

CABINET

11 JULY 2023

GATEWAY 1 PROCUREMENT COMMENCEMENT: SUPPORT TO LIVE AT HOME SERVICE

Portfolio Holder:	Councillor Teresa Murray, Deputy Leader of the Council			
Report from:	Jame	James Williams, Director of Public Health		
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i		Support To Live At Home Service. The Council intends to procure a network of providers to deliver Extra Care and Homecare		
Total Contract Valu Duration:	ie (estii	mated): £50 million 4 years / 48 Months		

Summary

This report requests the Cabinet's agreement to commence the procurement of the Framework Contracts for homecare and Extra Care services.

- 1. Budget and Policy Framework
- 1.1. The provision of homecare and Extra Care services are key to Medway Council achieving its strategic objective of ensuring adults maintain their independence in the community and live healthy lives.
- 1.2. A failure to facilitate a supply of good quality homecare services could result in a high number of admissions to residential care and hospital, with subsequent higher social and financial costs. A lack of homecare provision would also affect the ability to discharge patients from hospital in a timely manner leading to an increased length of stay. It is a responsibility of Medway Council within the Health and Care Partnership and Kent and Medway Integrated Care System to facilitate timely discharges. This is also a key enabler in the delivery of the Better Care Fund Plan programme 2023 / 2025.
- 1.3. The Support To Live At Home service will be funded from within adult social care budgets.

2. Background Information

- 2.1. This report seeks permission to commence the procurement of the 'Support To Live At Home Service'. The Council intends to procure, a network of providers to deliver these services across Medway.
- 2.2. The Support To Live At Home Service will replace the current Framework Agreements for the provision of homecare and Extra Care services, which come to end on the 31 May 2024.
- 2.3. This service will provide care and support to people in their own home and to those living in the five Medway Extra Care schemes. Medway currently provides homecare to approximately 1000 people delivering 9744 hours of care per week. (Reference period w/c 18 April 2022)
- 2.4. 'Support To Live At Home' will place emphasis on maintaining and improving health and wellbeing, through enablement based care practices, supporting people to live as independently as possible. The design of the service will coordinate care provided by local care workers, in a cohesive way with health and social care teams, utilizing community assets to provide person centered care and support.
- 2.5. The proposed service will cover long-term homecare, enablement homecare and care provided within the five extra care schemes.
- 2.6. The Support To Live At Home service provides health benefits by enabling people to live as they normally would at home. It provides a tailored care package that promotes independence which positively affect mental and physical wellbeing.
- 3. Service Background Information
- 3.1. Homecare services provide care and support to eligible vulnerable individuals to enable them to remain within their own home and community. Homecare is only provided where there is an assessed need for the service and a financial assessment is made to determine the contributions towards the cost of care payable by the service user. Homecare packages are allocated to the most suitable provider following a referral being sent to all providers on the framework.
- 3.2. The purpose of homecare is to improve an individual's health, wellbeing and enable independence within their own home for as long as possible. Homecare is provided to individuals in need of personalised care and support. The Support To Live At Home Service will be delivered by local care workers in collaboration with social work teams, health care services and third sector providers to provide a holistic person-centered package of support.
- 3.3. Homecare is a preventative service and is commissioned in a proactive way to prevent blockages or bottlenecks in hospital discharges by its delivery. Homecare providers are to offer choice to individuals as to

how services are delivered, whether this is through direct payments, or through commissioned care packages.

