



Cabinet
24 July 2017

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

Wards Affected: All

Care and Support Contracts - Extra Care - Authority To Procure Additional Schemes

1.0 Summary

- 1.1 In June 2016 Cabinet approved the procurement of the care and support service in 4 extra care schemes as detailed in the table below (1.4). Unfortunately in July 2016 the incumbent provider gave notice to the Council as we were unable to come to an agreement on long term fees rates for this service. This notice did not allow for a tendering process to be completed in the timescales and therefore interim arrangements were made which utilised the Care and Support Contract for another extra care scheme (Visram House) which has been subject to significant delays in opening.
- 1.2 This interim arrangement will come to an end in March 2018. But has given the Council two opportunities which are to our advantage
 - A. To increase the length of contracts for care and support services in extra care in response to tenant and provider feedback. Longer contracts give more consistency of providers to tenants and enable providers to develop and utilise their expertise in our service delivery model which in general supports tenants with higher levels of need than most extra care services. However we will mitigate any risks by adding a contractual obligation to review the service specification at defined points in time, which will enable the Council to respond to our changing needs. We will also build in a one year break clause into the contracts to ensure we can end contracts which are not working for the Council or the provider.
This increase in length of contract needs cabinet approval as it is not covered by previous Cabinet approvals.
 - B. During 2018/19 three care and support contracts in extra care are due to come to a natural end, with one potential scheme coming on line in 2019. Therefore we have used this opportunity bring all the care and support into one tender. The increased value of these contracts will make them more attractive to experienced providers the market place and has the potential

to achieve better value for money for the Council than when they are tendered individually.

- 1.3 The procurement of these contracts supports the delivery of the NAIL Project (New Accommodation for Independent Living) and further develops the Council's ability to offer a real alternative to residential care for Brent residents who have high care and support needs and responds to the general feedback from residents that they would prefer to remain in a home of their own for as long as possible rather than go into residential care.
- 1.4 The number of 8 extra care schemes includes Plot 3 in Park Royal, which the Council is currently in negotiations with the developer to build and certainty of this will become clearer over the summer.

Scheme	Previous Permission to Procure	Current/ or amended request
Beechwood Court	June 2016	Permission to procure for a contract length of 5 +2 years
Rosemary House	June 2016	Permission to procure for a contract length of 5 +2 years
Harrod Court	June 2016	Permission to procure for a contract length of 5 +2 years
Tulsi House	June 2016	Permission to procure for a contract length of 5 +2 years
Willow House	None	Permission to reprocure for a contract length of 5 +2 years
Visram House	None	Permission to reprocure for a contract length of 5 +2 years
Newcroft House	Permission granted by Cabinet in September 2015 within the Accommodation Plus DPS	Permission to procure for a contract length of 5 +2 years
Plot 3 Unit – Park Royal	Permission granted by Cabinet in September 2015 within the to use DPS	Permission to procure for a contract length of 5 +2 years

2.0 Recommendations

It is recommended that

- 2.1 Cabinet gives its approval to procure from the existing Accommodation Plus Services DPS, Lot 4.1 Care and Support Services, with an estimated combined value of £54.1 million and approves the issue of the invitation of tenders for the care and support service within 8 Extra Care Schemes (ECS's) leading to an award of approximately three contracts with winning providers.
- 2.2 Cabinet gives its approval for procurement via the DPS of contracts with a length of five years plus up to two years extension period for each contract.
- 2.3 Cabinet gives its approval to officers to evaluate the tenders referred to in 2.1 above on the basis of the evaluation criteria set out in section 7.6 of this report.

