

Adult Social Care Scrutiny Commission

Domiciliary Support Service Procurement

Date: 29th June 2017

Lead director: Steven Forbes



Useful information

- Ward(s) affected: All
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1 Purpose of report

- 1.1 To provide an update to the Adult Social Care Scrutiny Commission on the procurement of new domiciliary services to be in place from 9th October 2017.
- 1.2 The Scrutiny Commission have been provided with regular updates and will be aware that the procurement includes services for both Adult Social Care (ASC) and the Leicester Clinical Commissioning Group (CCG).
- 1.3 The report also details the organisations that have been awarded a contract and the effect of the changes to a number of service users.

2 Summary

- 2.1 A recent procurement exercise was carried out to secure providers of domiciliary services for both the local authority and the Leicester City Clinical Commissioning Group (CCG). This followed extensive engagement with providers of services, service users and the ASC Scrutiny Commission.
- 2.2 The procurement exercise resulted in the award of 25 contracts for general support (this will mainly support ASC service users) and 10 contracts offering specialist complex support largely for CCG patients. A list of the new providers are detailed at Appendix 1.
- 2.3 The procurement exercise has resulted in a small amount of change to the current provider organisations, with two not being awarded a contract on the new framework. In addition to many of the existing providers, 15 new organisations have been awarded a contract to provide general domiciliary support.

3 Recommendations

- 3.1 The ASC Scrutiny Commission is asked to note the outcome of the procurement exercise and to provide comment.

4 Report/Supporting information including options considered:

Procurement approach

- 4.1 It was agreed in September 2016 that a joint procurement exercise would take place between the Leicester CCG and the local authority to ensure new

domiciliary services were operational from October 2017. The existing contract is due to end in October 2017, thus the reason for the procurement exercise.

4.2 Meetings with ASC Scrutiny Commission took place to inform the approach and the contract documentation on the following dates leading up to the procurement:

- 12th July
- 11th August (dedicated session)
- 8th September
- 20th September (dedicated session)

4.3 Procurement commenced in November 2016 in accordance with Public Contract Regulations 2015. These tender applications have all been assessed and legal advice sought where necessary. The resulting outcome of this exercise is as follows:

- The required 35 providers for general care and 10 providers for complex, specialist care with nursing oversight have been secured
- Some providers have been awarded a contract for both services, this represents 26 providers overall
- 11 of these providers currently provide domiciliary services via the existing framework, 15 of these providers are new to working with the authority (although some have experience of working with the CCG)
- 2 of the Council's current providers have not been awarded a contract on the new framework

The effect on current service users

4.4 For those in receipt of care from an existing provider, who has been awarded a contract on the new framework, there will be no change (approx. 1,400 people).

4.5 There are approx. 300 people who receive their support from the two providers who have not been awarded a contract. They have been made aware of the situation and offered a choice of staying with their current provider and taking a direct payment to cover the cost or being transferred to a provider on the new framework.

Next steps

4.6 Regular meetings are being held with the new providers to ensure that support is on offer to those establishing or growing their local base and to carry out early checks on compliance and quality before any service users are placed.

4.7 Regular contact with outgoing providers is also taking place and this is likely to increase as service users begin to transfer out to new providers.

4.8 Service users have been contacted and some have already expressed a wish to take a direct payment and stay with their existing provider. For those that haven't been in contact, further engagement will take place from the local authority, the existing provider and potential new provider to ensure they are

aware of the choices they have and that the transition runs smoothly.

5. Financial, legal and other implications

5.1 Financial implications

The average hourly rate for LA domiciliary care will increase under the new contract resulting in an increase of approximately 2.8% (£350k) in our current annual domiciliary care expenditure of £12.7m. This has been included in our 2017/18 budget.

Martin Judson, Head of Finance

5.2 Legal implications

Legal advice has been given throughout the procurement process and this will be continue post award. The notice of decision will be issued in accordance with the Reg.86 of the Public Contract Regulations 2015 and this will include sufficient reasons why the tenderer was unsuccessful candidates and should it is hoped, prevent unnecessary legal challenges.

The time limit to pursue a challenge in the High Court is 30 days from the date when the tenderer knew or ought to have known the grounds.

Jenis Taylor, Principal Solicitor (Commercial)

5.3 Climate Change and Carbon Reduction implications

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The most significant climate change impact associated with the domiciliary support service will result from travel by the care staff to visit service users. This was considered during the tender exercise by including and scoring a question on the actions that potential providers would take to reduce the impact (eg. local recruitment, geographical clustering of calls, trip planning, the promotion of walking, car sharing, low emission pool cars etc.)

- Mark Jeffcote, Environment Team (x372251)

5.4 Equalities Implications

The EIA was developed prior to the procurement exercise taking place to determine the likely impacts of the service change. It highlighted that the review would be particularly relevant to older people and people with a disability whose needs require additional home support and that they main people to be affected by the new model would be current users.

As detailed within this report the procurement exercise has resulted in a small amount of change to the current provider organisations, and approx. 300 people who receive

their support from the two providers who have not been awarded a contract. These individuals will be directly affected by the service change and as a result the mitigating actions detailed in the EIA are now relevant: to reduce the impact by offering current service users affected a choice of staying with their current provider and taking a direct payment to cover the cost or being transferred to a provider on the new framework.

The service have committed to gather equalities information for all clients which will help to map their journey and can be used to draw out whether there are differences in outcomes for different groups and what further action could be taken by the service to address these.

Sonya King ext 37 4132

Appendix A – Providers for award

Lot 1 – General Support providers
Ark Home Healthcare Limited
Carers Direct Homecare Ltd
Carewatch Care Services Ltd
Castlerock Recruitment Group Ltd (CRG Homecare)
Direct Health (UK) Limited
Domiciliary Care Services (UK) Limited
Fosse Healthcare Ltd
Mi Life Care Services Limited
Sevacare (UK) Ltd
UK Care Team Ltd
Westminster Homecare Limited
English Rose Care Ltd
Family Care Agency Ltd
Nationwide Care Services Ltd
Nestor Prime Care Services Ltd ta Allied Healthcare
Universal Care Services (UK) Limited

Lot 1 and 2 Providers
Bluewood Recruitment Ltd
Bonney Care Agency
Private Home Care UK Ltd
City & County Care Services Ltd (trading as Aspire UK)
Choices Care Ltd
Evolving Care Limited
Help at Home (Egerton Lodge) Ltd
Care 4U (Leicestershire) limited
Adaptus Carers Limited

Lot 2 - Complex/specialist care
HH Care Limited