- 3.4. Nine Homecare providers were appointed a place on the current Homecare Framework. Medway Council also commissions homecare with an additional 23 providers on a spot purchase basis. These providers deliver long term and enablement homecare services.
- 3.5. Extra Care is a housing scheme for people aged 55+ which consists of self-contained apartments owned or rented by qualifying individuals or couples. Extra Care schemes allow for the provision of care and support in a safe, community-based setting. Tenants or shared owners can retain their independence within their own home with the reassurance of having staff on site 24 hours a day, 365 days a year, to provide emergency care and ongoing daily support.
- 3.6. There are five extra care schemes located in Medway:
 - Bellerophon House, Rochester
 - Montgomery Court, Wainscott, Rochester
 - Prospect Place, Gillingham
 - Atlas Place, St Mary's Island, Gillingham
 - Rogallo Place, Rochester
- 3.7. The following issues were identified prior to the most recent contracts being commissioned which enabled the service model to change to improve delivery of service. This new service design was implemented in 2020 2024.
- 3.8. Previously due to the uncertainty of securing packages of care within areas, there was no incentive for providers to invest in the recruitment of carers. Many care workers are recruited on zero-hour contracts. During holiday periods such as Easter, summer and Christmas, providers have high levels of staff leave which impacted on capacity and their ability to take on new care packages.
- 3.9. Homecare providers expressed the need for greater certainty about the volume of care to be commissioned in each area, which in turn would increase their ability to employ a salaried workforce to address these challenges.
- 3.10. Packages of care were not designated based on area; carers spent increasing amounts of time travelling across Medway. This increases providers' costs and creates inefficiencies.
- 3.11. Other industries were paying higher rates of pay for jobs such as retail and hospitality. During seasonal periods a high number of care workers leave the sector altogether to secure these types of employment.
- 3.12. The commissioning of homecare was time and task focused and did not provide flexibility in the scheduling of care workers. This drives capacity gaps at the most popular times of the day e.g. 08:00, 12:00, 17:00 and 20:00.

- 3.13. Providers also highlighted the need for more flexibility in the way care is commissioned. This would enable providers to adapt the care as required ensuring the service continues to be provided in a way that best meets the individual's needs.
- 3.14. As a result it was decided that the commissioning of the 2020 2024 contracts would incorporate a different service model. Care previously was delivered as time and duration for example 8:30 am for 30 minutes. The new service was provided as a basket of hours. A 'basket of hours' approach gives providers a weekly number of hours to meet a service users desired outcomes rather than a prescriptive time and duration plan. The emphasis is the placed on the provider to work with the individual to plan when and how care is delivered. This approach gives providers the freedom and flexibility to provide care in way that is responsive, enabling and meets the changing needs of the individual.
- 3.15. This service model has worked well, with service users being involved in their care plan and how this is to be delivered by working with their provider.
- 3.16. Current Service Design / Delivery

Homecare is commissioned on a locality-based model mirroring the structure of Adult Social Care. Homecare providers are allocated to work in the three locality areas, with packages of care are allocated to providers based on this model. The three Adult Social Care localities are as follows:

Locality 1 - ME7 & ME8 Locality 2 - ME4 & ME5 Locality 3 - ME1 & ME2 & ME3

Five providers were appointed in each of the three localities to deliver homecare service on behalf of Medway Council.

Medway Council – Adult Social Care Locality Model					
Locality 1	Locality 2	Locality 3			
ME7 / ME8	ME4 / ME5	ME1 / ME2 / ME3			
5 Locality based	5 Locality based	5 Locality based			
Home Care	Home Care	Homecare			
Providers	Providers	Providers			
Population 18-64 &	Population 18-64 &	Population 18-64 &			
65+	65+	65+			
99,458	79,574	100,841			

At present there are three providers delivering extra care in the five extra care schemes across Medway.

Provider 1 – Bellerophon House Provider 2 – Atlas Place and Rogallo Place Provider 3 – Montgomery Court and Prospect Place

- 3.17. A key aim of the current service was to work with fewer providers to enable efficiencies through increased economies of scale and improved integrated working across multi-agencies, resulting in a better-quality service for service users. This reduction in the number of providers commissioned to deliver these services has met the following key objectives:
 - Reduce inefficiencies across the whole system.
 - Improve service standards of homecare.
 - Improve transparency in care delivery.
 - Increase independence and reduce reliance on long term care.
 - Ensure capacity in the market meets future demand.
- 3.18. Providers are required to operate an Electronic Call Monitoring (ECM) system. ECM systems provide real time data about the care provided through the logging of care calls and provide the ability to track and monitor outcomes.
- 3.19. The Adults Commissioning Team intend to procure the new Homecare and Extra Care contract for 2024 2028 based on the current service design and delivery model.
- 3.20. At the start of contract award (April 2020) the Covid 19 pandemic was in the early stages, forcing the UK into several lockdowns throughout the first year of delivery. This made for a challenging time in which to deliver a new service model. Service demand and workforce pressure issues became critical with carers being required to self-isolate upon a positive covid test or being exposed to someone that had contracted Covid-19.
- 3.21. However, despite the difficulties Medway Council and providers faced, providers were able to continue the delivery of services. This demonstrates the resilience of the then new service model and its ability to deliver services. Providers worked in collaboration to ensure that Medway residents received the care and support they needed.
- 3.22. The Support To Live at Home service puts service users desired outcomes at the forefront of how care is designed and is delivered utilising a 'basket of hours' approach.
- 3.23. Adult social care will determine the service users desired outcomes during assessments. These outcomes will be driven by the individual in receipt of care and take into consideration input from family and non-paid carers. Service user outcomes will form the basis of the referral sent to providers ensuring care is delivered in a way that enables the individual to achieve them.

