independently in the community:

Name of Scheme	No. and size of flats	No of tenants in receipt of care	Primary care group
Beechwood Court - Wembley	20 one bedroom flats for people with dementia	19	Dementia
Harrod Court - Kingsbury	38 one bedroom flats and 2 two bedroom flats	38	General aged 55+
Rosemary House - Willesden	40 one bedroom flats	33	General aged 55+
Tulsi House - Sudbury	32 one bedroom and 4 two bedroom flats	25	General aged 55+

- 3.2 The ethos of ECS in Brent is to maintain people in a home of their own by offering flexible care and support, to meet their eligible needs (as defined by the Adult Social Care assessment of their needs under the Care Act 2014), in an appropriately design flat to aid their independence. Along with a range of social activities to provide a quality of life, as a real alternative to institutional care in residential or nursing care home.

#### Current Services Provided

- 3.3 The care, support and activities services are currently provided by external agencies. The number of service users in receipt of these services, together with their primary care needs are listed above, the aim is to move to having all tenants in the schemes having care and support needs:
- 3.4 Currently not all tenants are in receipt of care due to the following reasons:
- Where a couple were moved into a 2 bed-roomed flat and one spouse required care at the time of moving in but has since passed away.

Although the remaining spouse does not require care, this spouse is still residing in the flat as a legal tenant.

- Some tenants' do not have any care needs at this moment in time but have moved in from a residential placement. The design of the schemes and the time to recover have been factors that have assisted them to have very low on going needs. It also has to be noted that the move from residential created a saving for the Council.
- Some tenants refuse to have the care provided, however, they have identified care needs and with the presence of care staff and the scheme manager, these individual are able to be monitored and their safety ensured.

3.5 The care and support service is provided by on-site care staff throughout the day, with sleep-in and/or waking night support dependent on the needs of the tenant group. The care and support service is primarily task and time orientated according to individual tenant's support plan, as you would find in domiciliary care provision within the wider community. This lack of flexibility has an impact on the type of need, and therefore the type of tenant, that can be safely managed in the schemes. For example, it is currently difficult to meet the needs of tenants with dementia or other conditions that mean they will have unpredictable needs such as wandering or a tendency to fall. Such needs cannot always be predicted or timetabled for and therefore the current model of care is not appropriate to meet their needs because it is not flexible and responsive enough.

3.6 The activities service is provided throughout the week and activities are organised in consultation with the tenants, this is procured via the Supporting People Budget and is due to cease as we 'merge' the two services together to further support a flexible model of service delivery. This will produce a saving in the Supporting People Budget and ensure that activities do not just happen when the Activity Coordinator visits the scheme, but that Care Staff undertake activities with tenants throughout the week.

### **Future model of service provision**

3.7 A new integrated model of care, support and activities will enable the Council to deliver services in a way that will improve individual outcomes, quality of life and allow for any unplanned care and support to be delivered in a cost effective manner. This will also ensure we are able to meet the increasingly complex needs of people with fluctuating needs, such as tenants with dementia, without an admission to residential and nursing care which in the majority of cases is rarely the option of choice for the individual concerned and comes at a higher cost to the Council.

3.8 The new flexible service will have two elements:

3.8.1 Care hours to meet the eligible needs for an individual tenant as detailed in their support plan, which will split between;

- a. The hours required for care to be delivered in a tenant's own flat within the scheme, and in the majority of cases can be predicted, such as assistance with personal care in the morning or evening and support at night with toileting or turning in bed.
- b. The hours required for care and support that will be delivered in the communal areas or for identified needs which occur at unpredictable times, i.e. people with dementia wanting to leave the building or individuals needing emotional support due to their mental health needs and those with toileting needs which cannot be timetabled.

3.8.2 Additional hours required to ensure there are staff available throughout the day and night to meet the unpredictable care needs of tenants, for example, following a fall or if someone with dementia is unsettled and walking around the building, or staff need to respond to a call raised via the 'warden call' system for assistance and to enable the provider to organise a range of social activities based on the requests and interests of the tenant group. These additional hours will ensure residents safety by delivering a responsive service, thereby reducing the likelihood of tenants having to move into a residential care home setting. This is referred to as Core Hours.

