

20/06
DECISION
NOW MADE



Notice of KEY Executive Decision

Subject Heading:	To seek approval to award the new Home, Settle and Support contract (currently known in Havering as the 'Help Not Hospital' Service), for period of three years with an option to extend for a further two years.
Cabinet Member:	Councillor Jason Frost, Cabinet member for Health and Adult Care Services
SLT Lead:	Barbara Nicholls, Director for Adult Services and Health
Report Author and contact details:	Sandy Foskett, Commissioner and Project Manager, Sandy.foskett@havering.gov.uk
Policy context:	<p>The Care Act 2014 and in particular stipulations around market shaping and integration with Health.</p> <p>The Better Care Fund, specifically the scheme on the Intermediate Care Pathway and areas of work that fall under this scheme. The service is linked to the Home First approach to discharge.</p> <p>The Joint Commissioning Board Priorities linked to integration and partnership working and identifies social isolation and hospital admissions/readmissions as significant areas of demand with BHR.</p>
Financial summary:	The length of contract is 3 years (plus two year extension option). The total

1. Havering's Health and Wellbeing Strategy 2015-2019: Refresh (2017) Dr Milner. LBH

Key Executive Decision

	<p>amount of funding available for the 5 years is £2,192,190 (i.e. £835,000 for Havering, £341,680 for LBBD, £124,350 for Redbridge, plus additional funding of £891,160 collectively from the three CCG's (Barking, Havering and Redbridge) paid through the Better Care Fund).</p> <p>The winning provider's bid was £2,091,385, for the 5 year total contract period, which gives a slight saving of £100,805 against the total pooled budget available, which will be split across the Boroughs.</p>
Reason decision is Key	(a) Expenditure or saving (including anticipated income) of £500,000 or more
Date notice given of intended decision:	20 th November 2019
Relevant OSC:	Individuals
Is it an urgent decision?	No
Is this decision exempt from being called-in?	No

The subject matter of this report deals with the following Council Objectives

Communities making Havering	<input checked="" type="checkbox"/>
Places making Havering	<input type="checkbox"/>
Opportunities making Havering	<input type="checkbox"/>
Connections making Havering	<input type="checkbox"/>

Part A – Report seeking decision

DETAIL OF THE DECISION REQUESTED AND RECOMMENDED ACTION

Recommendation

To authorise, in consultation with the Directors of Finance and Legal and Governance agree the following:

1. For the reasons set out in the report, the Cabinet Member is recommended to agree the award of the contract to, British Red Cross Society for the provision of the Home, Settle and Support Service (previously known as the Help Not Hospital Discharge Service), on behalf of LB Havering, LB of Barking & Dagenham and LB Redbridge and the three CCG's from the respective boroughs. The total cost of the proposed contract is £2,091,385 (i.e. £776,533 for Havering, £317,486 for LBBD, £106,205 for Redbridge and £891,160 collectively from the three CCG's. The contract is for a period of three (3) years plus up to a further two (2) year extension period, start date of 1st April 2020.
2. To seek approval for a retrospective waiver from Council's Contract Procedure Rules 18.4, so that the tender can be evaluated against a price-quality ratio of 30% cost and 70% quality weighting.

AUTHORITY UNDER WHICH DECISION IS MADE

2.5 The following Functions may be delegated to individual Cabinet members by the Leader.

Each individual Cabinet member, as appropriate, may be delegated one or more of the following functions, within the portfolio allocated to him or her by the Leader. If a Cabinet member is unable to act, the Leader may act on his or her behalf, or may authorise another Cabinet member to do so. Matters delegated to individual Cabinet members under this section give them individual decision making powers. Where any paragraph refers to 'in conjunction with' or 'in consultation with' the decision remains that of the individual Cabinet member.

- (g) To approve an exception to the Contracts Procedure Rules set out in Part 4 of this constitution, in accordance with Rule 14(1) of those Rules.
- (h) To award contracts, agree extensions of contract terms and awards/extensions of Consortia contracts of a value above £5,000,000 and up to £10,000,000 and contracts where external funding is guaranteed and there is no longer term financial commitment to the Council. *(Note: Pension Committee has powers to invite tenders and award contracts for investment matters within their terms of reference)*

STATEMENT OF THE REASONS FOR THE DECISION

Background

Following consultations, the three boroughs and the three CCG's from Havering, Barking and Dagenham and Redbridge agreed to jointly commission as a single supported discharge service. The main objectives of a joint commissioning approach were to:

- Provide a consistent supported discharge service for service users across the three boroughs
- Provide a single point of access for clinical professionals across the BHRUT Trust, potentially reducing time taken to arrange a discharge
- Provide a single contract, resulting in a smoother pathway for service users across the Trust, leading to better outcomes for patients/service users across the three boroughs
- Generate operational efficiencies through economies of scale, maximising value for money for the service
- Support the discharge pathway work to streamline processes across BHRUT Hospital
- Support reduction in Delayed Discharge of Care (DTCO) across BHRUT Hospitals
- Support the 'Home First' discharge pathway, ensuring people are able to remain living independently at home

The objectives of this tender were to:

- Ensure the tender follows Corporate and Public Contracts Regulations 2015, as well as Council's Financial Regulations
- Ensure the procurement follows a formal tender process in line with the EU's open procedure
- Ensure that the service is commissioned to meet the Care Act duties and offer the best value for money
- Maximise efficiencies through joint commissioning the service, to allow for a general activity uplift across the service to support the admission avoidance element.

Key Deliverables

In brief, the key deliverables / milestones to achieve the objectives included:

- Production of all required tender and contract documents (including service specification)
- Tender process managed in line with OJEU and Council procurement procedures

Key Executive Decision

- Contract awarded to the tenderer submitting the best / most advantageous bid to the Council
- New contract awarded and mobilised

The table below presents the key milestones and dates from the project plan are as follows;

Stage	Timescale
Procurement Planning	September-October 2019
Invitation to Tender Published	November 2019
Evaluation	December-January 2020
Award	February 2020
Mobilisation	February-April 2020
Contract Start Date	1 st April 2020

Project Governance

In order to deliver this tender, a project management structure was formed in July 2019. This included establishing a Project Board to coordinate and monitor the progress of the project. The Project Board members included core representatives from each organisation, representatives from Adult Social Care, Commissioners (from each local authority), Clinical Commissioning Group (CCG), Barking, Havering and Redbridge University Trust (BHRUT) and Procurement. Finance and Legal were consulted and involved at the required stages in the project.

Weighting

At the last tender the contract was weighted 80/20 in favour of quality, the panel agreed that Quality should continue to be given a high weighting, given that providing good quality support to individuals, following an attendance or stay at hospital, can help prevent or reduce the risk of re-admission to hospital or long term statutory care and support services.

The panel unanimously agreed on a price-quality ratio of 30% cost and 70% quality weighting for this tender. The Head of Procurement for Havering was consulted with and had approved this request on the above-mentioned grounds, however final agreement must be sought from the cabinet member.

Procurement

This procurement was subject to and adhered to the Council's Contract Procedure Rules. The procurement followed a formal tender process in line with the EU's Open Procedure in accordance with the Public Contracts Regulations 2015, which require compliance with principles of non-discrimination, equal treatment and transparency. Suppliers were invited to access the tender using CapitalEsourcing, the Council's E-Procurement system.

Following these regulations, the Council published the required Contract Notice on 18th November 2019. Providers were invited to a market engagement event on 25th

Key Executive Decision

September 2019, to outline the tender opportunity and respond to provider questions. The incumbent providers, Age UK and British Red Cross Society were both informed of the opportunity prior to the tender being published. Suppliers were invited using CapitalESourcing, the Council's E-Procurement system.

Technical Evaluation

Responses to each technical question were assessed and scored on the 0 – 5 range marking schemes shown in the table below:

Scoring evaluation	Score
No evidence of how this will meet the Council's requirements	0
Unsatisfactory response suggests supplier would have difficulties meeting Council's standards/requirements.	1
Some effort made to meet requirements but significant detail missing, or inappropriate.	2
Broadly meets requirements; satisfactory.	3
Good understanding and proposals.	4
Excellent; exemplary with all areas understood and covered to a very high standard	5

Method Statement

The Tenderer's scores for individual method statements were calculated by dividing the Tenderer's actual score by the maximum obtainable score per section and then multiplying this by the % weighting allocated for each quality element. The key areas and issues addressed by the questions were broadly:

- Please describe your experience and approach to promoting and supporting independence to vulnerable adults who may be at risk of hospital readmission. Providing an example of how your organisation has supported a reduction in hospital readmissions and improved outcomes for individuals.
- Please describe what your service delivery model would be in particular, how you would manage and monitor demand across the hospitals, including same day response to support 'Home First' and Rapid Response.
- Please describe how you intend on collecting and measuring data to evidence that the service is achieving the desired outcomes, including reduced readmissions.
- How will you set up and maintain a network to make sure that the service has strong links with community and voluntary sector services across the three boroughs.
- How will you support and develop volunteers to be effective champions of the service and contribute to the outcomes of the service?
- Describe what method your organisation would use to raise and maintain the profile of the service in the hospitals and community to encourage those who would benefit from the service to be referred by relevant professionals.