- 3.24. The 'basket of hours' gives providers a weekly number of hours to meet the service users desired outcomes, rather than a prescriptive time, duration and task. This places emphasis on the provider to work with the individual to plan when and how the care is delivered. This approach allowed providers to provide care in way that is responsive, enabling and continues to meet the changing needs of an individual.
- 3.25. The Support To Live At Home service will ensure the following:
 - Homecare providers deliver services based on outcomes.
 - Bottlenecks in service provision are addressed, especially in remote and hard to recruit area.
 - More flexibility and service user choice in the way care is provided through the basket of hours approach.
 - Improved transparency in care delivered using Electronic Call Monitoring Systems.
 - Accurate payments based on actual care delivered.
 - Individuals get greater choice around how care is delivered and managed, either through direct payments or commissioned packages of care.
 - Recruitment of skilled and professional homecare workforce to meet the needs of service users, including those with very complex needs.
 - Promote health benefits by positively impacting on mental and physical health.
 - Assist in reducing social isolation though care worker interaction in the individuals home setting.
 - Deliver a good quality service across Medway to enhance opportunities and reduce health inequalities.
 - Promote personalization and choice.
 - Prevent deterioration in health through the promotion of a healthy balanced diet, smoking cessation (where applicable) and increased physical activity.
 - Deliver care that works with our key partners by connecting the care from the NHS, social care, community, and voluntary sector organisations.
- 4. Urgency of Report
- 4.1. The current framework is due to expire 31 March 2024. Commissioners are keen to commence the procurement exercise at this time to ensure all relevant activity including stakeholder engagement, governance and the tendering process are undertaken and completed in time to ensure a new service is in place by the end of the current contract period.
- 4.2. The proposed project timetable is outlined below:

Project Phase	Action	Date
Gateway 1	Consultation – Internal	May 2023
	GW1 CADMT	5 June 2023
	GW1 Procurement Board	June 2023
	GW1 Cabinet	11 July 2023
Service	Consultation - Provider Event	July 2023
Specification	Finalise Tender Suite – Specification,	August 2023
	T&Cs, Tender Docs etc.	
Tender Stage	Issue ITT	September 2023
	Tender Evaluations	October 2023
Gateway 3	GW3 Draft	October 2023
	GW3 CADMT	October 2023
	GW3 Procurement Board	November 2023
	GW3 Cabinet	November 2023
Contract Award	Contract Award	December 2023
Mobilisation	Mobilisation	January 2024
Implementation	Service go Live	April 2024

- 5. Funding/Engagement from External Sources
- 5.1. This procurement is funded from existing Adult Social Care Budgets and has no external funding.
- 5.2. Further information related to funding is explored in Section 4 'Market Conditions and Procurement Approach'.
- 6. Parent Company Guarantee/Performance Bond Required
- 6.1. As set out within the Council's Contract Procedure Rules, a Parent Company Guarantee or Performance Bond is required for all Supplies (Goods), Services and Works contracts, over £250K unless otherwise agreed by the Council's Monitoring Officer in conjunction with the Council's Chief Finance Officer as part of the Procurement Gateway Process for Category B procurements.
- 6.2. Commissioners request that the requirement for a performance bond be waved for this procurement on the basis of the additional costs to bidders who may be deterred from participating in the procurement process. A Parent Company Guarantee would be requested from any successful organisation which has a Parent Company
- 7. Procurement Dependencies and Obligations
- 7.1. Project Dependency
- 7.1.1. The current service model is dependent on the existence of a brokerage service that refers homecare packages to providers. The existing placement function within Medway Council is the Adult Social Care Brokerage Team.

