

CABINET MEMBER SIGNING

Thursday, 10th March, 2022, 2.00 pm

Members: Councillor Lucia das Neves – Cabinet Member for Health, Social Care, and Well-Being

1. APOLOGIES FOR ABSENCE

To receive any apologies for absence.

2. DECLARATIONS OF INTEREST

A member with a disclosable pecuniary interest or a prejudicial interest in a matter who attends a meeting of the authority at which the matter is considered:

- (i) must disclose the interest at the start of the meeting or when the interest becomes apparent, and
- (ii) may not participate in any discussion or vote on the matter and must withdraw from the meeting room.

A member who discloses at a meeting a disclosable pecuniary interest which is not registered in the Register of Members' Interests or the subject of a pending notification must notify the Monitoring Officer of the interest within 28 days of the disclosure.

Disclosable pecuniary interests, personal interests and prejudicial interests are defined at Paragraphs 5-7 and Appendix A of the Members' Code of Conduct

3. INCREASE THE VALUE OF THE COMMUNITY EQUIPMENT CONTRACT WITH MEDEQUIP ASSISTIVE TECHNOLOGY LTD (PAGES 1 - 6)

4. CONTRACT FOR NURSING INTERMEDIATE CARE BEDS (PAGES 7 - 14)

5. VARIATION AND EXTENSION OF HOUSING RELATED SUPPORT CONTRACT - REACH & CONNECT SERVICE (PAGES 15 - 22)

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Head of Legal & Governance (Monitoring Officer)
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Wednesday, 02 March 2022

Report for: Cabinet Member Signing – 10 March 2022

Title: Increase the Value of the Community Equipment contract with Medequip Assistive Technology Ltd

Report authorised by: Beverley Tarka, Director of Adults & Health

Lead Officer: Jeni Plummer, Interim Assistant Director, Adult Social Services

Ward(s) affected: All

**Report for Key/
Non Key Decision:** Key Decision

1. Describe the issue under consideration

- 1.1 Community Equipment supports vulnerable people to remain independent for longer improving their outcomes and reducing the need for more formal and costly care.
- 1.2 To enable the best value for money in purchasing community equipment, mainly due to economies of scale, Haringey joined the London Consortium for the provision of Community Equipment. Haringey jointly tendered and awarded the contract to Medequip Assistive Technology Ltd ('Medequip') through a framework contract ("the Framework"). At present the Consortium consist of 21 London Boroughs out of 33. The only borough delivering in house equipment store is Enfield.
- 1.3 The 4-year Framework with Medequip was agreed at Cabinet in February 2017 (taking the contract to 2021) with the option to extend for 1+1 years (to March 2023). Both extension periods have been agreed by the consortium.
- 1.4 Since then additional services have benefitted from access to this contract, increasing the volume of equipment being supplied and therefore the associated value of the contract. The additional services include Special Educational Needs & Disabilities (SEND), the Paediatric Therapy Team at Whittington Health and the Community Alarm Team (CAS) which all procure their community equipment stock through this contract. In addition, there has been increased demand for community equipment from the contract during the pandemic.
- 1.5 This increased activity will result in there being insufficient budget reflected in the contract for the financial year 2022-23 and there is a need to increase the total contract value by £1.1 million, from £10.8 million to £11.9 million.

2. Cabinet Member Introduction

N/A

3. Recommendations

The Cabinet Member is asked:

- 3.1 To approve the increase in the value of the Framework with Medequip by £1.1 million for the remainder of the contract term to March 31 2023, in accordance with Contract Standing Order 10.02.1(b).

4. Reasons for decision;

- 4.1 Cabinet originally approved the award of the Framework in March 2017 for the initial period of 4 years with an option to extend for 2 years at a total value of some £7.2 million. In February 2020 Cabinet approved a contract extension to March 2023, and variation to increase the contract value to £10.8 million
- 4.2 Since the contract extension in February 2020, the Covid pandemic has affected all areas of life, leading to unprecedented demand for use of the community equipment service which has continued to meet the challenge. The increased demand and other factors set out below resulted in 20% higher spending through the contract by the 5 services in 2020-21, up from £1.77 million to just under £2.2 million As an example, average monthly spending through the contract increased to £177,000 in 2020/21 and has increased again to £193,000 in the first 6 months of 2021-22.
- 4.3 The other factors leading to increased costs include:
 - 4.3.1 An increase in community equipment prices. From April 1st 2021, 520 Medequip stock items had a price increase whilst 420 remained the same. The net effect was a 2.7% price increase. The price rises were driven by large increases in raw material costs due to shortages in foam and steel.
 - 4.3.2 Increased costs due to contributions to the Personal Protective Equipment (PPE) costs of Medequip technicians during the pandemic by all consortium members. This was charged at 0.82p per activity (a visit to a residents home)
 - 4.3.3 The implementation of a block payment scheme, agreed across London Association of Directors of Adult Social Services in late March 2020, to assist Medequip with a potential shortfall during the pandemic in three areas, activity fees, labour repair costs, recycling fees.
 - 4.3.4 1.7% increase in activity fees by Medequip from April 2021.
 - 4.3.5 Increased freight/ shipping container cost charges that are forecast to continue until early 2022, some of which will potentially be passed onto boroughs, with amounts still to be determined. Average price per container increased from £2000 per container to £18,000.
 - 4.3.6 Procurement costs for the new consortium tender, projected to be circa £35k per borough.

