

	<p align="center"><b>Cabinet</b> 18 July 2022</p>
	<p align="center"><b>Report from the Strategic Director Community Wellbeing</b></p>
<p align="center"><b>Authority to Invite Tenders for Adult Social Care Reablement Contracts</b></p>	

<b>Wards Affected:</b>	All
<b>Key or Non-Key Decision:</b>	Key Decision
<b>Open or Part/Fully Exempt:</b> <small>(If exempt, please highlight relevant paragraph of Part 1, Schedule 12A of 1972 Local Government Act)</small>	Open
<b>No. of Appendices:</b>	None
<b>Background Papers:</b>	None
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## 1. Summary

- 1.1 This report is seeking Cabinet approval to tender for reablement services for adults, as required by Contract Standing Orders 88 and 89.
- 1.2 Reablement is a short term, outcome focussed service that helps people to regain living skills lost following a health issue, such as a stroke. At present Brent is spot purchasing services from local care providers. If approved, the council will commission services from three specialist reablement providers.

## 2. Recommendations

- 2.1 That Cabinet –
  - (i) Approve inviting tenders for a reablement services for adults with disabilities on the basis of the pre-tender considerations set out in paragraph 3.24 to the report.

- (ii) Approve Officers evaluating the tenders referred to in 2.1(i) above on the basis of the evaluation criteria set out in paragraph 3.24 to the report
- (iii) Approve the contractual period for reablement services as three years, with an option to extend for a period of up to a further two years.
- (iv) Agree that funding is made available to pay reablement workers under the reablement contracts at the London Living Wage from year 1 of the contract.
- (v) Delegate authority to award the reablement contracts to the Strategic Director, Community Wellbeing in consultation with the Lead Member for Adult Social Care.

### **3. Background**

- 3.1 This report is seeking approval to tender for Reablement contracts for Brent Council. Reablement is a short term, time limited service offered for a maximum of 6 weeks where it is felt that by supporting a resident to re-learn, or become confident in certain activities of daily living, the quality of life and independence for that individual can be improved. The benefit often for the council is that the long-term cost of an ongoing package of care to the council is likely to be less.
- 3.2 The delivery of reablement services is different from the delivery of standard homecare, in that the focus of the provider is to support an individual to regain their own skills and independence, thus minimising longer term intrusion into their life as the individual is likely to require less ongoing support. Reablement is a vital part of the hospital discharge process, and the aim is that it becomes a much more important part of care delivered to people who already have care packages, but need assistance in retaining or learning new skills to stay independent.
- 3.3 Currently reablement services are spot purchased from a range of providers. Although our reablement services are having an impact on care costs and leading to better outcomes for service users, it is felt that more could be done via reablement to improve the quality of life for service users, and reduce ongoing spend on care for the council.
- 3.4 There are a number of changes that the council wants to make to its reablement provision through a newly commissioned service-
  - Complex Needs: The current reablement offer is not able to support people with complex needs. Development of a reablement service that has the skills and capability to support people with complex needs to live more independently in their own homes and reduce the requirement for double handed care and ongoing support represents a significant savings opportunity
  - Existing clients in the community who already receive a care package: The current reablement offer is mainly focused on supporting hospital discharge

pathways. Development of a reablement response offer to people already receiving care at home that can provide intensive support in a crisis and help to rebalance their situation will reduce demand for an increase in ongoing care and support

- Dynamic reablement offer: Reablement is currently a one-sized offer that does not have the flexibility to adjust to the pace and rate of progress a person is making in achieving their reablement goals. A more dynamic offer would achieve better outcomes more quickly for the person
- Alignment with Community Rehab And Rapid Response: The current reablement service is not delivered as part of a coordinated rehab and reablement offer. The opportunities to maximise the benefits of support for people to apply the learning and skills gained from their therapy sessions from coordinated therapy and reablement goal plans and provision do not exist in the current set up. There is no reablement wraparound offer for people with urgent health care needs seen by the rapid response team. This will be taken forward via the ICP as part of an integrated health and social care system.
- Equipment and Assistive Tech: The current reablement service offer is not geared towards supporting people to try out equipment and assistive technology and develop the skills and confidence to use these options as an alternative to traditional homecare support.
- Services for people with a learning disability or mental health problem: This has been a gap in current provision. The successful providers will be expected to provide reablement support for people with learning disabilities and mental health issues, particularly to aid hospital discharges, but also with people in receipt of care packages in the community.

