

Report of Chief Officer /Consultant in Public Health and Adults and Health Commissioning Team

Report to Director of Public Health and Director of Resources & Housing

Date: 24th January 2018

Subject: To seek authority to procure a new 'Home Independence and Warmth' service, waive CPR 15.2 to change the procurement quality threshold to 100% for the new procurement exercise, and waiver of CPR's 9.1 and 9.2 to enter in to a 6 month interim contract with Care and Repair Leeds, for the continued provision of the Home Independence Pilot from the 1st April 2018.

Are specific electoral Wards affected? If relevant, name(s) of Ward(s):	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Are there implications for equality and diversity and cohesion and integration?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Is the decision eligible for Call-In?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Does the report contain confidential or exempt information? If relevant, Access to Information Procedure Rule number: Appendix number:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Summary of main issues

1. Leeds City Council currently contract with Care and Repair Leeds to deliver a pilot contract which was established on the 1st April 2015 for 2 years with an option to extend (+6 +6 months). Following a joint strategic review and options appraisal in August 2017 it was recommended that a new Home Independence and Warmth service be tendered to commence from the 1st October 2018.
2. The new service will bring together existing Home Independence pilot services, with Affordable Warmth and the Warmth for Wellbeing services.
3. This report is seeking the authority to enter in to a competitive tender process to procure a new combined 'Home Independence and Warmth' service, for a 3 year contract period (with an option to extend up to a further 2 years) at a maximum budget of £570,367 pa (£203,497 Resources and Housing, £366,870 Public Health).
4. In order to maintain existing service provision whilst the competitive tender process takes place, request a waiver of CPR 9.1 and 9.2 to enter in to a 6 month interim contract at a value of £205,184 (£71,749 Resources and Housing, £133,435 Public Health) with Care and Repair Leeds for the continued delivery of the Home Independence Pilot (9RXF-MZHGWW) from the 1st April 2018.

5. In addition, as a result of the strategic review and procurement development we are seeking approval to waive CPR 15.2 to change the tender evaluation quality threshold to 100%.
6. The competitive tender process will begin in February 2018 and the new Home Independence and Warmth service will commence on the 1st October 2018.

Recommendations

7. The Director of Public Health and the Director of Resources and Housing are recommended to grant the authority to enter in to a competitive tender process to procure a new 'Home Independence and Warmth' service for a period of 3 years (with an option to extend up to a further 2 years) with a maximum budget of £570,367 pa (£203,497 Resources and Housing, £366,870 Public Health).
8. The Director of Public Health and the Director of Resources and Housing are recommended to approve the waiver of CPR 9.1 and 9.2 to enter in to a 6 month interim contract of £205,184 (£71,749 Resources and Housing, £133,435 Public Health) with Care and Repair Leeds for the continued delivery of the Home Independence Pilot (9RXF-MZHGWW) from the 1st April 2018.
9. The Director of Public Health and the Director of Resources and Housing give approval to waive CPR 15.2 to change the tender evaluation quality threshold of the 'Home Independence and Warmth' service be based on 100% quality.
10. The Delegated Decision Notification will be signed by the Director of Public Health.

1 Purpose of this report

- 1.1 The purpose of this report is to set out the rationale to grant the authority to procure a new 'Home Independence and Warmth' service using a 100% quality evaluation threshold by waiving CPR 15.2, and also the rationale for a waiver of CPR 9.1 and 9.2 to enter into an interim contract with Care and Repair Leeds for the continued provision of the Home Independence Pilot (9RXF-MZHGWW) for 6 months from the 1st April 2018.

2 Background information

- 2.1 A Home Independence Pilot contract was commissioned in April 2015 on a 2 years with an option to extend (+6 +6 month) contract. The purpose of this contract was to bring together a number of existing services delivered by Care and Repair Leeds in to a single contract, monitor performance, review delivery and conduct a robust procurement exercise.
- 2.2 Prior to this pilot contract being put in place, additional scope was considered (Leeds Directory & Warm Homes services), however at that time, both were either interlinked with, or newly commissioned services and as such deemed out of scope of the pilot contract.
- 2.3 A joint strategic review of this pilot contract which currently delivers minor/major adaptations & equipment, falls prevention and repairs, has been reviewed by the Council. The review has been led by Adults & Health commissioning, including colleagues from Public Health, Healthy Living, Health Protection, Older People and Long-Term Conditions and Resources & Housing, Sustainable Energy & Climate Change Team (SECC) alongside wider colleagues within Projects, Programmes and Procurement Unit (PPPU).