- 4.4 Of the £2.2 million spent in 2020-21, £855,000 (40%) was attributable to Adult Social Care spend and the remainder was recharged as follows;
- Haringey Clinical Commissioning Group (CCG): £1,117,000 (53%)
 - Community Alarm Services: £37,000 (1.75%)
 - Special Educational Needs & Disabilities: £76,000 (3.6%)
 - Whittington Paediatric Therapies: £38,000 (1.8%)
- 4.5 The CCG figure of £1,117,000 represents an increase in spending of 22% from the previous financial year. Covid caused an unprecedented demand for beds and high risk pressure mattresses, which along with other equipment helped to facilitate fast hospital discharges.
- 4.6 Given the above figures it is expected that of the £1.1m contract variation request, £660,000 (60%) would be recharged to other services.

5. Alternative options considered

- 5.1 The London Consortium will be going out to tender for a new contract to start in April 2023. The process for re-tendering commenced in April 2021 and has involved extensive engagement and workshops with local boroughs and driven by the Consortium Management Board. Locally we have been involved from a Procurement and operational perspective. Given we are approaching the final year of a 6-year contract other options are limited at this stage.

6. Background information

- 6.1 The Council joined an existing Framework Agreement with the London Consortium for the provision of Community Equipment in November 2012. This followed a procurement process which was compliant with European procurement legislation (the Public Contracts Regulations 2006).
- 6.2 The Framework Agreement ran until March 31st, 2015, the consortium then agreed to invoke the option to extend for a further two years until March 31st, 2017.
- 6.3 Following a tendering process, the Consortium awarded a new 4-year contract to Medequip that started on April 1st, 2017. That Framework agreement had an option to extend for 1+1 years; and following an options appraisal completed by the consortium board dated 28th February 2019, the first-year extension until March 31st, 2022 was agreed. Subsequently the 2nd one year extension has been agreed taking the contract end date to March 31st 2023.
- 6.4 Further option appraisals will be completed in the future to help determine the best way forward for the consortium. The consortium lead borough is Royal Borough Kensington & Chelsea.
- 6.5 Haringey Council will conduct its own internal analysis to determine if a return to an in-house service could be a viable option post March 31st, 2023 prior to contract expiry.

7. Contribution to strategic outcomes

- 7.1 This links into Priority 2; 'People' section of the Borough Plan, which states the following:

"All adults are able to live healthy and fulfilling lives, with dignity, staying active and connected in their communities"

8. Statutory Officers comments

8.1 Finance

- 8.1.1 The proposal is to extend contract for a period of 2 years commencing from 1st April 2021 until 31st March 2023 which will require an increase in the total contract value by £1.1m, from £10.8m to £11.9m. Below is a breakdown of budget and spend over the original contract period and projected extension period.

	17/18 £	18/19 £	19/20 £	20/21 £	21/22 £	22/23 £	Total £
Gross Budget	1.4	1.6	1.8	2.1	2.3	2.7	11.9
Gross Expenditure	1.4	1.6	1.8	2.1	2.3	2.5	11.7

- 8.1.2 Funding is met from a combination of DFG and CCG contribution (circa 50:50 split). There is sufficient annual budget to meet the allocated expenditure of over financial years 2021/22 - 2022/23.

8.2 Procurement

- 8.2.1 The service to which this report relates is within ambit of the Public Contracts Regulation 2015, (the Regulations') Light Touch Regime. As such it was duly tendered by a consortium of London Boroughs led by Hammersmith & Fulham in 2017

- 8.2.2 Under the Regulations a contract modification would usually require a further tender process, however Regulation 72(1)(b), permits inter alia, modifications where additional works, services or supplies by the original contractor have become necessary and a change of contractor cannot be made for economic or technical reasons and would cause significant inconvenience or substantial duplication of costs, provided the increase in value, does not exceed 50% of the original contract price.

- 8.2.3 In this case this framework has been let by a consortium of over 17 London Boroughs which returns efficiencies in management and price due to economies of scale. The exigencies of the pandemic coupled with attendant costs in PPE, increased demand, equipment and freight costs, as well as the additional expenditure due to other services accessing the contract like community alarms, paediatric provision has meant that an anticipated additional

£1.1m will be required to meet demand over the remaining term, which equates to less than the 50% ceiling permitted under the Regulations.

8.2.4 Finally, it should be noted that the 55% of the cost will be met by Health health partners; Haringey CCG and Whittington hospital.