3.0 Background

- 3.1 Care and support services had been provided in the 4 long standing extra care schemes for a number of years by an external home care provider through individual spot purchase arrangement. In June 2016, Cabinet approved a report which set out our tendering timeline which indicated the contract start for November 2017.
- 3.2 However, the procurement process did not commence as planned due the outgoing care provider giving immediate notice to withdraw their services and requested a smooth transfer to an alternative provider as soon as possible. This request was as a result of negotiations over fees, however, the proposed rate from the provider was significantly above the rate paid to other providers. A rate proposed by the Council, based on independent work commissioned by ASC Commissioning to identify the minimum sustainable rate for the local sector, was rejected by the provider. This timeline did not allow Officers to progress with the procurement, as stated in June 2016 Cabinet Report, to identify a new provider.
- 3.3 To bridge the gap in service provision, Officers negotiated with an alternative provider (Metropolitan Housing Trust – MHT), via a variation to their Visram House Contract (which had been delayed due to building difficulties) which was also within the original cash envelope. The variation for an 18 month period was approved by The Strategic Director of Community & Well Being under delegated authority.
- 3.4 The variation allowed officers to:
 - a. reconsider the procurement of social care and support services within existing and planned extra care schemes, to ensure that we procure a consistent quality of service through a flexible model of care and support to tenants regardless of which scheme they live in
 - b. avoid tenants' anxieties due to change in care providers within a very short time span

- c. achieve value for money for the Council given the potential contract value of procuring additional schemes and the potential efficiencies this could deliver.

4.0 Detail

Extra Care

- 4.1 The schemes listed are situated within the Borough and are the properties of Network Homes, PA Housing (ASRA) and the Council. The schemes provide the following numbers of self-contained one and two bedoomed 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 anticipated to be in receipt of care	Primary care group
Beechwood Court - Wembley	20 one bedroom flats for people with dementia	20	Dementia
Harrod Court - Kingsbury	38 one bedroom flats and 2 two bedroom flats	40	General aged 55+
Rosemary House - Willesden	40 one bedroom flats	40	General aged 55+
Tulsi House - Sudbury	32 one bedroom and 4 two bedroom flats	36	General aged 55+
Willow House - Wembley	38 one bedroom flats and 2 two bedroom flats.	40	General aged 55+
Visram House – Park Royal	89 one bedroom flats and 10 two bedroom flats.	99	General aged 50+
Newcroft House – Wembley	40 one bedroom flats.	40	General aged 55+
Plot 3 – Park Royal	Estimated available 141 units	141	General aged 55+

- 4.2 The ethos of Extra Care Schemes 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 designed environment to aid their independence, along with a range of social activities to support an improved quality of life, as a real alternative to institutional care in residential or nursing care home.

Current Services Provided

4.3 The care, support and activities services are currently provided in the following five of the eight schemes

- Beechwood Court
- Harrod Court
- Rosemary House
- Tulsi House.
- Willow House

4.4 The remainder of the schemes are yet to have tenants moving in due to building work in progress or building work yet to commence. The anticipated dates for tenants to move into the schemes are:

Scheme Name	Anticipated Tenant Move-in Date
Visram House	September 2017
Newcroft House	June 2017 (converting from a sheltered housing Scheme to extra care)
Plot 3 – Park Royal	April 2019, anticipated contract duration will be 5.5 years

4.5 The current care and support service is provided by on-site care staff throughout the day, with waking night staff covering the service after 9 pm.

Future model of service provision

4.6 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, avoiding an admission to residential and nursing care which in the majority of cases is rarely the choice for the person concerned and comes at a higher cost to the Council.

4.7 The new flexible service will have two elements:

4.7.1 Core 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. As mentioned, above in 4.6, due to increasing levels of need and people who would otherwise have been placed in residential or nursing care, Officers anticipate each tenant will require approximately a maximum of 25 hours of care per week (based on assumptions from an analysis of recent referrals to extra care).

- 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.
- 4.7.2 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 more expensive residential or nursing care home setting. This is referred to as Core Hours.
- 4.8 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.
- 4.9 The new model will also utilise the communal kitchens within the schemes where tenants will be given the opportunity to be involved in meals as a group activity, i.e. planning, preparation, cooking and consuming within the communal dining areas.
- 4.10 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 social care needs and circumstances based on their assessment of need.
- 4.11 The care and support services can also be ‘shared’ between the schemes that are closely geographically situated, e.g. Beechwood Court and Tulsi House, thereby allowing a greater flexible model of service delivery during the day and night hours.