- 3.9 The above hours will be delivered through a 24-hour roster which takes account of the needs of the tenant group and how the care is delivered. With the 24 hour core roster, a minimum number of staff will be on duty at all times to support both planned, routine and emergency care needs. This will be agreed based on the overall needs of all the tenants in a scheme rather than a prescriptive formula. Assistive technology (e.g. telecare) will be used to further streamline the service delivery, ensuring a safe environment is maintained and risks are managed appropriately.
- 3.10 The social activities element of the tender will be aimed at creating activities that are dedicated to tenant's interests and community engagement, ensuring the schemes have a sense of community and a structure for social engagement. Further individual hours can be commissioned to respond to a tenant's individual needs and circumstances based on their assessment of need.
- 3.11 The flexible model of care and support will improve not only individual outcomes and quality of life but will also achieve better value for money than the current rigid model which is task, time and location orientated. The existing model has led to 17 tenants moving on to residential and nursing care over the last two years, as we were unable to meet their needs in a safe way within the schemes. Modelling shows that with a flexible roster of staff and the use of telecare, we should be able to reduce the number of people whose needs cannot be met within the scheme and who are moved into a residential or nursing placement by up to 75%.

- 3.12 The Council will continue to have 100% nomination rights for all the flats. The department's policy is that extra care accommodation and care is the default option for all new service users who would otherwise require a residential placement, thereby ensuring that all extra care units are occupied by prospective new tenants who have eligible care and support needs (as per the Care Act 2014) and resulting in reduction of placements in residential or nursing care. The Quality Assurance Meeting (the Adult Social Care 'panel' that reviews all high cost community support packages and requests for residential/ nursing care placements) will also ensure that all appropriate referrals are directed to extra care and no placements into residential and nursing can be made without a head of service authorisation.

#### **4.0 Market Position Statement**

- 4.1 The new contract will ensure it is aligned with the objectives set out in the Brent Market Position Statement (MPS) 2014 whose main principal is to ensure that future social care and support services will be delivered by providers who have the experience in maximising individual choice and control through flexible delivery of services rather than the current model of domiciliary care delivery of task and time orientated care.

#### **5.0 The Care Act 2014**

- 5.1 As a result of the new contract the service will ensure the following stipulations of the Care Act 2014 are met:
- a) Local authorities are to ensure their social care system is based on the principles of prevention, early intervention and is focused on an individual's well-being and ability to maintain their independence in their own home environment rather than the institutional care settings.
  - b) Focus to be on an integrated, preventative and community based housing and support service placing an individual's well-being at the heart.
  - c) Put the suitability of accommodation explicitly as part of the definition of well-being, which sets the tone for the whole Act.
  - d) Deliver care and support services through an understanding of reablement; believing that every person, no matter what age or disability, has the potential to develop or regain skills that allow them to be more independent and/or have access to a wider range of choices; to create an atmosphere of support and encouragement to try new things, practice lost skills, where staff supervise, support, and encourage, 'doing with' rather than 'doing for'.

## 6.0 The tender process

- 6.1 Permission is sought to procure the on-site care, support and activities service from the current Accommodation Plus Services Dynamic Purchasing System (DPS) Lot 4B.
- 6.2 In accordance with the DPS, suppliers who have successfully been admitted onto Lot 4B (care and/or support services) will be invited to bid for the required services.
- 6.3 The proposed procurement route will streamline and provide benefits both for the bidders and the Council;
- suppliers will not have to redo their Pre-Qualification Questionnaire (PQQ) submission for each bid,
  - the Council does not have to allocate time and resources to evaluate the PQQ's more than once in the life time of the DPS,
  - the tendering timescales are reduced however, although a minimum 10 day period is stated within the Public Contract Regulations, recent tendering experience has informed us that this should be longer to ensure bids of a suitable quality and cost are received and TUPE assessments can be fully explored by the bidders, and;
  - the use of the DPS allows Council officers to have pre-tender engagement discussions to ensure that bidders understand our requirements with a view to ensuring that quality bids are received.
- 6.4 The proposed length of contract is 4 + 1 years, which is designed to create more stability for tenants and encourage a wider range of bidders, including many providers who specialise in this provision but have not been active within the borough.
- 6.5 In accordance with Contract Standing Orders 88 and 89, pre-tender considerations have been set out below for the approval of the Cabinet.