8.3 Legal

8.3.1 The Head of Legal and Governance (Monitoring Officer) has been consulted in the preparation of the report.

8.3.2 The variation of the Framework referred to in the recommendations is in accordance with Regulation 72(1)(b) of the Public Contracts Regulations 2015 (“the Regulations”). Therefore the variation is compliant with the Regulations

8.3.3 Pursuant to Contract Standing Order 10.02.1(b) Cabinet has authority to approve the recommendations in the report.

8.5.4 The Head of Legal and Governance (Monitoring Officer) sees no legal reasons preventing Cabinet from approving the recommendations in the report.

8.4 Equality

8.4.1 The Council has a Public Sector Equality Duty under the Equality Act (2010) to have due regard to the need to:

- Eliminate discrimination, harassment and victimisation and any other conduct prohibited under the Act
- Advance equality of opportunity between people who share those protected characteristics and people who do not
- Foster good relations between people who share those characteristics and people who do not.

8.4.2 The three parts of the duty applies to the following protected characteristics: age, disability, gender reassignment, pregnancy/maternity, race, religion/faith, sex and sexual orientation. Marriage and civil partnership status applies to the first part of the duty.

8.4.3 The proposed decision is to approve a £1.1m increase to the value of the community equipment contract. Those most affected by the decision will be Haringey residents with disabilities and/or health conditions that limit their abilities to undertake day-to-day tasks. The value increase to the contract represents a means of ensuring that the differential needs of these residents can be met, and therefore represents a measure to advance equality of opportunity. The contractor will be required to have due regard for the three aims of the public sector equality duty, stated above, in its capacity as an organisation undertaking a function on behalf of a public body.

9. Use of Appendices

N/A

9. Local Government (Access to Information) Act 1985

N/A

Report for: Cabinet Member Signing – 10 March 2022

Title: Contract for Nursing Intermediate Care Beds

Report authorised by: Charlotte Pomery, Assistant Director Commissioning

Lead Officer: Anita Marsden, Head of Integrated Care

Ward(s) affected: All

**Report for Key/
Non Key Decision:** Key Decision

1. Describe the issue under consideration

- 1.1 The purpose of this paper is to seek authorisation for a direct contract award under Contract Standing Order 16.02 in line with CSO 9.01.2 (g), negotiation without publication of an advertisement, to Magicare Ltd T/A Priscilla Wakefield House for the provision of 8 Intermediate Care Nursing beds.
- 1.2 This report details the Council's requirement for Nursing Intermediate Care provision and demonstrates that these specialist nursing beds are an essential element of Haringey's intermediate care pathway, which is made up of a range of integrated care services that aim to support residents at risk of an unnecessary hospital admission and to support patients to increase their independence following hospital admission

2. Cabinet Member Introduction

- 2.1 N/A

3. Recommendations

- 3.1 The Cabinet Member is asked:
- 3.1.1 Pursuant to CSOs 9.07.1(d and e) and 16.02, to approve the award of contract to Magicare Ltd for the provision of eight (8) Nursing Intermediate Care Service beds for a period of three (3) years, from 1 April 2022 to 31 March 2025 with the option to extend for up to two (2) years, up to a maximum contract value of £2,288,000.
- 3.1.2 To give delegated authority to the Director of Adults and Health to agree the final sum for the service within the upper limit referred to above.

4. Reasons for decision

- 4.1 Evidence from the 2015 National Audit of Intermediate Care shows that intermediate care services are key to reducing the financial, quality and activity pressures being experienced in secondary care and the social care sector.