- 4.12 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 rigid model of home care which is task, time and location orientated. 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 60%.
- 4.13 The Council have 100% nomination rights for all the schemes. 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), 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 senior management approval.

5.0 Market Position Statement

- 5.1 The new contract(s) will ensure it is aligned with the objectives set out in the Brent Market Position Statement (MPS) 2014 whose main principle 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.

6.0 The Care Act 2014

- 6.1 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’.

7.0 The tender process

- 7.1 Permission is sought to procure the on-site care, support and activities service from the current Accommodation Plus Services Dynamic Purchasing System (DPS) Lot 4.1 for a total of 8 extra care schemes.
- 7.2 In accordance with the DPS, suppliers who have successfully been admitted onto Lot 4.1 (care and/or support services) will be invited to bid for the required services.
- 7.3 The proposed procurement route will streamline and provide benefits both for the bidders and the Council;
 - suppliers will not have to complete 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 Officers to have pre-tender engagement discussions to ensure that bidders understand our requirements with a view to ensuring that quality bids are received.
- 7.4 Bidders will have the option to bid for individual or multiple contracts. Where bids are for multiple contracts, bidders will be required to:
 - a. demonstrate added value these multiple bids will bring to the tenant groups
 - b. demonstrate the added value and efficiencies these multiple bids could deliver for the Council
 - c. identify any cost savings.
- 7.5 The proposed length of contract is 5+2 years, which is designed to create more stability for tenants and encourage a wider range of bidders, including many providers currently not operating in the borough who specialise in this provision. Full consideration will be given within the contractual terms and conditions to protect the Council should the identified provider struggle to maintain the quality of service we have specified and review the specification at regular intervals to reflect the likely changing needs of the Council.

7.6 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 7 year contract value.	£54.1m
(iii)	The contract term.	5+2 years
(iv)	The tender procedure to be adopted.	Mini-Competition via the DPS
v)	The procurement timetable.	Indicative dates are:
		Mini-competition advert
		31/07/17
		Deadline for tender submissions
		12/09/17
		Panel Evaluation
		14/09/17-22/09/17
		Report recommending Contract award circulated internally for comment
		22/09/17-12/10/17
		Cabinet approval
		11/12/17
		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)
		19/12/17
		Contract Mobilisation
		02/01/18
		Contract start date
		02/04/18
(vi)	The evaluation	<ul style="list-style-type: none"> • At the quote evaluation stage the bids will be

Ref.	Requirement	Response
	criteria and process.	<p>evaluated on the grounds of the Most Economically Advantageous Tender (MEAT) with a 60% price and 40% criteria scoring.</p> <p>The quality assessment will be evaluated using the following range of criteria:</p> <ul style="list-style-type: none"> • How the Service will be delivered to achieve delivery of outcomes • How policies and procedures regarding equality and human rights will be applied • How the Service will be operated and delivered to lead to improved personal independence. • Proposals regarding staffing (skills, qualifications, experience and structure) in order to meet the needs of services users and continuity of care. • How current/previous experience will be applied to deliver the service • How Social Value will be delivered • How out-of-hours service will be delivered • How the Safeguarding policy will be implemented and adhered to
m(vii)	Any business risks associated with entering the contract.	There are no additional business risks associated with the proposed contracts other than the usual risks involved with social care provision, which will be addressed during the evaluation process
(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"> • Confirmation the bidder's environmental policy/approach has led to sustainable improvements • Confirmation the bidders environmental policy/approach has delivered waste and carbon reduction • Involvement of Small and Medium Enterprises (SMEs), particularly within Brent • Adoption of ethical practices – these will include

Ref.	Requirement	Response
		<p>Safety and Hygiene, Working Hours and payment of London Living Wage (LLW).</p> <p>At the quote stage the following additional SV assessments will also be applied:</p> <ul style="list-style-type: none"> • LLW will be paid to all employees as this is within the current contracts <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 2 incumbent providers at the five schemes where care and support is currently provided.
(xi)	The relevant financial, legal and other considerations.	See sections 8.0 and 9.0 for legal and financial considerations.