7.1.2. Appointed providers will be required to use an Electronic Call Monitoring system and submit service delivery data. To fully automate the data submission and invoicing process an upgrade will be required to adult social care's management software (Mosaic). In the event upgrades are not available prior to the commencement of the service, clauses will be added to the contract requiring providers to adopt these processes when they become available.

7.2. Statutory/Legal Obligations

- 7.2.1. The Council has a range of statutory duties and powers to provide services to vulnerable adults such as older people, people with learning disabilities, physically disabled people and people with mental health conditions.
- 7.2.2. The Care Act 2014 and statutory guidance forms the basis of statutory duties for Local Authorities, replacing the National Assistance Act 1948, the Chronically Sick and Disabled Persons Act 1970, and the NHS and Community Care Act 1990.
- 7.2.3. A fundamental principle of the Care Act 2014 requires that local authorities promote an individual's wellbeing by ensuring care and support provided meets the individual's identified outcomes.
- 7.2.4. Supporting people to live as independently as possible, for as long as possible, is a guiding principle of the Care Act. Under the Act, local authorities can provide or commission services in a variety of ways, including through a Direct Payment, to meet the needs of those it assesses as eligible for services.
- 7.2.5. When arranging services, local authorities must ensure commissioning practices and the services delivered comply with the requirements of the Equality Act 2010, the Mental Capacity (Amendment) Act 2019 and the Human Rights Act 1998.
- 7.2.6. Homecare is only provided where there is an assessed need for the service and a financial assessment is made to determine the contributions towards the cost of care payable by the service user. The assessments are in line with Medway Council's eligibility criteria.
- 7.2.7. Extra Care Housing is available in Medway through third party providers. The Council undertakes its statutory obligation in respect of the care delivered to each tenant living within the scheme.
- 7.2.8. The Support To Live At home service will assist in delivering the following Medway Council strategies: Adult Social Care Strategy, People Strategy, Joint Health and Wellbeing Strategy and the Ageing Well Strategy. The role the provider plays in the delivery of these strategies as a key local stakeholder will be defined within the service specification.
- 7.2.9. Homecare and Extra Care services support a number of outcomes within the Medway Council Plan 2023 to 2024. These include 'healthy

and active communities' and 'older and disabled people living independently in their own homes'.

- 7.2.10. The contract will include a Key Performance Indicator (KPI) which supports the Priority, Healthy and Active Communities, in particular 'embedding Make Every Contact Count (NHS Health Education England's approach to behaviour change)'.
 - 8. Business Case
 - 8.1. Procurement Project Outputs / Outcomes
 - 8.1.1. As part of the successful delivery of this procurement requirement, the following project outputs / outcomes within the table below have been identified as key and will be monitored as part of the procurement project delivery process.

Outputs / Outcomes	How will success be measured?	Who will measure success of outputs/ outcomes	When will success be measured?
Appoint homecare providers that can deliver the service requirements	Performance and compliance visits, provider reports, service user surveys and feedback	Partnership Commissioning Business and Intelligence Team Social Work Teams	At tender evaluation and contract award Regularly post contract award as set out in Post procurement contract management.
To encourage and maximise Service User independence	Providers should be able to evidence they are continuously promoting Service User independence through personalised care, treatment, and support	Partnership Commissioning Business and Intelligence Team Social Work Teams	Service level: Six monthly through outcomes reported by providers. Individual level: At the point care is reviewed by social worker
A service that meets the needs of Service Users	Evidence that providers take Service Users views, requests, and preferences into account during the design of how care and support is provided	Social Work Teams – To determine that care has been provided in a way that meets the service user's needs	At the point of review Annually through a quality assurance visit. Monthly contract management meetings