3.5 Brent is currently commissioning around 800 hours of reablement services per week. Around 25% of new service users are receiving a reablement package based on current commissioning levels. Our intention is to increase this over the life of the contract to 1400 hours per week, so that reablement becomes a stepping-stone to receiving homecare. Modelling has shown that in Brent at the moment, 65% of people who receive a reablement service do not go on to receive a homecare service. Of those that do go on to receive a homecare package, costs are around 19% lower for those receiving single-handed care and 16% lower for those receiving double-handed care. This is achieved even though we do not currently have an optimum reablement offer, and it is only being used consistently to support people being discharged from hospital. By making reablement a more integrated part of our offer to people receiving care services, officers are of the view that more people can re-learn the skills and gain the independence they've lost, at the same time helping the council to achieve ongoing efficiencies in care costs.

3.6 It is important to emphasise that going forward there is going to be a clear separation between reablement and homecare services. Any lead provider delivering homecare services will not be able to deliver reablement services in the same patch for which they are responsible. Additionally, if a provider is appointed to the reablement and homecare frameworks, they will not be able to continue delivering a care package at the end of the reablement period – a new provider will be appointed if ongoing care is required for the service user.

This is to take away any incentive to retain a care package at the conclusion of the reablement episode. There will be a clear separation between the two services, which has been made clear to our lead providers and to prospective providers ahead of the tender process.

- 3.7 The council will also work with the successful reablement providers to ensure that staff working on the reablement contract are fully trained and supported to deliver reablement services. It is vitally important that this staffing cohort have the skills to deliver a service that promotes independence and maximises peoples' abilities to re-learn and use the assets they have to reduce the need for ongoing care. The approach is different to delivering a homecare service, and the expectation is that staff will work on this contract with little overlap with homecare. We will also be challenging providers to ensure that their staffing cohort is as stable as possible, so that Brent benefits from a well trained and experienced workforce.
- 3.8 In common with many local authorities, the council has funded capacity building work with local businesses that has been carried out by the Procurement Service, with a focus on bid writing, social value and preparing for tenders such as the homecare and reablement contracts. Four capacity building workshops took place in May and June of 2021. These workshops were repeated in April and May 2022, with 50 providers taking part in total. The workshops covered the following topics -
- Engaging with Adult Social Care Procurement – with tender work packages
  - Introduction to Bid Writing – Foundation
  - Improve Your Bid Response – Advanced
  - Circular Economy & Developing Key Partnerships
- 3.9 Each participant in the workshops completed an Online Bid Capability Assessment Questionnaire, which generated a personalised report which included a gap analysis and recommendations on getting their organisation ready to bid
- 3.10 As well as attendance at the workshops, a further 20 Brent based businesses have received 1:1 support from Branduin Business Support on bidding for tenders, comprising of two separate sessions with each company, for an hour at a time. This support was bespoke to each organisation to help them prepare for tenders. Branduin has also offered telephone and email support to providers ahead of these tender opportunities going live, to give local companies additional assistance in preparing for tender processes. It is hoped that this work will assist in ensuring that the council receives good quality bids from both locally based and national reablement providers for the proposed procurement.
- 3.11 There have also been two specific market warming events held with providers to prepare for the tender. The first was held on 27<sup>th</sup> April, and over 90 providers attended this virtual meeting. The second was held on 8<sup>th</sup> June, with over 100 providers attend an in-person event. The market warming events combined the information and plans for both the homecare and reablement tenders, and were

an opportunity to brief providers on the process and expectations from their bids. Officers also used the market warming events to finalise the reablement model that will be used to commission services going forward.