- 2.4 In February 2017 the Public Health Programme Board requested whether the scope of the review should include Affordable Warmth and Warmth for Wellbeing services in addition to the pilot contract. The separate provisions are currently delivered as follows;

Service Name	Services delivered	Provider
Home Independence Pilot	Minor/Major adaptations, home repairs, hospital discharge/prevention, falls prevention	Care and Repair Leeds
Affordable Warmth Services	Warm Homes, Green Doctor scheme	Care and Repair Leeds, Groundworks Leeds
Warmth for Wellbeing	Warmth interventions, advice & support	Care and Repair Leeds & Groundworks

- 2.5 The Public Health Programme Board asked officers to undertake an options appraisal into whether the Affordable Warmth and Warmth for Wellbeing Services and the Home Independence Service, should be procured and managed under a joint contract.
- 2.6 The Project Team considered there to be overlap and opportunities to streamline provisions in to a single service which focused on interventions which improved independence, safety and health within the home which would, more crucially, improve the outcomes for clients as well as improve delivery, efficiency and effectiveness through aligned provision.
- 2.7 The SECC sought approval from the Director of Resources and Housing on the 7th September 2017 to align the Affordable Warmth services with Home Independence and delegate authority to the Director of Public Health on future procurement decisions.
- 2.8 Through the Public Health Programme Board approvals were reached to align provisions to create a single city wide Home Independence and Warmth service.
- 2.9 Following consultation with Public Health Programme Board, with PPPU support, an overall timescale of the tender process was agreed, which would align services following a tender exercise to commence on the 1st October 2018. This time frame would require an interim contract on the Home Independence Pilot contract, which expires on the 31st March 2018 with no further opportunities to extend provision as both two + 6 month extension options were taken in February 2017.

3 Main issues

- 3.1 The Adults & Health Commissioning team have led on the review, mapping, consultation and re-modelling of the new provision alongside close working with the Public Health (Healthy Living, Health Protection, Older People and Long-Term Conditions) team, and Resources & Housing (Sustainable Energy & Climate Change Team) and wider colleagues within PPPU. The review and modelling has been undertaken through the Public Health governance requirements, with joint approvals being sought from the Director of Resources and Housing.

- 3.2 Through this joint review and re-modelling, an options appraisal to consider a wider scope was included in to the overall remodelling work. See 2.4. The wider scope was considered due to longer term improvement of outcomes through aligned services and also financial insecurity of Warmth for Wellbeing Clinical Commissioning Group (CCG) funding, which if removed, may impact ongoing service viability and effectiveness of the Warmth for Wellbeing contract from October 2018 onwards. See also 3.12.
- 3.3 Together, the affordable warmth services which are managed and promoted under the “Warmth for Wellbeing” name enable Leeds City Council to provide front line assistance to residents with affordable warmth issues. These services have also facilitated projects providing additional resources to residents such as the Government’s Central Heating Fund and the Warm Well Homes project, which is partly funded by the Local Growth Fund.
- 3.4 By jointly procuring and managing all the affordable warmth services alongside the Home Independence pilot service under one contract, it will provide an opportunity for the further promotion of affordable warmth within the Adults and Health Directorate, increased cross-referrals between home independence and affordable warmth services and present greater opportunities to attract funding from third parties such as the Clinical Commissioning Groups.
- 3.5 The resources and work to understand the options and develop the single provision had an overall impact on the delivery timescales for the project, and to fully develop a new enhanced delivery model meant additional procurement timescales (6 months) had to be added to the overall project timeframe.
- 3.6 The additional timeframe has required a 6 month interim contract of the Home Independence Pilot contract to ensure continued delivery of service whilst a competitive tender exercise takes place and also align the Home Independence Pilot with that of the conclusion of the Affordable Warmth and Warmth for Wellbeing contract (30th September 2018).
- 3.7 Continuity of the Home Independence Pilot is necessary to maintain progress towards meeting the Public Health and Resources and Housing’s responsibilities of the Council, and towards meeting the priorities set out in the health and wellbeing strategy, the Housing Strategy, Best Council Plan and Leeds Vision. See 4.4. If this service does not continue, there would be disruption to service users and a risk to Council wide agendas.
- 3.8 The scope of the major adaptations element of existing provision through the Home Independence Pilot contract was also considered, and through the joint strategic review and consultation with the Head of Housing Support it was agreed that the major adaptations element of work would sit outside of a new contract, due to the very distinct nature of provision, and clear links with the statutory requirements for major adaptations which sit within the Health and Housing Team, which would not warrant inclusion within a new delivery model and competitive procurement exercise.
- 3.9 A Health Needs Assessment and Consultation Report conducted by the strategic review team (Appendix 2) has found that both need and demand for these services continue to rise. Leeds is the UK’s third largest city with a population of around 775,000, which is expected to rise to around 840,000 by 2021. It is important that opportunities to maximise outcomes for an increasing population, especially for those at risk of falls, or warmth related health conditions, are taken, and the opportunity through a combined provision of services will help Leeds address some of these needs and demands.