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

8.0 Contract Management

- 8.1 Contract management will be outcome focused. Some of the Key Performance Indicators will be:
- 8.1.1 Efficiencies in meeting the identified outcomes in terms of prescribed service hours to support service users.
 - 8.1.2 We will set a requirement to aim for the 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 per 120 tenants.
- 8.2 Officers will set a baseline to determine the following and develop targets to aim to reduce these year on year:
- 8.2.1 Number of ambulance call outs and reasons, which do not result in a hospital admission.
 - 8.2.2 Number of tenants in hospitals and the number of days hospitalised
 - 8.2.3 Number of emergency/unexpected calls resulting in prevention of hospital admission/residential/nursing care.
- 8.3 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.
- Quarterly audit of invoices for care hours actually delivered by service provider against commissioned hours for each tenant and claw back all surpluses.

9.0 Financial Implications

- 9.1 The 2017/18 budget for Extra care and support is £4.8m. This budget directly accommodates the five current extra care schemes (Rosemary House, Tulsi House, Beechwood Court, Harrod Court and Willow House) and the part year funding for Newcroft House and Visram House. As and when schemes come on-line budgetary provision is created within the departments overall cash limit.
- 9.2 The procurement brings together the need to re-procure care hours for the current schemes as well as add capacity to the contract for future schemes and potentially additionality due to increases in complexity of care.
- 9.3 Predicting an absolute contract value for a contract that is governed by the needs of individual social care clients can be complex, so tolerances need to be included to accommodate any anticipated increase in demand for care.
- 9.4 Therefore the price per hour is the significant financial factor in this procurement rather than the quoted number of hours to be accessible over the life of the contract.
- 9.5 Considering the size of the schemes and the anticipated economies of scale, it is anticipate that the procurement will achieve a price in the order of £16 per hour and be London Living Wage (LLW) compliant. This would be within the current budget envelope for the service.
- 9.6 As an alternative, a non LLW rate in the order of £14.20 per hour could also be achieved and would deliver a saving of approx. £1.80 per hour.

- 9.7 Agreeing to a LLW rate would commit the Council to annual increases within the contract which would need to be considered in the annual setting of the Council budget.

The figures above are the average cost of recent placements and is the most realistic cost which reflects the position of the care home market.

10.0 Legal implications

- 10.1 By way of background, reference is made to the Cabinet Report & approval, dated 27 June 2016, to procure care and support services in 4 extra care schemes (ECS's) as detailed in the previous Cabinet report in accordance with the Council's Contract Standing Orders 88 and 89. Cabinet approval is now being sought to approve the procurement of the care and support service for additional four extra care schemes (ECS's), bringing the total number of schemes to eight. Officers are now seeking to align the procurement for all 8 ECS schemes and to procure contracts for the services involved for a period of five years (plus two years potential extension period). The table in section 1.3 below shows the list of all eight schemes.
- 10.2 The first four schemes in the table in Section 3.1 were considered by Cabinet on 27 June 2016, and Cabinet gave its approval to commence procurement of these four schemes based upon a projected contract period of 4 years plus 1 year extension period. Officers have subsequently reviewed the plans for procurement and consider it best to align the projected contract periods for the first 4 ECS schemes with the desired contract periods for schemes 5 to 8. Officers further consider it will help obtain best value by looking for other alignments in terms of location of services covered by the projected 8 schemes. Authority is therefore being sought in this report to commence a combined procurement which may cover all 8 schemes or up to 8 to be covered by contracting arrangements involving a minimum of 3 contracts, with the schemes being aligned into clusters of 2 or 3 ECS's in each contract
- 10.3 Tenders will be sought through the Council's Dynamic Purchasing System (DPS) for Accommodation Plus Services. This DPS went live in February 2016 and has the following five lots of commonly purchased services that encompasses the full range of delivery models required to deliver the NAIL programme:
- Lot 1: Providers, who provide the land, build and manage the property, and deliver the care and/or support services (possibly as different arms of a single organisation or as a consortium/partnership for example).
- Lot 2: Providers, who provide the land, build and manage the property only.
- Lot 3: Providers who provide the land, and build the property only.
- Lot 4: Providers who provide care and support (Lot 4.1) and housing management (Lot 4.2).
- Lot 5: Providers who provide housing related support services only.
- 10.4 A dynamic purchasing system ("DPS") is akin to an electronic framework agreement, but unlike a framework agreement it allows for new providers in the