3.12 The key characteristics of a successful commissioned reablement model are:

- Specifying that the reablement provider does not retain clients for ongoing homecare after the reablement period. This helps ensure (i) providers have no incentive to ‘de-able clients’ however unconsciously, and (ii) clients do not have the easy option of staying with their existing care workers.
- Visits are 15 minutes longer than needed to meet the ‘need’ to allow time for clients to maximise their independence.
- Delivery by workers who are not trapped in a ‘time and task’ mentality.
- Paying £1-2 per hour more to reablement provider(s) to compensate for short-term care packages and less efficient routing for care workers.
- Review at the end of reablement phase, including Occupational Therapy, to ensure homecare only continues when it is meeting unmet needs.

3.13 Officers propose commissioning reablement services based on a patch-based model. Unlike homecare services there is not enough care hours available via reablement to split the borough into 13 patches. However, an analysis of reablement packages commissioned over the last 18 months has shown that the borough can be split into three reablement patches – North, Central and South.

3.14 The proposed reablement patches are –

<b>Patch</b>	<b>Wards / Homecare Patches covered</b>	<b>Number of packages since April 2021</b>
North	1. Northwick Park and Preston 2. Sudbury 3. Tokyngton 4. Wembley Central and Alperton 5. Stonebridge	469
Central	6. Queensbury and Kenton 7. Barnhill 8. Welsh Harp and Fryent 9. Dudden Hill and Dollis Hill	449
South	10. Harlesden 11. Willesden Green and Kensal Green 12. Mapesbury and Brondesbury 13. Queens Park and Kilburn	444

\*The old wards are used for these purposes to mirror the patches used for homecare, which were based on the council’s old wards.

- 3.15 Feedback from the market warming events has been clear on the establishment of geographically contained patches. Providers are much keener on this approach than commissioning three reablement providers to cover the whole borough. There are a number of reasons for this –
- Delivering a dedicated reablement service spread over a wide geographical area is an inefficient use of valuable care staff, who will spend more time travelling if the service was commissioned to cover the whole borough.
  - Due to the spread of clients across the borough it will be difficult for providers to develop a stand-alone reablement service. Giving certainty as to the area that clients will live will help with planning rotas and in the delivery of care.
  - Field supervisors and other support staff will have less distance to travel, helping with quality assurance work and oversight of care delivery.
  - Reablement packages are short-term but still require a lot of administrative work (care and risk assessment, monitoring and reporting, rostering and people management etc). This will be easier to manage in a smaller geographical area.
- 3.16 It is also intended to work with the successful reablement providers to put in place a comprehensive training programme for care staff. This is to give them the skills necessary to successfully re-able people they are working with. Training will be aligned with the CLCH training academy, so that it is linked with Rehab services in the borough.
- 3.17 Reablement providers are generally paid a higher standard hourly rate for care, typically £1 to £2 above the standard hourly rate because of the specialist nature of the service. Reablement packages are short term and so involve more work from providers from a rostering and administration perspective to run an effective service. Brent intends to offer a reablement rate of £21 an hour at the start of the contract, enabling providers to pay at least London Living Wage to staff, but also providing a premium given the nature of the services.
- 3.18 Through better commissioning of a provider led services, officers are of the view that the objectives could be delivered to improve outcomes for service users and deliver savings and ongoing cost avoidance for the council.

### **Tender Process – Reablement Contracts**

- 3.19 The contracts for the Reablement Service will be for a period of 3 years with the option to extend for 2 years.
- 3.20 Advertisements will be placed in the Find a Tender and the London Tenders Portal on 25<sup>th</sup> July 2022. Officers understand from various market engagement events that providers in the care sector are interested in the reablement contracts.

- 3.21 Tenders will be sought by way of restricted tender process within the lot structure set out in the table in paragraph 3.42 below, based on specialist needs.
- 3.22 If approval is given to invite tenders, commissioners will intensively manage the contract award and work with winning providers and stakeholders to implement the reablement contracts.
- 3.23 The Council currently use the Care place E-Brokerage system to advertise and award care packages to our lead providers. The system will be amended to support the awarding of packages for successful providers. The functionality of Care Place means that it can be used to select a provider to deliver the care package based their ability to meet the needs of the client.
- 3.24 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 services	Reablement	
(ii)	The estimated value.	£1.2m per year	
(iii)	The contract term.	Five years (3 years + 2 Years)	
(iv)	The tender procedure to be adopted.	Open tender process	
v)	The procurement timetable.	<b>Indicative dates are:</b>	
		Invite to tender	25/07/2022
		Deadline for tender submissions	16/09/2022
		Panel evaluation	19/09/2022-28/10/2022
		Contract decision	31/10/2022
		Report recommending Contract award circulated internally for comment	07/11/2022
		Cabinet approval	14/11/2022