- 4.2 There is a very limited market for nursing beds in the local area. Priscilla Wakefield House (PWH), run by Magicare Ltd, is currently the only Care Quality Commission (CQC) registered nursing care home in the borough with a bed base of 117 Nursing beds.
- 4.3 The award of this contract will enhance Haringey's intermediate care pathway by continuing to work with a local provider to deliver a co-ordinated intermediate care nursing bed service in Haringey allowing Haringey residents to remain close to home whilst recovering.
- 4.4 The Joint intermediate care pathway was established in 2016 and is a partnership approach between health and social care to managing hospital discharges for patients requiring short term health and care interventions. The proposed Nursing Intermediate Care Beds will be funded through the Clinical Commissioning Group (CCG) Minimum Allocation for the Better Care Fund (BCF) which will be recharged to the Local Authority by the Clinical Commissioning Group and shall not have a financial implication to the Local Authority.
- 4.5 The Nursing Intermediate Care Beds will provide an alternative nursing care offer for those with ongoing health needs following a hospital discharge. These beds will support patients with high intensity and/or more specialised nursing needs who may require a spell of 'active nursing convalescence' as part of the joint intermediate care pathway to prevent patients needing to go to, or to facilitate their return home from hospital. This time-limited response forms part of the wider intermediate care and community nursing solutions available for Haringey patients.
- 4.6 Traditionally these patients would have been provided care by health partners through spot purchased health step down. It is recognised that patients placed in these provisions frequently deconditioned due to a lack of timely therapeutic input and following period of convalescence had higher than anticipated needs requiring Long Term Care placements funded predominantly by adult social care. It is believed that incorporating these beds into the joint Health and Social Care intermediate care pathway will streamline connections between Intermediate Care Services and Continuing Health Care (CHC) assessments through closer collaboration between the Single Point of Access (SPA), CHC team and Reablement services and will better accommodate and manage this patient group improving patient outcomes and the effectiveness of care.
- 4.7 It is anticipated that the provision of these beds will improve outcomes for patients as a result of the convalesced individuals receiving co-ordinated care from the Nursing Home, Care Homes Assessment Team (CHAT)¹ and Multi-Disciplinary Team (MDT)² who are already providing intermediate care services within Priscilla Wakefield House. This will enable patients to 'step down' to less intensive solutions following their intervention which will be beneficial to health and social care Long Term Care budgets and will reduce the risk of subsequent hospital readmissions.
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- 4.8 Purchase of these eight beds will support Haringey's intermediate care pathway by mitigating the significant risk that beds will otherwise not be available when needed. This will result in delayed transfers of care for Haringey patients and increased risk that patients will be placed in out of borough spot purchase arrangements with no access to multi-disciplinary input to support the patients recovery which potentially lead to irreversible deconditioning increasing probability of requirement for long term nursing placement. The CCG has recently reinforced its commitment to these Integrated Care Beds by agreeing to increase its funding of the contract from six beds to eight beds.
- 4.9 Should need or demand for these beds change during the course of this contract, the Council will retain the right to use the beds flexibly, including for general nursing, but with the prior notification to the provider.
- 4.10 The Nursing Intermediate care beds are part of Haringey's wider intermediate care provision. As noted, the beds are supported by a dedicated community health multidisciplinary team (MDT). The MDT is critical for ensuring efficient bed flow and therapy input to achieve better outcomes for individuals and reduce long term care costs.
- 4.11 Haringey's MDT Service is comprised of a part time GP, Social Worker, Physiotherapist, Occupational Therapist, Rehab Technician and Pharmacist all working holistically with the service user to maximise their independence. The MDT service is funded through the Boroughs Better Care Fund and covers other intermediate care services within the borough, providing continuity of care for patients transferring between establishments. The Team are also able to access additional support from other community health providers such as District Nursing and Rapid Response within borough. However, it should be noted that the funding and contracting of the MDT is under a separate element of the Section 75 Agreement between the Council and the CCG, and are not included in the contract under discussion in this paper. If as an alternative, we utilised a nursing home outside of the borough for these intermediate care beds, this would result in no MDT input. In-borough delivery of this service and MDT is in the patients' and families, and Council's overall interest.

5. Alternative options considered

- 5.1 Do nothing – this would result in Haringey CCG being solely reliant on spot purchasing for the provision of these beds. Due to the limited availability of nursing bed provision within the borough this would likely lead to out of borough provision, delays to discharge and the loss of the benefits of rehabilitative input from the MDT and CHAT.
- 5.2 Go out to tender – The Council and CCG could have undertaken a competitive tender process in line with Contract Standing Orders. However, as Priscilla Wakefield House is the only nursing home in the borough it would have been necessary to obtain bids from nursing homes outside the borough. Due to the multi-disciplinary support already in place at PWH out of borough provision would result in the loss of the benefits of rehabilitative input from the MDT and CHAT and diminish the effectiveness and value of the service.

5.3 Across the North Central London footprint there is limited provision of nursing care. Currently there are approximately 2500 nursing home beds within the five partner boroughs. It is Haringey's policy to place residents only in homes which are rated 'Good' and 'Outstanding' by CQC and 28% of beds within the North Central London footprint are in establishments rated 'requires improvement' which further limits the number of available supply.

6. Background information

6.1 NICE Guidance [NG74] Published in 2017 defines Intermediate Care as a multidisciplinary service that helps people to be as independent as possible. It provides support and rehabilitation to people at risk of hospital admission or who have been in hospital. It aims to ensure people transfer from hospital to the community in a timely way and to prevent unnecessary admissions to hospitals and residential care.

6.2 Evidence from the 2015 National Audit of Intermediate Care shows that intermediate care services are key to reducing the financial, quality and activity pressures being experienced in secondary care and the social care service sector. Intermediate care services are also critical to improving outcomes for residents and enabling them to live independently for longer in their own homes, especially where they have had a period in hospital.

6.3 In January 2019 the NHS released the Long Term Plan which outlines 'Over the next five years all parts of the country will be asked to increase the capacity and responsiveness of community and intermediate care services to those who are clinically judged to benefit most.' There is an expectation that local areas will be expected to accommodate service users into bed based intermediate care provisions within 2 days of a patient being identified as medically fit as defined in NICE guidance.

6.4 Haringey Council, CCG and local providers (including clinicians, service managers and representatives from the voluntary sector) began to develop a new pathway for intermediate care in the London Borough of Haringey in 2016. The group recommended that a multidisciplinary team (MDT) be established to support the provision of bed based intermediate care. The aim of the service was to provide step down care and avoid hospital admissions. Over the past four years the Council and CCG have continued to jointly develop and their intermediate care provision.