	Providers' performance in dealing with complaints, service user feedback	Partnership Commissioning Quality Assurance Team	Twice Yearly at performance meetings
A service that enables service users to achieve their desired outcomes	Evidence submitted by providers The provider will be required to submit data to indicate the progress service users make against their desired outcomes	Business and Intelligence Team Partnership Commissioning. Social Work Teams – At the point of review	Quarterly - Provider three monthly outcome data submissions At contract management meetings – six monthly review of overall performance And also as set out in Section - Post procurement contract management
Extra Care To provide an alternative to residential care	Measuring the number of service users placed in residential care settings	Partnership Commissioning	Six monthly

- 8.2. Procurement Project Management
- 8.2.1. The management of this procurement process will be the responsibility of the Category Management team.
- 8.3. Post Procurement Contract Management
- 8.3.1. The management of any subsequent contract will be the responsibility of the Adult Commissioning Team.
- 8.3.2. The provider will be required to review each service user's progress against their desired outcomes. Twice yearly meetings will be held with each provider. Data will be reported to Medway Council monthly and collated Quarterly. This data will be reviewed at contract monitoring meetings to determine provider performance.
- 8.3.3. The Quality Assurance Team will carry out a yearly visit to ensure and validate the performance of providers.
- 8.3.4. The Contracts will have KPI's that providers are expected to achieve and will focus on:

HomeCare

- Calls Achieved including calls missed and cancelled.
- Handback of Care Packages
- Recruitment and Staff Retention
- Staff Training, including Care Workers understanding the Public Health services that would improve client's quality of life.
- Delivery of Care which will focus on care reviews and outcomes
- User satisfaction
- Engagement with key partners and Medway Council
- Improving mental health by reducing social isolation
- Calls outside of locality
- 8.3.5. Extra Care
 - Recruitment and Staff Retention
 - Staff Training, including Care Workers understanding the Public Health services that would improve client's quality of life.
 - Delivery of Care which will focus on care reviews and outcomes
 - User satisfaction
 - Engagement with key partners and Medway Council
 - Calls Completed within set timeframe
 - Improving mental health by reducing social isolation
- 9. Market Conditions and Procurement Approach
- 9.1. Market Conditions
- 9.1.1. Providers continue to express concerns about the long-term financial viability of the services they provide in Medway. The cost-of-living crisis and rises in National Living Wage continue to add financial pressure on providers. The average hourly rate returned by providers during the recent fair cost of care exercise (undertaken in July 2022 with results published February 2023) was £23.89 per hour.
- 9.1.2. Medway Council used the Market Sustainability and Improvement Fund to help fund the annual uplift for homecare and extra care providers. The total uplift awarded to providers from 10 April 2023 was 9.9%, taking Medway Council's current average hourly rate to £19.35 per hour.
- 9.1.3. The United Kingdom Homecare Association (UKHCA) report "A minimum Price for Homecare April 2022 to March 2023" suggests the minimum price for Homecare should be £24.08 per hour. Medway Council despite the significant increases is £4.73 away from this rate.
- 9.1.4. The UKHCA report shows that within the Southeast region, Medway is the 2nd lowest paying Authority with Kent being 3rd Highest paying authority. This impacts on providers ability to recruit and retain staff with care workers migrating to work in areas of Kent for higher rates of pay.

- 9.1.5. Whilst Medway Council's fee uplift this year was a significant, the overall rate for homecare is still low compared to other local authorities in the southeast. Intelligence received this financial year suggests Medway Council is the lowest paying local authority in the Southeast by £1.68 per hour.
- 9.1.6. Whilst efforts will be made to increase the rate paid for services as part of this procurement process, it is intended that a price cap will be applied to tender submissions giving consideration to budgetary constraints and to manage financial impacts.
- 9.1.7. Medway has seen a number of new providers enter the market in the last two years. Despite this, this is unlikely to generate an increase in total capacity. The main reason for this is that the domiciliary care sector typically employs a transient workforce, meaning the workforce will become more thinly distributed amongst providers, rather than lead to a net increase in the number of care workers.
- 9.1.8. There has been a national issue around the recruitment and retention of care staff. Care roles require skills and formal training and are subject to regulatory scrutiny. Other industries such as finance, hospitality and retail are offering higher rates of pay with less responsibilities and more favourable working conditions. This has seen a high turn over of staff and difficulties in recruiting staff. However, with support and monitoring Medway's Homecare sector has stabilised and has become buoyant again.
- 9.2. Procurement Options
- 9.2.1. The following is a detailed list of options considered and analysed for this report for Homecare and Extra Care:

Option 1 – Do nothing:

9.2.2. The current contracts will expire 31 March 2024 after which there will be no contractual arrangement for the provision of homecare services if this procurement is not taken forward.