Key Executive Decision

- Provide an outline mobilisation plan for the delivery of the service from 1st April 2020.

The tender submission was evaluated independently by a panel consisting of:

- Laura Neilson (LBH), Commissioning Programme Manager
- Sandy Foskett (LBH), Commissioner and Project Manager
- Annette Kinsella (LBH), Head of Integrated Services, Adult Services
- Arabjan Iqbal (LBBD), Commissioning Manager, Adults' Care and Support
- Tony Challinor (LBR), Strategic Senior Commissioning Manager
- Pete McDonnell (CCG), Lead Commissioner Community Health Services (Adults)
- Paul Thorp (BHRUT), Head of Operational Transformation

Tender Evaluation

In total, seven contractors completed and submitted their tender documents by the closing date of 23rd December 2019.

All evaluations focused on examining how the proposals will deliver a quality service (technical) and the cost of the service (commercial). The quality factors were weighted according to their importance with 70% percent of the total score assigned to quality. Cost was evaluated at 30% of the total score. Suppliers submitted a cost for the service that was within the parameters set by the Council with scores weighted in favour of the lowest price.

The Project Board members evaluated the bids over a two week period from 23rd December 2019 to 9th January 2020 meeting at the end of this period to consider the commercial and technical scores as well as comment on the quality of the submissions. Final scores for each bid were agreed by all evaluators in a moderated meeting on 10th January 2020. The scores were moderated by the Lead Officer for the Procurement, Mike Parrott, Senior Procurement Specialist, OneSource.

As stated in the Invitation to tender documents, to meet the requirements set out in the Invitation to Tender documents bids must achieve an average overall minimum score of at least 60% for the Technical Envelope to be considered.

The initial bids were evaluated by the panel and their technical scores are shown in the table below.

Bidder	Technical Score	Overall Minimum Score of 60% required
Age UK Redbridge, Barking & Havering	53.90	77%

Key Executive Decision

Angels Care solutions Limited	36.40	52%
British Red Cross Society	53.20	76%
Cera - Golden Era Club Ltd	25.90	37%
Honey Crown Bee Limited	14.00	20%
IKUT & Associates UK Limited	11.90	17%
Redspot Homecare (contracts) Ltd	25.90	37%

Two bids met the minimum quality threshold of 60% and were carried forward to the next stage of the evaluation. See the **final overall scores** below, which includes commercial scores.

Bidder	Commercial Score (30%)	Technical Score (70%)	Total Score
Age UK Redbridge, Barking & Havering	29.21	53.90	83.11
British Red Cross Society	30.00	53.20	83.20

Having been approved by the Checkpoint Panel held on 21st January 2020, all suppliers who submitted bids will be informed of the Council's decision following the approval of this key decision paper to award the contract. Following this, arrangements will be put in place with British Red Cross Society to sign the contract and submit a structured and comprehensive plan for the mobilisation of the service.

TUPE

Key Executive Decision

TUPE data was provided to all bids and as the winning bidder is already the existing provider for Havering and Barking and Dagenham there are no TUPE implications in respect of employees under these contracts.

There will be a duty of transfer applicable for this award of contract, in respect of the employees serving under existing Redbridge contract.

The Council is prepared to act as a conduit of information between the parties so as to ensure minimal disruption to service provision and comply with obligations under the regulations.

OTHER OPTIONS CONSIDERED AND REJECTED

Option 1: Do Nothing

Let the existing LBH contract end with no further provision of preventative outreach and discharge support for those below the threshold for statutory care. This would leave a significant gap in the intermediate care pathway for vulnerable adults and may lead to an increase in delayed transfer of care (DTC), hospital admissions and re-admissions and put additional burdens on Health and Adults Social Care.

Option 2: Extend the Existing Contract

Seek permission to continue with the existing contracts with the British Red Cross, this would not allow for the service to be jointly commissioned with LBB and LBR, nor would it provide opportunity to make efficiencies through a redesign and competitive tender.

Option 3: Procure Single Service

Going out to market just for a Havering only service was considered but rejected on the basis that it would not offer the same opportunities for economies of scale (thereby maximising value for money) that a Three-borough tender across BHR would offer. Also this option would not be effective in terms of supporting the discharge pathway work to streamline processes across BHR.

PRE-DECISION CONSULTATION

The pre-decision consultation has involved engaging with a number of stakeholders to award the contract. This included Commissioners (from each local authority), Clinical Commissioning Group (CCG), Barking, Havering and Redbridge University Trust (BHRUT), Adult Social Care, Procurement, Legal and Finance teams.