- 3.10 With any new model of combined service delivery it was important to understand market viability, and whether the market considered there to be any risks or issues with an alignment of provision. A Market Sounding Exercise (MSE) was undertaken in September 2017, and although the returns received do not demonstrate a full picture of all potential bidders, as the MSE is not an invitation to tender, the responses did not raise concerns regarding the potential buoyancy or limitations of the market, or raise any concerns from the market over a combined service provision which was not considered deliverable.
- 3.11 The new combined provision has been financially modelled. This modelling was completed on an assumption of no further funding from the CCGs from October 2018, which currently contribute to the Warmth for Wellbeing contract. This potential reduction of funding (£130,000) places a pressure on the level of outcomes which can be achieved, however by aligning services, the Council will be in a stronger position to absorb potential CCG reductions and minimise impact on client outcomes.
- 3.12 As a result of this funding uncertainty from the CCG, and with confirmation of budgets from Public Health and Resources and Housing, any opportunities to make efficiencies whilst maintaining outcomes cannot be achieved, and to put in place a minimum/maximum price threshold within the competitive tender exercise would be redundant. We are therefore recommending that a 100% quality threshold is implemented through this tender, with maximum budget available without a minimum/maximum budget threshold.

4 Corporate Considerations

4.1 Consultation and Engagement

- 4.1.1 As part of the review, evaluation, and analysis of this pilot contract, a Project Team consisting of representatives from each of the directorates was maintained and consulted throughout the contract, review and procurement process.
- 4.1.2 The Public Health Programme Board has been consulted as part of the options appraisal process, model development and the joint procurement of the Home Independence and Warmth service.
- 4.1.3 Throughout the development of the review, model development and analysis, extensive consultation has taken place with a wide range of clients, stakeholders, trustees and staff. The Health Needs Assessment and Consultation Report (Appendix 2) brings together the range of consultation taken place throughout the review period.
- 4.1.4 As part of ongoing consultation and contract management, the existing providers have been consulted (where appropriate) regarding the development of a new model of service delivery.
- 4.1.5 The new specification has been developed in consultation with key stakeholders in the delivery of health and housing related services including, Leeds Teaching Hospitals, Leeds Community Health Care services, Clinical Commissioning Groups, Health & Housing, Adult Social Care, and Public Health.
- 4.1.6 Lead members have been briefed and are supportive over service developments.

4.2 Equality and Diversity / Cohesion and Integration

- 4.2.1 An Equality, Diversity, Cohesion and Integration screening paper has been completed and included as background information to this report. The screening tool indicates that

at this time a full equality assessment is not required, and sufficient due regard has been considered through a Health Needs Assessment and Consultation Report (Appendix 2) which was undertaken by the Project Team.