market to apply for admittance onto the DPS throughout the life of the system. The requirements as to the establishment and operation of the DPS are set out in Regulation 34 of the Public Contract Regulations 2015 (PCR 2015). The PCR 2105 details that a DPS is a completely electronic system which may be established to procure commonly used purchases generally available on the market to meet contracting authority requirements. Officers have confirmed that the Accommodation Plus Services scheme meets this requirement. Members at its meetings in September 2015 and February 2016 gave their approval for the creation of the DPS for Accommodation Plus Services and 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.

- 10.5 Providers will be invited to tender for the requirement via the NAIL DPS system already established and all qualified and fully registered providers in Lot 4.1 (currently 31 providers) at the time of the call off will be invited to tender. The projected contract lengths in each case will be 5 years plus extension period of up to 2 years.
- 10.6 Cabinet approved the procurement and establishment of the DPS originally via Cabinet Report and decision dated 21 September 2015. The estimated annual value for services to be commissioned in Lot 4 was then £11 million with the estimated value across Lots 1, 4 & 5 being £24,810,000.
- 10.7 Procurement has occurred under Lot 4.1 and Officers have found that, due to changing circumstances in the market behaviour (developers have moved away from developing facilities owing to proposed government changes of introducing the local housing allowance into rent levels in supported accommodation), the Council is less likely to commission services under Lot 1. Instead there is a need to commission a higher amount of care based services under Lot 4.1. The original annual estimate to Cabinet was £11 million for Lot 4.1 but the services to be procured are valued at approximately of £54.1 million (see section 7.8 below). This will still be within the approved overall value of the DPS.
- 10.8 The estimated value of the proposed call – off contracts is expected to be £15.7 million and is in excess of the threshold for High Value Contracts under Contract Standing Orders and as such Cabinet approval is required to approve the pre-tender considerations in the table in section 7.6 and the invitation to participate in the mini-competition for the requirements.
- 10.9 Officers must follow Regulation 54 of the PCR 2015 when inviting providers from the relevant Lot under the DPS to submit a tender. 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.

- 10.10 In above-threshold call-off contracts from a DPS, the standstill period is voluntary not mandatory (therefore Officers are strongly advised to apply it to protect against possible post-contractual ineffectiveness claims).
- 10.11 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. There is a requirement to publish contract award notices (which must be sent to the Publications Office within 30 days of award) for specific individual contracts awarded under the DPS. However, contracting authorities can choose to group DPS contract award notices and make a quarterly return. Officers should also abide by the requirements for publication on Contracts Finder with regards to contracts awarded.
- 10.12 The Transfer of Undertakings (for the Protection of Employees) 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 implementation plan phase.

11.0 Diversity Implications

- 11.1 The proposals in this report have been subject to screening and officers believe that the use of extra care as an alternative to residential and nursing care has positive diversity implications.

12.0 Staffing/Accommodation Implications (if appropriate)

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

13.0 Background Papers

- 13.1 EIA attached.
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Cabinet Report 21 September 2015

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