Advantage: Continue to collate activity/finance data to inform the design of an improved service in the future.

Disadvantage: Medway Council will become reliant on 'spot purchasing' services which would likely make homecare services markedly more expensive to purchase and would result in bottlenecks in care delivery creating inefficiencies in the system

Option 2– Utilise an existing framework:

9.2.3. There is no current open framework that meets the requirements of the Homecare and extra care service.

Option 3 – Open market procurement:

9.2.4. Commission a new homecare and Extra Care service in line with the Public Contracts Regulations 2015 (PCRs).Medway Council to Commission a new homecare framework called 'The Support to Live At Home Service' in time for the expiration of the current framework agreements. The service will remain as is, with no break in service and will be commissioned for a four year period. Providers will be appointed to the new framework through a competitive tender process.

Advantages:

- Legally compliant service
- Can meet service demands large scale service with over 1000 people receiving care.
- Consolidation of supplier base leading to greater efficiency in service delivery and contract management.
- Current service model supports the integration of health and social care services.
- Encourages integrated working and sharing of expertise.
- Develops standardise processes.
- Provides fair allocation of packages of care.
- Competitive pricing

Disadvantages

- Bidders need to invest time and costs to submit a tender, this could potentially discourage providers from applying reducing the number of providers that are awarded to the framework.
- Potential for Provider monopoly should fewer care organisations tender for the framework contracts.
- 9.3. Procurement Process Proposed
- 9.3.1. Option 3 is the preferred route. This ensures the best result for Medway Council and the residents of Medway in terms of quality and value for money.
- 9.3.2. It is recommended that the contract length be a 4 year term.
- 9.4. Evaluation Criteria
- 9.4.1. The award of the contract will be made on the basis of the most economically advantageous tender comprised of 70% quality and 30% price.
- 9.4.2. Evaluation criteria will include an assessment of the suitability and capability of providers to deliver the service as well as their understanding of the service as set out in the specification of requirements.

10. Risk Management

10.1. Risk Categorisation

Risk Description	Risk Category	Likelihood	Impact	Plans to Mitigate
Suppliers may bid at a high price meaning the cost of the service increases significantly, or may decide not to bid due to price caps placed on tenders	Financial	В	2	Price caps will be put in place as part of the tendering process. These caps will be guided by information from other local authorities and intelligence relating to the true cost of care, however ultimately these will be determined by Medway Council budgets. Robust financial review of tender submissions will be undertaken and prices will be discussed at contract management meetings.
Failure to attract sufficient successful bids	Procurement	E	2	The provider market will be kept informed of the Council's commissioning intentions and timelines. There will be a consultation period and market engagement event for providers to capture their input and address any concerns they may have about the procurement.
Provider fails to fulfil contractual obligations	Contract Delivery	С	2	Commissioners will work in partnership with providers to ensure early identification of issues. Contract management will be robust and performance reviews will be conducted regularly. Other stakeholders including social workers and the Business & Intelligence Team will support the management of the service.

Risk Description	Risk Category	Likelihood	Impact	Plans to Mitigate
Unsuccessful bidders slowing down the process by challenging award decision	Legal	E	2	Robust procurement process in line with best practice and Public Contracts Regulations 2015
The service fails to deliver the quality outcomes set, therefore affecting community and stakeholder perception of the Council	Reputational	E	3	Regular contract management and performance reviews

For risk rating, please refer to the following table (please **retain** table in final report):

Likelihood	Impact:
A Very high B High C Significant D Low E Very low F Almost impossible	1 Catastrophic (Showstopper) 2 Critical 3 Marginal 4 Negligible