4.2.2 This Needs Assessment highlighted key areas, groups, cohorts, demographics and principles which would underpin the development of a new Home Independence and Warmth service.

4.2.3 Through the contract management of existing services, due regard has been given to equality in the delivery of these services and this has been considered through contract management and the review process.

4.2.4 The alignment of services within this provision will enhance opportunities for clients to access and receive a more holistic provision.

4.3 Council policies and City Priorities

4.4 A number of initiatives in Leeds focus on promoting independence and healthy homes. The current services already contribute to many of these aims and will continue to do so with the future service provision. In particular:

<u>Strategy</u>	<u>Priorities</u>	<u>Indicators</u>
Vision for Leeds 2011-30	<ul style="list-style-type: none"> • Best city for communities. • Best city for health and wellbeing. 	<ul style="list-style-type: none"> • People are safe and feel safe. • People are active and involved in their communities. • People live longer and healthier lives. • People are supported by high quality services to live full, active and independent lives.
Best Council Plan 2017-18	<ul style="list-style-type: none"> • Strong Economy and a compassionate city - tackling poverty and reducing inequalities. • Better lives - giving people with care and support needs the right care and support at the right time. • Health and wellbeing - improving physical and mental health. • Low carbon - tackling fuel poverty. • Breakthrough projects - Making Leeds the best city to grow old in. 	<ul style="list-style-type: none"> • More adults and older people helped to live at home. • Fewer people return to hospital following discharge. • Fewer households in fuel poverty. • Improved energy and thermal efficiency performance of houses.
Health and Wellbeing Strategy 2016-21	<ul style="list-style-type: none"> • People will live full, active independent lives. • Housing and the environment enable all people of Leeds to be 	<ul style="list-style-type: none"> • People affording to heat their home. • Unnecessary time patients spend in hospital.

	<ul style="list-style-type: none"> healthy, social and active. An Age Friendly City where people age well. 	<ul style="list-style-type: none"> Preventable hospital admissions. Repeat emergency visits to hospital.
Housing Strategy 2016-21	<ul style="list-style-type: none"> Improving health through housing. Meeting housing needs of older residents. 	<ul style="list-style-type: none"> Contribute to the Yorkshire and Humber target of signing up 20,000 customers to White Rose Energy by 2018. People whose hospital discharge is delayed due to housing.
Affordable Warmth Strategy 2017-30	<ul style="list-style-type: none"> Increasing energy efficiency. Reducing fuel poverty. Improving health and wellbeing through increasing affordable warmth. 	
Making Leeds the Best Place to Grow Old Breakthrough Project	<ul style="list-style-type: none"> The ambition is for Leeds to be a welcoming city, accessible to all and somewhere older people feel, and are, safe. The council wants to ensure that older people are empowered, independent and able to do the things they want to do, whatever their age. Housing is one of the eight domains to focus action. 	
Cutting carbon and improving air quality Breakthrough Project	<ul style="list-style-type: none"> Carbon reduction as a contribution to countering climate change. Greater energy security which provides the city with a competitive advantage. Energy consumption savings to consumers, providing advantages to businesses and residents. Creation of jobs and apprenticeships. Greater visibility of energy usage and costs across the city, particularly via smart agenda. 	

4.5 Resources and value for money

- 4.5.1 On average, an excess day in hospital costs around £306. In 2016-17, 786 people were assisted with hospital discharge interventions. If each of these people went home just one day earlier, this would equate to a saving of £240,516 in hospital costs. In comparison, the approximate annual investment for Hospital Discharge measures is £150,500.
- 4.5.2 It is estimated that it costs between £25,000 to £30,000 for health and social care services if a person falls and breaks their hip. The Falls Prevention element of the service costs approximately £96,000 per annum. Therefore, if 4 people a year are prevented from falling and breaking a hip, the cost to the public purse has already been recouped
- 4.5.3 Calculating the financial benefits of addressing excess cold hazards includes conditions ranging from mild pneumonia to heart attacks and fatalities. However, an average saving to the NHS has been estimated at £706 per year and savings to wider society of £1,764 for each job undertaken. This represents a substantial return on investment, given that the average cost of each Warm Homes intervention is £200.
- 4.5.4 Please see Health Needs Assessment and Consultation Report for further detail on Resources and Value for Money (Appendix 2).