Ref.	Requirement	Response
(i)	The nature of the service.	Care, support and activities service for extra care
(ii)	The estimated value.	£7.5m (based on budget and current number of hours provided at an hourly rate of £16.26, provided 52 weeks a year for 5 years) see section 7.0 below for additional commentary
(iii)	The contract term.	4+1 years
(iv)	The tender procedure to be adopted.	Mini-Competition via the DPS

Ref.	Requirement	Response	
v)	The procurement timetable.	<b>Indicative dates are:</b>	
		Mini-competition advert	29/06/16
		Deadline for tender submissions	21/07/16
		Site Visits	27/07/16-29/07/16
		Panel Evaluation	04/08/16
		Report recommending Contract award circulated internally for comment	10/08/16
		Cabinet approval	19/09/16
		Cabinet call in period of 5 days (not mandatory if using the DPS although it will be observed) - notification issued to all tenderers and additional debriefing of unsuccessful tenderers (contracts covered by the full EU Regulations only)	24/09/2016
		Contract Mobilisation	24/09/16
		Contract start date	31/10/16
(vi)	The evaluation criteria and process.	<ul style="list-style-type: none"> <li>At the quote evaluation stage the bids will be evaluated on the grounds of the Most Economically Advantageous Tender (MEAT) with a 60% price and 40% criteria scoring.</li> </ul> <p>The quality assessment will be evaluated using the following range of criteria:</p> <ul style="list-style-type: none"> <li>How the Service will be delivered to achieve delivery of improved personal independence</li> </ul>	

Ref.	Requirement	Response
		<p>through choice and control as well as delivery of outcomes</p> <ul style="list-style-type: none"> <li>• How policies and procedures regarding equality and human rights will be applied</li> <li>• Proposals regarding staffing (skills, qualifications, experience and structure) to ensure that the needs of the tenants are met at all times whilst providing continuity of care</li> <li>• How current/previous experience will be applied to deliver the service</li> <li>• How Social Value will be delivered</li> <li>• How out-of-hours service will be delivered</li> <li>• How the Safeguarding policy will be implemented and adhered to</li> </ul>
(vii)	Any business risks associated with entering the contract.	There are no business risks associated with the proposed contract.
(viii)	The Council's Best Value duties.	The evaluation criteria will be based on a model where cost and quality are distributed to ensure that providers are selected on best value. The tendering documentation will also specify how the contract will be managed to ensure the on-going delivery of the service and outcomes for each service user.
(ix)	Consideration of Public Services (Social Value) Act 2012	<p>The following Social Value (SV) assessments have already been incorporated into the DPS qualification process:</p> <p><u>Qualification stage:</u></p> <ul style="list-style-type: none"> <li>• Confirmation the bidder's environmental policy/approach has led to sustainable improvements</li> <li>• Confirmation the bidders environmental policy/approach has delivered waste and carbon reduction</li> <li>• Involvement of Small and Medium Enterprises (SMEs), particularly within Brent</li> <li>• Adoption of ethical practices – these will include Safety and Hygiene, Working Hours and payment of London Living Wage (LLW).</li> </ul> <p>At the quote stage the following additional SV assessments will also be applied:</p> <ul style="list-style-type: none"> <li>• Confirmation that LLW (and National Living Wage) will be paid (although the Council will have the</li> </ul>



Ref.	Requirement	Response
		<p>option to assess non LLW rates)</p> <ul style="list-style-type: none"> <li>• Number of additional jobs that will be created as part of the contract</li> <li>• Percentage of vacancies that will be targeted at the unemployed people of Brent</li> <li>• Total anticipated spend on SME's (in and out of Brent)</li> </ul> <p>The weightings for Social Value will hold at least 10% of the total evaluation score.</p>
(x)	Any staffing implications, including TUPE and pensions.	None for the Council. TUPE will however apply to staff currently employed by the incumbent provider.
(xi)	The relevant financial, legal and other considerations.	See sections 8.0 and 9.0 for legal and financial considerations.

6.6 The Cabinet is asked to give its approval to these proposals as set out in the recommendations and in accordance with Standing Order 89.

## 7.0 Contract Management

7.1 Contract management will be outcome focused. Some of the Key Performance Indicators will be:

7.1.1 Number of hours saved in meeting the identified outcomes for tenants as opposed to proposed hours identified in the individual tenant's support plan drawn up by Adult Social Care.