Ref.	Requirement	Response	
		Alcatel standstill period of 10 calendar days – notification issued to all tenderers and additional debriefing of unsuccessful tenderers	14/11/2022 – 24/11/2022
		Contract Mobilisation	24/11/2022 – 01/02/2023
		Contract start date	01/02/2023
(vi)	The evaluation criteria and process.	<p>1. At selection stage shortlists are to be drawn up in accordance with the Council's Contract Procurement and Management Guidelines by the use of a selection questionnaire to identify organisations meeting the Council's financial standing requirements, technical capacity and technical expertise.</p> <p>2. At tender evaluation stage, the panel will evaluate the tenders against the following criteria: 90% quality, and 10% Social Value, price for this contract will be fixed. The panel will evaluate the tenders against the following criteria :</p> <ul style="list-style-type: none"> <li>• Safeguarding</li> <li>• Support and Care planning including risk management</li> <li>• Working effectively with service users to achieve outcomes</li> <li>• Workforce proposals including staffing developments, satisfaction of workforce, staffing retention and providing local employment opportunities</li> </ul>	
(vii)	Any business risks associated with entering the contract.	<p>The following business risks are considered associated with entering into the proposed contract. Financial Services and Legal Services have been consulted concerning this contract and have identified the risks associated with entering into this contract set out Section 8.0</p> <p>Human Resources implications: TUPE, The transfer of support provision from old providers to new if different from incumbent provider after tender</p>	
(viii)	The Council's Best Value duties.	The adoption of restricted will enable the council to achieve best value for money	
(ix)	Consideration of Public Services (Social Value) Act 2012	See section below.	



<b>Ref.</b>	<b>Requirement</b>	<b>Response</b>
(x)	Any staffing implications, including TUPE and pensions.	See section below.
(xi)	The relevant financial, legal and other considerations.	See section below.
(xii)	Sustainability	
(xiii)	Key Performance Indicators / Outcomes	Appropriate Key Performance Indicators / Outcomes will be included in the contract.
(xiv)	London Living Wage	The Contract will require the payment of the London Living Wage / Given the nature of the contract it is not appropriate to include provision requiring payment of the London Living Wage.
(xv)	Contract Management	A contract manager will be appointed and appropriate contract management provisions will be included in the contract.

#### **4. Financial Implications**

- 4.1 The total cost of the contract at today's prices, including the extension option, is estimated to be £6m.
- 4.2 Whilst the uplift is fixed, the price is linked to increases in the London Living Wage and there is a risk that the final total contract cost will be in excess of this figure. For 2022/23, this has been factored into the budget and for future years further increases will need to be taken into consideration as part of the Medium Term Financial Strategy.

#### **5. Legal Implications**

- 5.1 Local Authorities have a statutory duty under the Care Act 2014 to provide care and support for adults with illness and/or injury in their area, to prevent deterioration of their illness/injury and enable them to live as independently as possible. The duty may be met by the Local Authority by making arrangements for a person and/or body other than it to provide the said care and support.
- 5.2 Under the Public Contracts Regulations 2015 ('the PCR'), reablement services fall under Schedule 3 services and as the estimated value of the proposed contracts during their lifetime will be above the threshold for Schedule 3 services, the procurement is subject to the provisions of the PCR, in that the contract opportunities must be published on Find a Tender Service and Contract Finder, and a competitive procurement process must be undertaken before the contracts can be awarded. Officers have set out the procurement process in section 3 above.

