

	Key Decision of Cabinet Member for Adult Social Care, Public Health and Leisure
	Report from the Corporate Director, Service Reform and Strategy
Authority to vary contract for Harrow Careline Services	

Wards Affected:	All
Key or Non-Key Decision:	Key Decision
Open or Part/Fully Exempt: <small>(If exempt, please highlight relevant paragraph of Part 1, Schedule 12A of 1972 Local Government Act)</small>	Open
List of Appendices:	None
Background Papers:	None
Contact Officer(s): <small>(Name, Title, Contact Details)</small>	Name: Edwin Mensah Job Title: Acting Head of Commissioning Contracting and Market Management Email: edwin.mensah@brent.gov.uk

1.0 Executive Summary

- 1.1. The report requests individual Cabinet Member approval to vary a contract in respect of Harrow Careline services with the London Borough of Harrow (Harrow Council), in accordance with paragraph 13 of Part 3 of the Constitution. The report summarises the reasons for the request to vary the contract.

2.0 Recommendation(s)

That the Cabinet Member for Adult Social Care, Public Health and Leisure, having consulted with the Leader:

- 2.1 Approves the variation of the contract for Harrow Careline with the London Borough of Harrow as set out in paragraphs 3.2.1 to 3.2.13.

3.0 Detail

3.1 Contribution to Borough Plan Priorities & Strategic Context

- 3.1.1 This work particularly supports Strategic Priority 5 – A Healthier Brent, by ensuring people are supported within their communities, able to remain living at home and maintaining their independence.

3.2 Background

- 3.2.1 The Council has an inter-authority agreement with the London Borough of Harrow for the provision of a 24/7 specialist telephone helpline and contact centre (“Original Contract”). Within the Original Contract the service was called Harrow Helpline Services but has since been renamed Harrow Careline Services.

- 3.2.2 Officers consider that the contract should be varied and have entered into discussions with the London Borough of Harrow (the “Contractor”) to vary the Contract as follows:

- Adding the provision of telecare equipment, installation, repairs and collection (“the Variation”).

In this context, by “telecare” we mean electronic devices, such as personal alarms, sensors, and detectors, that monitor a person's safety and send alerts to a 24/7 call centre or carers in case of an emergency or a fall. These systems allow individuals to live independently and safely in their homes by providing a lifeline to support, which can include getting help from emergency services, family, or designated care professionals.

- 3.2.3 The Council had a contract in place with Nottingham Rehabilitation Services (NRS) for the provision of telecare equipment installation, repairs and collections as well as the provision of minor aids and adaptations and associated installation, repairs and collections.
- 3.2.4 On 1st August 2025 NRS went into liquidation and an Official Receiver was appointed. NRS is no longer able to fulfil its contractual requirements and Brent has been working to consider suitable contingency arrangements.
- 3.2.5 The telecare and minor adaptations work together represent a significant volume of work and expenditure within Brent. In addition, NRS was the major supplier for the whole of North-West London and a number of other areas across London and nationally.
- 3.2.6 Commissioners have therefore been working with Local Authority and Health partners to ensure that alternatives will be sustainable across the region. This has meant that work has needed to be diverted to a number of different Providers to ensure that the significant volume and capacity can be managed.
- 3.2.7 For Brent, an existing relationship with Harrow in terms of the Careline service as well as commissioning relationships, including discussions about future transformation goals, meant that the systems and processes are either already in place or could easily be put in place to pick this work up at very short notice. This will avoid customer disruption, including delayed discharges from

hospitals.

- 3.2.8 Harrow Careline is already supporting the Council with the analogue to digital switchover and with a variation to the current contract, will be able to continue to facilitate this work in a timely way, ensuring customers retain their service when the analogue lines cease.
- 3.2.9 Harrow's costings offer value for money comparatively to figures quoted by other suppliers as part of the contingency planning. This relates to prices per piece of equipment, as well as taking into account any overheads or mobilisation costs that may have been required (dependent on the solution). This means this option offers a competitive, as well as practical, low risk solution to an urgent issue. Working with a new provider would involve mobilisation time that would lead to a break in service.
- 3.2.10 The request is to approve the variation until the current arrangement lapses in March 2026. In the meantime, the intention is to work on a new Authority to Authority arrangement that will support Brent's telecare needs into the future.
- 3.2.11 Under section 3(b) of the table at paragraph 9.5 of Part 3 of the Constitution, Directors may only vary contracts and agreements provided that:
- (a) The extension, variation, renegotiation, novation or assignment would not be in breach of the Procurement Legislation.
 - (b) The extension, variation, renegotiation, novation or assignment does not substantially alter the terms and conditions of the contract.
 - (c) there is sufficient existing budgetary provision.
 - (d) provided that in the case of any variation (other than an extension):
 - (i) the total value of the variation is less than £1m; and
 - (ii) if the total value of the variation (and any previous variations agreed under this provision) is more than £50k it is not more than 50% of the original contract value (calculated over the life of the contract including any extensions or possible extensions and adjusted in accordance with any price review mechanism provided for in the contract).
 - (e) The relevant cabinet member shall be consulted prior to a decision within (d) (i) or (ii) above and may request that the decision instead be referred to them.
- 3.2.12 Addressing the points detailed in paragraph 3.2.11 above the Cabinet Member for Adult Social Care, Public Health and Leisure is permitted to vary the contract because:

- (a) It would not be in breach of Procurement Legislation because of the reasons stated in paragraph 6.2 of this report (reliance on the “Horizontal Arrangements” exemption).
- (b) The variation relates to the addition of services that are within the scope of the Original Contract and are not substantially different in nature. In addition, the parties are relying on the Horizontal Arrangements exemption pursuant to paragraph 6.2 of this report to enact the Variation.
- (c) Officers are satisfied that there is sufficient budgetary provision for the Variation.
- (d) Whilst the Variation is less than £1m in value it is more 50% of the original contract value and therefore outside the scope of the powers held by Directors under paragraph 9.5 of Part 3 of the Constitution.
- (e) The decision to vary the contract has been directed to the Cabinet Member for Adult Social Care, Public Health and Leisure accordingly and subject to consultation with the Leader has delegated powers to agree the proposed Variation.