NAME AND JOB TITLE OF STAFF MEMBER ADVISING THE DECISION-MAKER

Key Executive Decision

Name: John Green

Designation: Head of Joint Commissioning

Signature:

A handwritten signature in cursive script, appearing to read 'J. Green', written in black ink.

Date: 23.1.20

Part B - Assessment of implications and risks

LEGAL IMPLICATIONS AND RISKS

1. For the reasons set out in the report, the Cabinet Member is recommended to agree the award of the contract to, British Red Cross Society for the provision of the Home, Settle and Support Service (previously known as the Help Not Hospital Discharge Service), on behalf of Havering, LB of Barking & Dagenham and LB Redbridge and the three CCG's from the respective boroughs. The total cost of the proposed contract is £2,091,385 (i.e. £776,533 for Havering, £317,486 for LBBDD, £106,205 for Redbridge and £891,160 collectively from the three CCG's. The contract is for a period of three (3) years plus up to a further two (2) year extension period, start date of 1st April 2020.
2. The Care Act 2014 sets out local authorities' duties in relation to assessing people's needs and their eligibility for publicly funded care and support. Section 2 of the Care Act 2014, places a general duty on local authorities to provide, arrange or otherwise identify services, facilities or resources to help prevent, delay or reduce the needs of adults for care and support. The recommissioning of the current service provision would assist the Council in satisfying this ongoing duty.
3. In addition, the general power of competence in s.1(1) of the Localism Act 2011 states that a local authority has the power to do anything that individuals generally may do provided it is not prohibited by legislation and subject to public law principles. The proposed recommendations within this report are in accordance with these powers.
4. The Council must procure its contracts in accordance with the Public Contracts Regulations 2015 ("PCR 2015") and the Council's Contract Procedure Rules ("CPR"). The Light Touch Regime (LTR) would be applicable to this procurement as the services fall under the social and other specific contracts described in Schedule 3 of the PCR 2015. In line with this regime, the PCR 2015 requires that contracts with a value above the current threshold of £589,148 be opened up to competition and be advertised widely enough for interested bidders to be aware of the procurement. The value of the proposed contract is estimated to be above the LTR threshold, and as such it needs to be tendered.
5. The body of the report sets out how the Council shall comply with the PCR 2015 requirements whilst procuring the new service provision, as well as CPR 23.
6. The Cabinet Member will be aware of the Public Sector Equality Duty (PSED) set out in section 149 of the Equality Act 2010. At each stage, in exercising its function (and in its decision making processes) the council must have due regard to the need to:
 - a) eliminate discrimination, harassment, victimisation or other prohibited conduct;

Key Executive Decision

- b) advance equality of opportunity between persons who share a relevant protected characteristic and those who do not share it;
- c) foster good relations between person who share a relevant protected characteristic and those who do not share it.

The relevant protected characteristics are age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation

FINANCIAL IMPLICATIONS AND RISKS

Through a successful joint commissioning exercise, a single contract has been awarded for a new Home, Settle and Support Service.

Each borough within the partnership is contributing the amount that they currently spend on the schemes that they have in place for discharge from hospital. The contributions from each Borough are shown in Table 1.

Table 1: Discharge from Hospital Schemes - Spend by Organisation

	Annual Amount £	Total Contract 3 years + 2 extension £
Havering	£155,306.60	£776,533
Redbridge	£21,241	£106,205
Barking and Dagenham	£63,497.20	£317,486
Barking, Havering and Redbridge (BHR) CCG	£178,232	£891,160
Total	£418,277	£2,091,385

BHR CCG is contributing £178,232 per annum into this service via the BCF. The CCG already funds £28,500 towards the Redbridge service via the BCF, this arrangement will continue and the remaining £149,732 will be funded via the Havering BCF Section 75 agreement. The additional funding for this service will allow for a general activity uplift across the service as well as developing the service further to include an admission avoidance element. See table 2 for activity levels for the new service.

Table 2: Activity levels for the new service

	LBR – Escorted Discharge Service	LBH - Help not Hospital	LBBB - Next Steps Service
Expected Service User Activity	312 service users supported in a year	985 service users supported in a year	405 service users supported in a year

Key Executive Decision

The joint commissioning of this service across the partnership will deliver efficiencies and a better model of service delivery. However, as the Help Not Hospital Contract is funded via Better Care funding, there is a risk that if the BCF grant ceases or reduces in the future, alternative funding arrangements may need to be identified by Havering and partner organisations.