4.5.5 Please see Appendix 1. In order to deliver the new service as detailed above financial provision for these services have been made available within the budget. The Director of Public Health and Director of Resources and Housing have approved the budget provision as follows;

Resources and Housing – £203,497 (£143,497 – DFG, £60,000 – SECC)

Public Health – £366,870

Total - £570,367

4.5.6 In order to continue existing provision whilst a competitive exercise for the Home Independence and Warmth service is completed, a 6 month interim contract for the Home Independence Pilot is required, with the following budget approval required;

Resources and Housing - £71,749 (DFG)

Public Health – £133,435

Total - £205,184

4.5.7 Existing contracts, as described in Appendix 1, have been subject to budget reductions over the last 2 years (5% in 16/17, 5% in 17/18) without significant impact to quality and outcomes. Any further reductions, alongside potential CCG reductions would not be managed without significant impacts on outcomes and quality.

4.5.8 The interim contract for 6 months for the Home Independence Pilot will allow the time and continuity of service to fulfil our competitive procurement exercise and align all services with a start date of October 2018.

4.5.9 The specification, tender documentation and terms and conditions will be written in such a way to allow flexibility in service provision should additional investment be secured, specifically from the CCG.

4.6 **Legal Implications, Access to Information and Call In**

4.6.1 This is a key decision as the maximum cost of services within the report is more than £250k per annum. A notice was published on the List of Forthcoming Key Decisions on the 3rd January 2018 and will be subject to call in. There are no grounds for keeping the contents of this report confidential under the Access to Information Rules.

4.6.2 Awarding the new contract direct to Care & Repair in this way could leave the Council open to a potential claim from other providers, to whom this contract could be of interest, that it has not been wholly transparent. In terms of transparency it should be noted that case law suggests that the Council should always consider whether contracts of this value could be of interest to contractors in other EU member states, and if it could, the opportunity should be subject to a degree of European wide advertising.

4.6.3 It is up to the Council to decide what degree of advertising would be appropriate. In particular, consideration should be given to the subject-matter of the contract, its estimated value, the specifics of the sector concerned (size and structure of the market, commercial practices, etc.) and the geographical location of the place of performance.

4.6.4 The Director of Public Health has considered this and due to the nature of the services being delivered and the requirement to be physically located in Leeds, is of the view that

the scope and nature of the services is such that it would not be of interest to providers in other EU member states.

- 4.6.5 There is a risk of an ombudsman investigation arising from a complaint that the Council has not followed reasonable procedures, resulting in a loss of opportunity. Obviously, the complainant would have to establish maladministration. It is not considered that such an investigation would necessarily result in a finding of maladministration, however such investigations are by their nature more subjective than legal proceedings.
- 4.6.6 As the total value over the life of the contract will exceed the EU procurement threshold of £615,278 set as of January 2018, we are required to advertise the future tendering opportunity and seek competition for the service.
- 4.6.7 Advice has been sought from PPPU throughout the duration of this pilot contract, review and re-modelling process and will continue to be sought through subsequent competitive procurement exercise.
- 4.6.8 Future decisions arising from this report, for example the decision to award the contract will be treated as a consequence of this key decision and will therefore be a significant operational decisions at most which will not be subject to call in.