6.5 The service provides a time limited episode of intermediate care commissioned and supported by a MDT. These beds will be used flexibly to support the development of discharge to assess continuing healthcare pathway as well as general step down beds (transfer from acute hospital for further period of assessment and rehabilitation) and as step up beds (admitted from home for assessment and rehabilitation as an alternative to acute hospital admission). The aims of the service are to:

- Support more people to remain as independent as possible after a stay in hospital
- Facilitate earlier discharge and avoid preventable hospital admissions
- Improve health and social care outcomes for service users

- Prevent people from moving into long term provisions of care unnecessarily with a reduction in permanent admissions to nursing and residential care homes.
 - Reduction in dependence on statutory social care services
- 6.6 Intermediate Care delivers savings to the health economy with more effective discharges being facilitated earlier with reduced length of stays and a reduction in unavoidable admissions or readmissions. Local modelling undertaken in March 2020 estimates that this contract and the MDT save £1.33 for every £1 spent in CCG and Council in terms of reducing long-term care needs and hospital re-admission.
- 6.7 Savings to Adult Social Care are realised through less reliance on long term care services following an intensive period of reablement in a 24 hour setting supported by a multidisciplinary team approach. Intermediate Care contributes significantly to the MTFs savings attributed to preventative savings as a result of the health and social care system operating more effectively. Delayed discharges cost the Council £155 per day.

Pricing details

*Contract value assumes that eight beds are made available for the provision of this care from 1st April 2022 – 31st March 2025, plus up to a two year extension.

- 6.8 The standard unit cost per bed per week £1,100. However, where the assessed needs are much higher than assumed then the rate can be increased for individual cases where agreed by the Head of Integrated Care.

Contract Management

- 6.9 Key Performance Indicators and methods of measurement are integrated within the service specification and will be monitored through contract monitoring meetings and reports.

7. Contribution to strategic outcomes

7.1 The Borough plan 2019-2023, sets out the vision and priorities for the Council over three years. The development of Haringey's Intermediate Care provision contributes to Priority 2: *People, Our vision is a Haringey where strong families, strong networks and strong communities nurture all residents to live well and achieve their potential.* Bed based intermediate care links directly with Outcome 7: *All adults are able to live healthy and fulfilling lives, with dignity, staying active, safe and connected in their communities*

7.2 *Objective 7b: People will be supported to live independently at home for longer.*

Increased reablement provision will enable more people to regain the skills and confidence they require to live independently in the community and will deliver the following outcomes for residents:

- More people are supported to avoid going into hospital unnecessarily
- More people are supported to remain as independent as possible after a stay in hospital
- More people are prevented from moving into residential care unnecessarily

7.3 *Objective 7d: Adults with multiple and complex needs will be supported to achieve improved outcomes through a coordinated partnership approach.*

Provision of the bed based intermediate care within Haringey allows residents access a multi-disciplinary community service who provide coordinated rehabilitation and intermediate care for residents with complex needs across health and social care.

7.4 This work is also aligned to the Better Care Fund plan, whose aim is for people in Haringey to be healthier and have a higher quality of life for longer. It aims to give people more control over the health and social care they receive, for it to be centred on their needs, support their independence and be provided locally wherever possible.

8. Statutory Officers comments (Director of Finance (including procurement), Head of Legal and Governance, Equalities)

8.1 Finance

8.1.1 The proposal is to award contract for a period of three (3) years from 1 April 2022 to 31 March 2025 at a cost of £457,600 per annum with the option to extend for up to two (2) years, up to a maximum contract value of £2,288,000.

-	<u>2022/23</u> £'000s	<u>2023/24</u> £'000s	<u>2024/25</u> £'000s	<u>2025/26</u> £'000s	<u>2026/27</u> £'000s	<u>Total</u> £'000s
<u>Total budget</u>	457	457	457	457	457	2,288
<u>Total expenditure</u>	457	457	457	457	457	2,288

8.1.2 Funding will be met from the Better Care Fund (BCF). There is sufficient budget to meet the allocated expenditure over the lifetime of contract.

8.2 Procurement

- 8.2.1 Intermediate nursing care provision is within scope of the Light Touch Regime of the Public Contracts Regulations 2015. As the value of the contract is above threshold it would normally require an advertisement via Find a Tender Service. However, under Regulation 32 of the Public Contracts Regulations 2015, it is permissible to let a negotiated contract without the requisite advertisement if there are cogent reasons including the absence of competition for technical reasons.
- 8.2.2 As noted in 4 above, Magicare Ltd Priscilla Wakefield House is not only the sole nursing provision in borough but a singular provision with Multi-disciplinary team (MDT) input. The MDT is a joint venture between LBH, Whittington Health Trust, and North Central London Clinical Commissioning Group (NCL CCG), which can only work with the Haringey clients registered with a Haringey GP; should clients be placed out of the borough they would not be entitled to MDT input which is imperative to realise improved rehabilitative outcomes for intermediate care patients. As such there are no reasonable alternatives or substitutes for this provision hence, an absence of competition, which is not due to the artificial narrowing of the parameters of procurement.
- 8.2.3 The contract award is in line with CSOs 9.01.2g, and 16.02 and will provide best value for the Council given the impact of this provision on preventative savings for the Council and the CCG on the cost of funding long term care or hospital readmissions. This provision will be fully funded by the CCG
- 8.2.4 Commissioning will monitor the contract throughout its duration to ensure key performance indicators and contract outcomes are met.

