Delegated Decision Notification (DDN)

This form is used both to give notice of an officer's intention to make a key decision and to record any delegated decision which has been taken. The decision set out on this form therefore reflects the decision that it is intended to be made, or that has been made. Although set out in the past tense a decision for which notice is being given may be subject to amendment or withdrawal.

Lead director ⁱ :	Director of Adults & Health		
Subject ⁱⁱ :	Interim Waiver Report for Moving and Handling Training from 5 th November 2017 to 4 th November 2018.		
	Waiver of Contract Procedure Rules (CPR's) 8.1 and 8.2 using the authority set		
	out in CPR 1.3 to award a contract for the delivery of services commissioned by Adults & Health.		
Decision	The Director of Adults & Health approved the recommended to waive Contract		
details ⁱⁱⁱ :	Procedure Rules 8.1 and 8.2 using the authority set out in CPR 1.3 to award a contract to Workfit, the established moving and handling provider, for the		
	provision of training for a range of moving and handling related specialisms for a period of 12 months to give time to explore a full procurement exercise jointly with LCH.		
	The contract shall commence on 5 th November 2017 and expire on		
	4 th November 2018. The Senior Organisational Development officer will		
	implement this decision directly after it has been taken.		
Type of	Key decision (executive)		
decision:	Is the decision eligible for call-in? [™] ☐ Yes ☐ No		
	Is the decision exempt from call-in? ^v Yes No		
	Significant operational decision (council or executive ^{vi} – not subject to call-		
	in) Administrative decision (council or executive^{vii} – not subject to publication or 		
	call-in)		
Notice ^{viii} or call-	Date the decision was published in the list of forthcoming key decisions:		
in (key decisions			
only):	If not on the list of forthcoming key decisions for at least 28 clear days, the		
	reason why it would be impracticable to delay the decision:		
	If exempt from call-in, the reason why call-in would prejudice the interests of t council or the public:		
Affected wards:	All		

Details of	Executive Member	Date consulted:	Interest disclosed? ^{ix}	
consultation	Cllr Rebecca	24 th July 2017	Yes Date of dispensation:	
undertaken:	Charlwood via		🗌 No	
	Members Brief			
	Ward Councillor	Date consulted:	Interest disclosed?	
	N/A		Yes Date of dispensation:	
			No No	
	Others ^x please	Date consulted:	Interest disclosed?	
	specify:		Yes Date of dispensation:	
			🖂 No	
Capital injection				
approval	Injection approval required? 🗌 Yes 🛛 No			
required:	(If yes, you must complete the Approval box below)			
Capital			Capital scheme number:	
Injection			XXXXX / XXX / XXX	
approval	Name:			
	Title:		Date:	
Contract details	Contract reference n	umber	Contract title	
(procurement				
decisions only)				
			Supplier	
Implementation	Officer accountable for implementation			
(key decisions	Senior Organisational Development Officer, Adults & Health			
only)	Timescales for implementation ^{xi}			
	5 th November 2017			
Contact person:	Kath Waring, Senior	_	Telephone number ^{xii} :	
	Development Officer		0113 3785086	
Decision maker				
or authorised	Name: SHONA	MCFARLANE	Date: 4 th September 2017	
signatory ^{xiii} :	SIAMAN MAG	HRANDARE.	Date: 4 th September 2017	
	DIMINA MU			