HUMAN RESOURCES IMPLICATIONS AND RISKS (AND ACCOMMODATION IMPLICATIONS WHERE RELEVANT)

The recommendations made in this report do not give rise to any identifiable HR risks or implications that would directly or indirectly affect either the Council or its workforce.

The tender was subject to TUPE (Transfer of Undertakings (Protection of Employment) Regulations). As such, the ITT document specified that potential contractors were obliged to satisfy themselves that they would be able to meet all TUPE requirements relating to this tendering exercise, including any pension provision obligations.

The bidders were provided with relevant details of all affected staff employed by the current service providers, in line with TUPE and subject to Data Protection Act principles, and their pension status.

The matters relating to TUPE in this joint commissioning exercise do not directly impact on the Council or its current workforce. Potential bidders have been advised to seek independent legal advice with regard to any TUPE implications.

EQUALITIES AND SOCIAL INCLUSION IMPLICATIONS AND RISKS

The Public Sector Equality Duty (PSED) under section 149 of the Equality Act 2010 requires the Council, when exercising its functions, to have due regard to:

- (i) The need to eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010;
- (ii) The need to advance equality of opportunity between persons who share protected characteristics and those who do not, and;
- (iii) Foster good relations between those who have protected characteristics and those who do not.

Note: 'Protected characteristics' are age, sex, race, disability, sexual orientation, marriage and civil partnerships, religion or belief, pregnancy and maternity and gender reassignment.

The Council is committed to all of the above in the provision, procurement and commissioning of its services, and the employment of its workforce. In addition, the Council is also committed to improving the quality of life and wellbeing for all Havering

Key Executive Decision

residents in respect of socio-economics and health determinants.

There are no equality implications arising from this proposal to current and future users of this service. Joint commissioning the service will allow for a general activity uplift across the service as well as developing the service further to include an admission avoidance element. There will be one single provider providing a consistent service across the three boroughs, resulting in better outcomes for service users.

The requirement of the provider in respect of Equality law 2010 is set out in existing and new contract.

The current providers have an equality policy in place, which demonstrates that members of staff are suitably trained in compliance with the Equality Act 2010. This is standard requirement for new service providers.

To ensure service activity delivers and reflects the boroughs changing population, the provider will be expected to provide equality data as part of quarterly contract monitoring.

HEALTH AND WELLBEING IMPLICATIONS AND RISKS

This Home, Settle and Support service will have a positive impact on improving the health and well-being of vulnerable adults across the three boroughs. It is recognised that being at risk of a hospital admissions or being discharged home from hospital following an admission can be difficult and frightening. The aims of the service include:

- Support vulnerable adults to remain living independently in their own home, this could either be following an admission to hospital, an emergency attendance or if they have been identified as being at risk of being admitted into hospital
- Provide a smooth transition from hospital to home supporting people to feel safe
- Provide a person centred service focused on achieving a range of goals agreed with the service user
- Enhance quality of life for service users by supporting their capacity to take part in everyday activities such as family, social and community engagements
- Support service users to access other appropriate local community services
- Support a reduction delayed discharges
- Support a reduction in emergency admissions and re admissions
- Develop effective relationships with key system partners to maximise outcomes for service users

The service is instrumental in improving people's experience, ensuring that individual's feel safe and supported. The provider will be required to record and measure service user outcomes to demonstrate the positive impact on the following outcomes;

- Promoting the independence and well-being of individuals

Key Executive Decision

- Behaviour and lifestyle such as diet, exercise or self-care
- Mental health and wellbeing
- Opportunity to interact socially with other people, social isolation, community support networks and being able to live independently
- Ability to access health and social care services

Through signposting, the service will be required to demonstrate that are indirectly supporting individuals to improve outcomes in the follow areas:

- Access to and quality of education or other training opportunities
- Employment, income, opportunities for economic development
- Access to green space, sports facilities and opportunities to be active
- Transport, and connections to places within or between the Borough

BACKGROUND PAPERS

None

Key Executive Decision

Part C – Record of decision

I have made this executive decision in accordance with authority delegated to me by the Leader of the Council and in compliance with the requirements of the Constitution.

Decision

Proposal agreed

Delete as applicable

Proposal NOT agreed because

Details of decision maker

Signed



Name: Cllr. Jason Frost

Cabinet Portfolio held:

CMT Member title:

Head of Service title

Other manager title:

Health and Adult Care Services

Date: 20/2/2020

Lodging this notice

The signed decision notice must be delivered to the proper officer, Debra Marlow, Principal Democratic Services Officer in Democratic Services, in the Town Hall.

For use by Committee Administration

This notice was lodged with me on

20/2/2020

Signed