8.3 Legal

- 8.3.1 The Head of Legal and Governance (Monitoring Officer) has been consulted in the preparation of this report.
- 8.3.2 The services which are the subject of this report are governed by Chapter 3, Section 7 and Schedule 3 (Social and other Specific Services) of the Public Contracts Regulations 2015 (the Regulations). Where the value of the contract is over the threshold for social and other services (currently £663,540.00), a procurement needs to be carried out in accordance with the process set out in Chapter 3, Section 7 of the Regulations
- 8.3.3 The Regulations provide that the procurement requirements set out in Section 7 shall not apply where a negotiated procedure without publication of a notice has been used in accordance with Regulation 32.
- 8.3.4 Regulation 32 (use of negotiated procedure without prior publication of a notice) may be used in certain specified circumstances. One of these is where competition is absent for technical reasons as set out in the body of this report.

8.3.5 The award of the contract is a Key Decision as it is over £500,000. The Council must therefore comply with its governance processes in respect of Key Decisions including publication of the contract in the Forward Plan.

8.3.6 Approval of contracts of £500,000 or more would usually be made by the Cabinet. In-between meetings of the Cabinet, the Leader may take the decision or delegate this to the Cabinet Member with the relevant portfolio (CSO 16.02).

8.3.7 The Head of Legal and Governance (Monitoring Officer) sees no legal reasons preventing the Cabinet Member for Health, Social Care and Wellbeing from approving the recommendations in this report.

8.4 Equality

8.4.1 The council has a Public Sector Equality Duty under the Equality Act (2010) to have due regard to the need to:

- Eliminate discrimination, harassment and victimisation and any other conduct prohibited under the Act
- Advance equality of opportunity between people who share protected characteristics and people who do not
- Foster good relations between people who share those characteristics and people who do not

8.4.2 The three parts of the duty apply to the following protected characteristics: age, disability, gender reassignment, pregnancy/maternity, race, religion/faith, sex and sexual orientation. Marriage and civil partnership status applies to the first part of the duty.

8.4.3 Although it is not enforced in legislation as a protected characteristic, Haringey Council treats socioeconomic status as a local protected characteristic.

8.4.4 The continuation of this service supports older and disabled people to benefit from dedicated, specialist intervention to enable them to regain mobility, independence and quality of life following a hospital stay. The service promotes a local offer which provides equality of opportunity for local residents to access the services they need.

9. Use of Appendices

N/A

10. Local Government (Access to Information) Act 1985

N/A

Report for: Cabinet Member Signing – 10 March 2022

Title: Variation and Extension of Housing Related Support Contract – Reach & Connect Service

Report authorised by: Charlotte Pomery, Assistant Director of Commissioning, charlotte.pomery@haringey.gov.uk

Lead Officer: Gill Taylor, Strategic Lead, Homelessness and Vulnerable Adults, gill1.taylor@haringey.gov.uk

Ward(s) affected: All

Report for Key/

Non-Key Decision: Key Decision

1. Describe the issue under consideration

1.1. This report seeks Cabinet approval to implement Contract Standing Order 10.02.1b, to vary and extend the contract for the Community Navigator Service for Older people in Haringey (Reach & Connect) with Public Voice for a period of 2 years.

2. Cabinet Member Introduction

2.1 As a borough we are committed to ensuring that vulnerable older people have access to high quality support that enables them to enjoy independent, active and healthy lives. In particular, we recognise the significant positive impact that having safe and suitable housing makes to achieving these aims and the specific housing vulnerabilities older people.

2.2 The Community Navigator Service (Reach & Connect) provides a practical response to the needs and ambitions of a growing older population in the borough, ensuring more people have access to support regardless of where they live or the type of housing they live in. It is therefore appropriate to extend this contract to ensure continuity for the beneficiaries of the service following the uncertainty of the last two years.

3. Recommendations

The Cabinet Member is asked:

3.1 To approve the variation and extension of contract for the Community Navigator Service for Older People in Haringey (Reach & Connect), held by Public Voice, as allowed under Contract Standing Order 10.02.1b as follows:

- Year 4 (1 May 2022 to 30 April 2023) – £391,670
- Year 5 (1 May 2023 to 30 April 2024) - £401,670
- Which is a total extension value of £793,340

3.2 The aggregated value of the contract period from 1 May 2019 to 30 April 2024 is £2,041,440.

3.3 Funding for this extension will be from the Council's Housing Related Support general fund budget, in Adults and Health.