4.7 Risk Management

- 4.7.1 The current Home Independence Pilot contract runs until the 31st March 2018. As per EU procurement regulations it is important to competitively tender services over a certain value to reduce the risk of legal challenge.
- 4.7.2 Without the approvals which are being sought through this report, and services not continue to be delivered beyond the expiry of the current contract period, this would result in vulnerable older and disabled people being without support necessary to maintain independent living. This could result in increased numbers of vulnerable older and disabled people being admitted to hospital and residential care homes at a greater cost to the local authority, and could prolong the time in which patients remain in hospital whilst awaiting discharge to independence at great expense to health services and reputational damage to the Council.
- 4.7.3 Without approval to procure a new Home Independence and Warmth service, the existing Warmth for Wellbeing service with a potential reduction in CCG funding will be a viability and effectiveness risk. As the Warmth for Wellbeing contract is the umbrella provision for the Affordable Warmth services, a new combined provision through competitive tender exercise will minimise risks.
- 4.7.4 Officer experience and knowledge indicates that there is sufficient viable competition to deliver the services as outlined in 3.11 above and therefore a competitive tendering process for the procurement will be used.
- 4.7.5 A risk register relating to the review, remodelling and procurement was established and will continue to be managed through the Project Team.

5 Conclusions

- 5.1 Ensuring the health, wellbeing, and independence of vulnerable people within the home is a key priority for the Council and its partners. In order to continue existing provision without disruption an interim contract for 6 months for the Home Independence Pilot must

be put in place and a new city wide Home Independence and Warmth service must be procurement through a competitive exercise to ensure new services can commence from the 1st October 2018.

- 5.2 A new Home Independence and Warmth service aligns with key City wide priorities and objectives and ensures the needs of vulnerable people in their homes can continue to be met within challenging landscapes. To maximise budgetary outcomes it is recommended that the tender evaluation quality threshold of the 'Home Independence and Warmth' service be based on 100% quality. The new service will give a strong platform to further develop efficient and effective outcomes through a holistic city wide provision.
- 5.3 If approved, an interim contract will maintain Home Independence Pilot provision until 30th September 2018 and a new Home Independence and Warmth contract will commence on the 1st October 2018.

6 Recommendations

- 6.1 The Director of Public Health and the Director of Resources and Housing are recommended to grant the authority to enter in to a competitive tender process to procure a new 'Home Independence and Warmth' service for a period of 3 years (with an option to extend up to a further 2 years) with a maximum budget of £570,367 pa (£203,497 Resources and Housing, £366,870 Public Health).
- 6.2 The Director of Public Health and the Director of Resources and Housing are recommended to approve the waiver of CPR 9.1 and 9.2 to enter in to a 6 month interim contract of £205,184 (£71,749 Resources and Housing, £133,435 Public Health) with Care and Repair Leeds for the continued delivery of the Home Independence Pilot (9RXF-MZHGWW) from the 1st April 2018.
- 6.3 The Director of Public Health and the Director of Resources and Housing approve to waive CPR 15.2 to change the tender evaluation quality threshold of the 'Home Independence and Warmth' service be based on 100% quality.

To note that:

- the Director of Public Health will use their delegated authority to take commissioning decisions which will be a direct consequence of this key decision, for example approval of the detailed specifications for procurement and subsequent contract awards. These will be at most, significant operational decisions. This is subject to the decisions being in line with the key principles and features as described in the report.
- The Delegated Decision Notification will be signed by the Director of Public Health.

7 Background documents¹

¹ The background documents listed in this section are available to download from the Council's website, unless they contain confidential or exempt information. The list of background documents does not include published works.

Appendix 1 – Finance Breakdown – Existing Services 2017/2018

Home Independence Pilot 17/18	R&H	PH	Total
	£197,997	£266,870	£464,867

Warmth For Wellbeing 17/18*	PH	CCG	Total
	£100,000	£130,000	£230,000

* annual contract runs 1st October 17 – 30th September 18

SECC Warm Homes 17/18 R&H	Warm Homes	Green Doctor	Total
	£20,000	£40,000	£60,000

Home Independence and Warmth Service – 1st October 2018

18/19 1st October onwards pa	R&H		PH		Total
	DFG	£143,497	HI Pilot	£266,870	
	SECC	£60,000	W4W	£100,000	
	Total	£203,497	Total	£366,870	

6 month Interim contract Home Independence Pilot (9RXF-MZHGWW) 1st April 2018 – 30th September 2018

1st April 18 - 30th September 18	R&H		PH		Total
	DFG	£71,749	HI Pilot	£133,435	
	SECC	£0	W4W	£0	
	Total	£71,749	Total	£133,435	