- 5.3 The contracts are classed as High Value Contracts under the Council's Standing Orders and Financial Regulations based on the value and Cabinet approval of the pre-tender considerations (Standing Order 89) and the inviting of tenders (Standing Order 88) is required.
- 5.4 Officers would generally report back to the Cabinet once the tendering process has been completed in accordance with Contract Standing Orders, to explain the process undertaken in tendering the contracts and recommending award. However, Officers recommend that Cabinet delegate authority to award the contracts to the Strategic Director, Community Wellbeing in consultation with the Lead Member for Adult Social Care on completion of the tendering process.
- 5.5 Consideration should be given as to whether the Transfer of Undertakings (Protection of Employment) Regulations 2006 (TUPE 2006) apply. TUPE applies where there is a 'relevant transfer' this can be; 1) a business transfer or, 2) service provision change (a change in the provider of a service). This is service provision change and is governed by TUPE 2006 Regs 3(1)(b)(iii) TUPE 2006. To satisfy the conditions of TUPE 2006 there must be immediately before the service provision change—an organised grouping of employees situated in Great Britain which has as its principal purpose the carrying out of the activities concerned on behalf of the client; the client intends that the activities will, following the service provision change, be carried out by the transferee other than in connection with a single specific event or task of short-term duration; and the activities concerned do not consist wholly or mainly of the supply of goods for the client's use.
- 5.6 It is unclear what the service users requirements under the reablement framework will be and which staff will fulfil it. In light of the how the contracts will operate in the future, with no organised grouping of staff carrying out the work, TUPE is unlikely to apply to this service provision change.

## **6. Equality Implications**

- 6.1 The public sector equality duty, as set out in section 149 of the Equality Act 2010, requires the Council, when exercising its functions, to have "due regard" to the need to eliminate discrimination, harassment and victimisation and other conduct prohibited under the Act, to advance equality of opportunity and foster good relations between those who have a "protected characteristic" and those who do not share that protected characteristic. The protected characteristics are: age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, and sexual orientation.
- 6.2 Having due regard involves the need to enquire into whether and how a proposed decision disproportionately affects people with a protected characteristic and the need to consider taking steps to meet the needs of persons who share a protected characteristic that are different from the needs of persons who do not share it. This includes removing or minimising disadvantages suffered by persons who share a protected characteristic that are connected to that characteristic.

- 6.3 The very nature of homecare services means that they are targeted at, and are disproportionately accessed by, vulnerable adults and children who are also more likely experience multiple disadvantage due to their age, disabilities and health conditions. Equalities issues have been taken into account throughout the review of homecare in Brent and have been a key focus in the development of the new service model and service specification.
- 6.4 An Equalities Analysis has been completed. Where negative impacts have been identified these have been addressed within the service model and specification. Where positive impacts of the proposed model have been identified they have been enhanced where possible. An example of this is the focus placed on specialist providers to work with specific client groups, and the way the zones have been developed.
- 6.5 The proposed new service model will not remove services, but it will change the way services are delivered and will place greater emphasis on a personalised outcomes based approach.
- 6.6 The new service model is expected to deliver improved quality of service provision, improved service user experience, and establish more productive working relationships with providers. Impacts will be monitored throughout the implementation period and beyond via ongoing service user and provider engagement and the Quality Assurance Framework, the Outcomes Framework and Performance Management Framework that are included in the service specification and associated schedules.

## **7. Consultation with Ward Members and Stakeholders**

- 7.1 This tender has borough wide implications, so specific consultation with ward councillors has not taken place.

## **8. Human Resources**

- 8.1 The services are currently provided by external providers and there are no direct staffing implications for the council arising from the tender process. However, as part of the procurement process, employee liability information will be sought from current contractors and provided to the tenderers. The TUPE process and any issues that may arise from it will be managed during the mobilisation phase, which will be approximately four (4) months between contract award and commencement.

## **9. Public Services (Social Value) Act 2012**

- 9.1 The council is under duty pursuant to the Public Services (Social Value) Act 2012 ("the Social Value Act") to consider how services being procured might improve the economic, social and environmental wellbeing of its area; how, in conducting the procurement process, the council might act with a view to securing that improvement; and whether the council should undertake consultation. Officers have had regard to considerations contained in the Social Value Act in relation to the procurement.

9.2 The services under the proposed contract have as their primary aim the improvement of the social wellbeing of vulnerable groups in Brent. In procuring the services and in accordance with the council's Social Value Policy, 10% of the total evaluation criteria will be reserved for social value considerations

***REPORT SIGN-OFF***

***Phil Porter***

Strategic Director, Community Wellbeing