3.4 The contract was re-negotiated with Public Voice for the duration of the variation and extension period as shown in 6.13 of the report.

4. Reasons for decision

4.1 The service enables older people in the borough to continue living independently in their own homes and prevent escalation in care needs and hospital admissions.

4.2 Performance has been evaluated as good throughout the contract period. Performance returns are completed and submitted on time and targets are met. There is a demonstrable need for this service in Haringey and the services are evidently delivering positive outcomes for older residents. Therefore, it is in residents and the Council's overall interest to continue to provide these much-needed older people services in Haringey.

5. Alternative options considered

5.1 Do nothing: It would be possible to leave the contract to cease at the end of this contract period, however there is continued high demand for this service, and it continues to achieve positive outcomes for vulnerable people. Therefore, it would not be in the council's interest to end this contract at this time.

5.2 In-house provision was considered and was found not to be suitable for delivery of this service, as there is not currently the expertise within the Council to provide this service.

5.3 Consideration was given to the completion of a procurement exercise via an open tender process. However, this option was discounted because the Council was able to enter into negotiations with the current provider and use the option to extend the contract which was agreed by Cabinet in March 2019.

6. Background information

- 6.1 The Housing-Related Support programme funds supported accommodation, floating support, health, and specialist advice services for housing vulnerable people in Haringey. There are currently over 60 contracts for a wide range of resident groups including: older people; people with mental health needs; learning and physical disabilities; young people; survivors of domestic violence; people with substance misuse issues; those at risk of re-offending and those at risk of homelessness and rough sleeping.
- 6.2 Housing Related Support for older people is a preventative and early help provision designed to prevent homelessness, reduce isolation and de-escalate and/or manage social care needs.
- 6.3 Haringey has a total population of 254,900. 49.5% of the population are male and 50.5% are female.
- 6.4 A key finding from the 2011 Census is that 22,400 of the population are 65+. This is 8.8% of the total population. This is proportionately less than both London (11.1%) and England and Wales (16.4%).
- 6.5 In March 2019, following an open tender process, Cabinet agreed the award of contract for the Community Navigator Service for Older people in Haringey (Reach & Connect) to a partnership of 4 organisations led by Public Voice. The other providers are:
- Mind in Haringey
 - Haringey Association for Independent Living
 - Wise Thoughts.
- 6.6 The contract commenced from 1 May 2019 to 30 April 2022 and with an option to extend for two (2) further period of two (2) years each. The service was delivered by 8 Community Connectors (2 from each organisation), providing 2000 hours of support per quarter.
- 6.7 The annual contract values are:
- Year 1 – 01/05/19 - 30/04/20 - £389,760
 - Year 2 - 01/05/20 - 30/04/21 - £436,670
 - Year 3 - 01/05/21 - 30/04/22 - £421,670
- 6.8 The aim of the Community Navigator service model is to provide proactive universal, brief, targeted, housing-related support that enables older people to live long, active, healthy and independent lives by providing:
- a holistic person-centred approach that recognises housing support as a platform to address a wide range of other needs
 - fair and equal access to the service for all vulnerable older people

- universal drop-in, individual and group support providing information, signposting and capacity building support
- targeted brief interventions to enable especially vulnerable older people to manage challenging experiences such as returning from hospital, moving home, bereavement and victimisation
- safeguarding of vulnerable adults and protection from abuse, neglect and hate crime

6.9 Haringey Circle is a membership service set up to connect and inspire over 50's in Haringey. It provides activities and events to help over 50's lead fulfilled lives and to reduce social isolation and loneliness. The salaries for two Haringey Circle staff are included in the Reach & Connect budget.

6.10 In October 2021, Public Voice advised that the pandemic had significantly impacted on the development and growth of Haringey Circle which had planned a launch in May 2020 but was cancelled due to the Covid lockdowns starting in March 2020 and they were not able to sign up as many members as they anticipated which left a shortfall in their budgets.

6.11 The original contract award included for the first time, dedicated support for LGBTQI+ and learning-disabled older people. In October 2021, Public Voice advised that Wise Thoughts gave notice of withdrawal from the partnership to deliver the Community Navigator Service for Older people in Haringey (Reach & Connect). Their element of the service delivered specialist LGBTQ+ support. The Housing Related Support team intend to commission 1 FTE LGBTQI+ Community Connector via a separate process, in order to retain the specialist nature of the provision to ensure this is provided by a specialist 'by and for' organisation.

6.12 Between October and December 2021, the Housing Related Support renegotiated annual contract values for the extension period with Public Voice as follows:

No. of Connectors	Number of Partners	Annual Contract Value in Yr 4	Annual Contract value in Yr 5	Comments
6	3	£391,670	£401,670	A 3% inflationary uplift in year 5 against staff costs only.

6.13 There was provision in the original bid for a price negotiation in the event that the option to extend was exercised; the price was not expected to be higher than the submitted Year 3 price which is £421,670. Over the 2- year extension

period this would have totalled £843,340 with 8 Community Connectors.