3.2.13 Adult Social Care continues to plan for future telecare requirements and this interim arrangement with Harrow supports the future direction of travel. An options appraisal has been undertaken for technology enabled care. This will be presented separately and undergo appropriate Council governance.

4.0 Stakeholder and ward member consultation and engagement

4.1 In seeking timely contingency arrangements to deal with the collapse of NRS, engagement with stakeholders has not been undertaken. The proposal covers the whole of Brent and there are no ward specific issues.

5.0 Financial Considerations

5.1 The value of this contract is estimated to be £0.7m and will be paid for by the Service Strategy and Reform directorate. This forms part of the community equipment budget which is experiencing budget pressures; however, this is a preventative service which supports independence at home and also stops people from going into more costly placements.

5.2 This option is also anticipated to be more cost effective than the previous service offer under NRS. As there will be a variety of equipment, repairs and installations undertaken, based on customer demand, it cannot be exactly stated what the saving would be, but the individual elements to be purchased are more cost effective.

6.0 Legal Considerations

6.1 Officers recommend the variation of the contract as set out in paragraphs 3.2.1 to 3.2.13.

- 6.2 The recommendation in this report to vary the contract to establish and/or implement further co-operation between Harrow Council and Brent for the provision of telecare equipment, installation, repairs and collection falls outside the scope of the Public Contract Regulations 2015 (the “PCR 2015”). The contract was directly awarded prior to the Procurement Act 2023 coming into force and therefore the PCR 2015 are the applicable legislation.
- 6.3 According to Regulation 12(7) of the PCR 2015, contracts concluded exclusively between two or more contracting authorities fall outside the scope of the PCR 2015 if they fulfil the following conditions:
- the contract establishes joint co-operation in the performance of public services with a view to achieving mutual objectives; and
 - the implementation of the co-operation is governed only by the public interest; and
 - the participating authorities perform “on the open market” less than 20% of activities concerned by the co-operation.
- 6.4 Officers from both Harrow Council and Brent Council discussed and concluded that the proposed variation fulfils the above criteria and determined that it would ensure for the continued co-operation between both parties and enable them to perform their public interest services with a view to achieving mutual objectives. Officers have also confirmed that their participation “on the open market” is less than 20% of activities concerned.
- 6.5 As set out in paragraph 3.2.12, pursuant to paragraph 13 of Part 3 of the Constitution, the Cabinet Member for Adult Social Care, Public Health and Leisure has delegated powers to agree the proposed variation, subject to consultation with the Leader.

7.0 Equity, Diversity & Inclusion (EDI) Considerations

- 7.1 Pursuant to s149 Equality Act 2010 (the “Public Sector Equality Duty”), the Council must, in the exercise of its functions, have due regard to the need to:
- (a) eliminate discrimination, harassment and victimisation and other conduct prohibited under the Act
 - (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it; and
 - (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
- 7.2 The Public Sector Equality Duty covers the following nine protected characteristics: age, disability, marriage and civil partnership, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation.

- 7.3 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.
- 7.4 There is no prescribed manner in which the council must exercise its public sector equality duty but having an adequate evidence base for its decision is necessary.
- 7.5 Officers believe that there are no adverse implications of these proposals in respect of equality implications.
- 7.6 The variation to this contract will enable continued provision of telecare which supports people with disabilities to live independently, supports older people in reducing the feelings of isolation, provides affordable support and enables people to retain their networks and social inclusion.

8.0 Climate Change and Environmental Considerations

- 8.1 Officers are encouraged to ensure that the provision of telecare equipment – namely its installation, repair and collection is conducted wherever possible in the most environmentally sustainably way possible. This should factor in circular economy principles around repair and re-use rather than buying new, minimising energy use where possible, and utilising sustainable modes of travel, if transport is required, as part of the upkeep of equipment. Beyond this, there are minimal environmental sustainability implications for the proposal within this report.

9.0 Human Resources/Property Considerations

- 9.1 Officers' current understanding following receipt of external legal advice is that the Transfer of Undertakings (Protection of Employment) Regulations 2006 ("TUPE") will not apply due to NRS going into compulsory liquidation and therefore the risk of employees transferring under TUPE to the new Provider is remote. Officers will continue to monitor the situation if further information comes to light.

10.0 Communication Considerations

- 10.1 Internal communications will be updated to ensure that prescribers know how to order from Harrow Careline to ensure continuity of service. Externally, customers should not be impacted by the change as the new service will be up and running. Most customers would not know who the equipment provider is and will not have existing relationships with staff from the previous provider.

Report sign off:

Rachel Crossley

Corporate Director Service Reform and Strategy