7.1.2 We will set a Minimum number of admissions to residential and nursing care per year based on reducing the current rate of 9 per year to 3 per year.

7.2 Officers will set a baseline to determine the following and develop targets to reduce these year on year:

7.2.1 Number of ambulance call outs and reasons, which do not result in a hospital admission.

7.2.2 Number of tenants in hospitals and the number of days hospitalised

7.2.3 Number of emergency/unexpected calls resulting in prevention of hospital admission/residential/nursing care.

7.3 Officers will monitor the contract in a number of ways. Some of the methods

adopted will be:

- Ensuring that the provider maintains their registration and compliance with the required standards with the relevant regulatory body such as the Care Quality Commission (CQC)
- Monitoring and validation visits to the schemes where officers liaise with the tenants to get feedback on the quality of service delivery. Officers will also check various records during these visits for compliance.
- Take immediate action on feedback from service users, colleagues, complaints, safeguarding, etc.
- Undertake ad hoc/emergency visits where a complaint or safeguarding concern has been raised, particularly in relation to service delivery
- cost comparison of overall care hours against the cost of a residential or nursing care placement
- Liaison with other stakeholders to share intelligence. (CQC and Safeguarding)
- Issue a Corrective Action Plan (CAP) where service shortfalls/failures have been identified. Officers will be in regular liaison with the provider to ensure that all items on the CPA have been actioned according to the timescales set.

## **8.0 Financial Implications**

- 8.1 The 2016/17 budget for Extra care and support is £1.5m. This budget directly accommodates the four current extra care schemes.
- 8.2 The current hourly cost of extra care in these units equates to £16.26, which delivers approx 92,000 hours per annum. The current rate is National Living Wage compliant, so it is estimated that this hourly rate can be sustained in this procurement exercise and be delivered within the current budget allocation.
- 8.3 The department will need to build inflationary increases in to future year's budgets as National Living Wage increases will need to be factored.
- 8.4 Current modelling suggests that to achieve London Living Wage (LLW) compliance the rate would need to increase by at least £1.20ph. This would potentially add a further £110k pa in costs, which is currently not accommodated for in the department's budget. In order to facilitate the assessment of the LLW cost implications both inclusive and non-inclusive rates will be requested and evaluated with both options presented to the Cabinet when the request for approval to award is made.

## **9.0 Legal implications**

- 9.1 Members at its meetings in September 2015 and February 2016 gave their approval for the creation of the DPS and further delegated authority to the now Strategic Director of Community and Well-being to award individual contracts under the DPS with a value up to £500,000.

- 9.2 The value of the proposed call –off contracts subject to the mini competition process is likely to be in excess of the threshold for High Value Contracts under Contract Standing Orders and as such Cabinet approval of the pre-tender considerations and invitation to participate is required.
- 9.3 Officers are advised to note that award criteria relating to any proposed individual contracts under the DPS must be in accordance with the original contract notice or in the invitation to confirm interest document. Those criteria may (where required) be precisely formulated in the invitation to tender.
- 9.4 In above-threshold call-off contracts from a DPS, the standstill period is voluntary not mandatory (therefore Officers are strongly advised to applying it to protect against possible post-contractual ineffectiveness claims).
- 9.5 Once the tendering process is undertaken Officers will report back to the Cabinet in accordance with Contract Standing Orders, explaining the process undertaken in tendering the contracts and recommending award.
- 9.6 Transfer of Undertakings (Protection of Employment) Regulations 2006 (“TUPE”) is likely to apply to this mini competition process if there is a service provision change in providers. TUPE would apply between the new replacement providers and the incumbent providers should there be a change in service provider. In these situations the Council will act as a conduit of information between the parties so as to ensure minimal disruption to service users during the implantation plan phase

## **10.0 Diversity Implications**

- 10.1 The proposals in this report have been subject to screening and officers believe that there are no diversity implications.

## **11.0 Staffing/Accommodation Implications (if appropriate)**

- 11.1 This service is currently provided by external contractors and there are no implications for Council staff arising from retendering the contract.

## **12.0 Background Papers**

- 12.1 EIA attached.

## **Contact Officer(s)**

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