- 6.14 The negotiated contract value over the 2- year extension period is £793,340 including a reduction of Community Connectors to 6.
- 6.15 There is a further option to extend the contract for another 2 years and if the option is exercised, the price will be negotiated, but this is not expected to be higher than the Year 5 price and is subject to funding being available.
- 6.16 Commissioning has undertaken regular contract monitoring and has received and reviewed performance data which demonstrates that targets are met and requisite outcomes are delivered.

7. Contribution to strategic outcomes

- 7.1 The service directly links to **Priority 2 – Enable all adults to live healthy, long and fulfilling lives:**
 - All residents will be as healthy as possible for as long as possible.
 - Health related quality of life will improve over time (including mental health and wellbeing).
- 7.2 The service contributes to the boroughs emerging work to develop an integrated Older People and Frailty Strategy, in particular in the aim to prevent hospital re-admissions for falls and other preventable issues linked to frailty.

8. Statutory Officers comments (Director of Finance (including procurement), Head of Legal and Governance, Equalities)

8.1 Finance

- 8.1.1 The proposal is to extend contract for a period of 2 years commencing from 1st May 2022 until 30th April 2024 at an additional cost of £391,670 and £401,670 respectively. This will increase the total contract value to £2,041,440.

	19/20 £	20/21 £	21/22 £	22/23 £	23/24 £	Total £
Gross Budget	0.4	0.4	0.4	0.4	0.4	2.0
Gross Expenditure	0.4	0.4	0.4	0.4	0.4	2.0

8.1.2 Funding will be met from the Council's Housing Related Support general fund budget, in Adults and Health. There is sufficient annual budget to meet the allocated expenditure of over financial years 2022/23 - 2023/24.

8.2 Procurement

8.2.1 This provision was advertised and tendered as required by Schedule 3 of the Public Contracts Regulation 2015 ("the Regulations").

8.2.2 The contract extension was provided for in the original tender process and may be exercised in line with Regulation 72(1).

8.2.2 The requested contract extension and variation are in accordance with the requirements of Contract Standing Order 10.02.1b.

8.2.3 Housing Related Support commissioners have evaluated that the supplier has provided a good service which meets performance indicators and outcomes and will continue to monitor the contract throughout its duration.

8.3 Legal

8.3.1 The Head of Legal and Governance (Monitoring Officer) has been consulted in the preparation of this report.

8.3.2 The services to which this report relates are Schedule 3 services (social and other specific services) and therefore subject to the "light touch regime" which involves following a tender process which is compliant with Section 7 of the Public Contracts Regulations 2015 (the Regulations).

8.3.3 The Head of Legal and Governance (Monitoring Officer) has been advised that the original procurement allowed for an initial extension of 2 years and also for some flexibility in agreeing the contract price for any extension.

8.3.4 The extension therefore appears compliant with the modification rules set out in Regulation 72 (1) (a) i.e. where the modifications, irrespective of their monetary value, have been provided for in the initial procurement documents in clear, precise and unequivocal review clauses, which may include price revision clauses or options.

8.3.5 The extension of the contract is a Key Decision and, as such, needs to comply with the Council's governance requirements in respect of Key Decisions including publication in the Forward Plan (CSO 3.01 (d)).

8.3.6 The Cabinet has power to approve the extension under CSO 10.02.1 (b) (where the value is £500,000 or more).

8.3.7 The Head of Legal and Governance (Monitoring Officer) sees no legal reason preventing Members from approving the recommendations in this report.

8.4 Equality

8.4.1 The Council has a Public Sector Equality Duty under the Equality Act (2010) to have due regard to the need to:

- Eliminate discrimination, harassment and victimisation and any other conduct prohibited under the Act
- Advance equality of opportunity between people who share those protected characteristics and people who do not
- Foster good relations between people who share those characteristics and people who do not.

8.4.2 The three parts of the duty applies to the following protected characteristics: age, disability, gender reassignment, pregnancy/maternity, race, religion/faith, sex and sexual orientation. Marriage and civil partnership status applies to the first part of the duty.

8.4.3 This decision is to approve the variation and extension of contract for the provision of housing-related support for older people. This will lead to improved quality of life for older people in Haringey by supporting their housing-related needs, including vulnerable older people with specific needs by virtue of sharing the protected characteristics of disability, sex, sexuality, and race.

8.4.4 The objective of the proposed decision is to maintain levels of housing-related support available to older people in the borough, leading to improved mental and physical health and a better quality of life for this group. The proposed decision therefore represents a measure to eliminate discrimination and advance equality of opportunity by meeting the needs of older people living in Haringey.

8.4.5 As an organisation carrying out a public function on behalf of a public body, Public Voice will be obliged to have due regard for the need to achieve the three aims of the Public Sector Equality Duty as stated above. Appropriate contract management arrangements will be established to ensure that the delivery of the service does not result in any preventable or disproportionate inequality.

9. Use of Appendices

None

10. Local Government (Access to Information) Act 1985

Not applicable.