

# **MINUTES OF THE MEETING Cabinet Member Signing HELD ON Tuesday, 10th June, 2025, 2.10 - 2.25 pm**

## **PRESENT:**

**Councillors: Lucia das Neves**

## **ALSO ATTENDING:**

### **8. APOLOGIES FOR ABSENCE**

There were none.

### **9. DECLARATIONS OF INTEREST**

There were none.

### **10. URGENT BUSINESS**

There was none.

### **11. DEPUTATIONS / PETITIONS / QUESTIONS**

There were none.

### **12. AWARD OF CONTRACT FOR THE PROVISION OF POSITIVE BEHAVIOUR SUPPORT SERVICE - CARE AND SUPPORT FOR PERSON B**

The Adult Social Care Commissioning Manager introduced the report. The rationale for the report was outlined.

The proposed provider of Organisation A was explained and it was additionally explained that the request was to procure an initial period of five years at an estimated cost of £3.8m, with an option to extend for a further period or periods of up to five years

The Cabinet Member expressed concerns with the number of potential providers and the size of market. Officers explained that there had been extensive work to identify suppliers, but stressed that, due to the complexity of the case, there was a low number of suppliers.

The Cabinet Member noted the high level of need in the case.

## **RESOLVED:**

That the Cabinet Member for Health, Social Care and Wellbeing:

1. Approved, in accordance with Contract Standing Order 16.1 and 0.08, the award of a Service Agreement to the successful Service Provider (identified in the exempt appendix of this report) for the Provision of Positive Behaviour Support (PBS) Service – bespoke care and support provision for Person B. The service agreement would run for an initial period of five (5) years at an estimated cost of £3.8m with a target commencement date of 1st July 2025, with an option to extend for a further period or periods of up to five (5) years. The estimated total cost of service would be £7.6m for ten (10) years (if fully extended).
2. Noted that the cost of the service was jointly funded by the Council and North Central London Integrated Care Board (NCL ICB) under section 117. The indicative split was Haringey Adult Social Care 23% and NCL ICB 77%, while transition costs were fully funded by NCL ICB.

### **Reasons for decision**

The decision to award a Service Agreement to the successful Service Provider was based on the conclusion of a competitive procurement process. The proposed recommendation to award the Service Agreement was made according to the outcome of the Most Economically Advantageous Tender, as detailed in section 6 of this report.

Positive behaviour support (PBS) was a person-centred framework for providing long-term support to people with a learning disability, and/or autism, including those with mental health conditions, who had, or were at risk of developing, behaviours that challenge. It was a blend of person-centred values and behavioural science and used evidence to inform decision-making.

The PBS Framework brought several benefits: Services were based on a PBS approach to improve life outcomes of vulnerable service users who presented 'challenging behaviours' to live in a community setting. Providers' performance was judged according to the extent to which the agreed outcomes were met and the extent to which an individual's independence was maintained with stable or decreased care and support needs. The Service Provider, in partnership with the Council, was expected to measure and record achievement of individual outcomes and meet the requirements of the Council's Performance Monitoring Tool.

The Service Provider was required to ensure that all staff engaged in the delivery of the Services to Person B were rewarded fairly without unreasonable deductions from pay and were paid hourly rates no less than the London Living Wage (LLW), which

coincided with the Council's commitment to LLW. The Positive Behaviour Support model gave the flexibility to step down Person B's package of care over time.

### **Alternative options considered**

Do nothing – This would have entailed Person B remaining in hospital without a clear target date for discharge, continuing to be in a hospital setting isolated from the wider community, unable to interact with others or have opportunities to become as independent as possible and choose the life they wished to lead.

This would not have helped Haringey Council and NCL ICB to deliver the requirements of the NHS long-term plan for people with learning disability and/or autism to be discharged from hospital or prevented from being admitted to an inpatient setting. It would have resulted in reduced patient choice and would not have delivered the outcomes for patients as set out in Building the Right Support. The Local Authority would not have fulfilled its duty of care as required.

Continue to search nationally for a community provision already established – Despite a 2-year search by HLDP (Haringey Learning Disability Partnership) and NCL ICB, there was not a currently existing provision nationally which could meet this person's needs. There was a high risk posed to the community (and Haringey, and whole system reputation) if Person B was placed in a service which could not meet needs, and high risk (reactive re-admission costs in event of breakdown), and huge detrimental impact on the person and prospects for community living in the future.

- Such an approach had a negative impact on morale
- Making people "fit" into pre-existing services did not produce positive outcomes
- High risk of breakdown as not tailored to individual needs
- It was also resource intensive
- Commanded extensive human costs in terms of time

Acquire and adapt individual accommodation – Bespoke Community provision: This would have provided a highly personalised and adapted housing and support solution. Initial investment in adaptations would have reduced long-term dependence on higher-than-necessary staffing requirements.

This option would have met the ambitions of the NHS Long Term Plan and would have delivered improved outcomes for individuals as set out in Building the Right Support.

It would have been necessary to source a detached ground floor 3/4 bedroom property to ensure enough room for staff and space for a sensory/quiet room. The property needed to be detached to reduce noise transfer. This would have required the tendering for a robust care provider who had infrastructure in the designated location for property purchase or was willing to set up a sustainable service in the area

where the property was purchased. Amplius (formerly known as Grand Union Housing) was already onboard, so searches took place within the home counties, but accommodation was sought in areas where a Community Learning Disability Team would support the placement. Therefore, specific areas such as Hertfordshire and Essex were excluded.

All areas were considered, due to the limited pool of detached bungalows which might have come onto the open market; furthermore, not all of these were suitable for adaptation. So, it was essential to consider a larger geographical area to find the most suitable accommodation within budget. As far as practically possible, it was sought within easily commutable distance for family to visit from Haringey.

New build property – Person B required a robust environment with specialist adaptation. An older home was built with plaster and lathe, making the home structurally stronger than the drywall construction of modern homes. These older materials also provided a better sound barrier and insulation.

This would have provided a personalised housing with care solution through use of self-contained accommodation and individual service funds for commissioning the support arrangements. It would have provided a highly personalised housing and care solution and would have met the ambitions of the NHS Long Term Plan and Building the Right Support. However, sourcing an alternative suitable site was likely to be problematic owing to affordable land shortages, especially in areas close to London.

### **13. EXCLUSION OF THE PRESS AND PUBLIC**

#### **RESOLVED:**

To exclude the press and public be from the remainder of the meeting as it contains exempt information as defined in Section 100a of the Local Government Act 1972 (as amended by Section 12A of the Local Government Act 1985); paras 3, namely information relating to the financial or business affairs of any particular person (including the authority holding that information)

### **14. AWARD OF CONTRACT FOR THE PROVISION OF POSITIVE BEHAVIOUR SUPPORT SERVICE - CARE AND SUPPORT FOR PERSON B - EXEMPT APPENDIX**

The exempt information was discussed.

#### **RESOLVED:**

The exempt information was noted

CHAIR:

Signed by Chair .....

Date .....