11. Consultation

- 11.1. Internal (Medway) Stakeholder Consultation
- 11.1.1. A project group has been established to review current processes and to further develop the outline service specification. This includes Adult Social Care, Partnership Commissioning, Systems, Business & Intelligence, Public Health, Quality Assurance, Brokerage, Client Financial Affairs, Legal and Category Management. Data is drawn from Acute, brokerage and the IDT.
- 11.2. External Stakeholder Consultation
- 11.2.1. Medway Council continuously consults with providers regarding the current service. This takes place through individual provider meetings and the Provider Forum held bi-monthly.
- 11.2.2. A market engagement event will be held during July. This engagement will be an opportunity for providers to freely discuss rates and service model. This engagement will be an opportunity for providers to engage with commissioners to develop the service specifications and working arrangements.
- 11.2.3. It will be necessary to consult with tenants and Providers of care in the five Extra Care schemes. Tenants will be informed of the potential for change to the on-site care provider as part of the service user engagement activity. Communications will actively seek tenants to feed into this process, which in turn will help inform the process to identify the future provider of on-site care.
- 12. Service Implications
- 12.1. Financial Implications
- 12.1.1. The procurement requirement and its associated delivery as per the recommendations at Section 10, will be funded from existing Adult Social Care revenue budgets.
- 12.1.2. Annual spend on commissioned Homecare is forecast to be £12.5 million for 2023/24. Annual uplifts will need to be agreed by full council each year and will be dependent on funding availability during the budget setting process.
- 12.2. Legal Implications
- 12.2.1. This is a level 4 high-risk category B procurement and therefore the decision to award is for Cabinet. Level 4 (High Risk) Procurement Process are prescribed by the Monitoring Officer, in consultation with the Procurement Board with recommendations for the decision-making associated with the initial Gateway 1 Report and subsequent Gateway 3, 4 and 5 Reports being made to the Cabinet.

- 12.2.2. It is likely that bespoke terms and conditions will be required for this procurement, Legal Services will be involved in the Project Group in order to advise on the requirements and draft an appropriate contract or framework agreement to be issued with the ITT.
- 12.2.3. The Public Services (Social Value) Act 2012 gives the Council a statutory duty to consider at the pre-procurement stage of any service contract How what is proposed to be procured may improve the economic, social and environmental well-being of their areas. How the Council may act with a view to securing that improvement in conducting the process of procurement.
- 12.2.4. The Act applies to all services contracts and service framework agreements to which the Public Contracts Regulations 2015 apply.
- 12.3. TUPE Implications
- 12.3.1. TUPE is likely to apply to this procurement process, in particular in relation to the provision of Extra Care services. Information regarding affected staff will be obtained from the existing providers and issued with the tender documents.
- 12.4. Procurement Implications
- 12.4.1. To be able to maintain the benefits provided by the Category Management team and to ensure that the costs are appropriately distributed.
- 12.5. ICT Implications
- 12.5.1. ICT implications are explored within the main body of this report.
- 13. Other Considerations
- 13.1. Diversity & Equality
- 13.1.1. Providers' diversity and equality policies and procedures will be reviewed to ensure that they meet necessary requirements.
- 13.1.2. Additionally, Commissioners will work with appointed providers to achieve conformity to Medway Council's Equality and Diversity Strategy and Safeguarding Children & Vulnerable Adults Procedures
- 13.2. Social & Economic Considerations
- 13.2.1. The Public Services (Social Value Act) 2012 requires all public bodies to consider how the services they commission might improve the economic, social and environmental wellbeing of the area. As part of this procurement, social value themes, outcomes and measures will be set out in the service specification and tender documents. Provider

commitments will be captured in tender responses and verified through performance monitoring.

- 13.3. Environmental Considerations
- 13.3.1. During the tender stage climate change topics will be asked of the providers. We will require evidence of how they deal with single use plastic, their efforts to reduce their carbon footprint, waste management and air quality measures.
- 14. Recommendation
- 14.1. The Cabinet is recommended to approve commencement of the procurement of the Support to Live at Home Service using Option 3, Open Market Procurement, as set out in paragraph 9.2.4 of the report.
- 15. Suggested Reasons for Decision
- 15.1. The procurement of the Support To Live At Home Service will deliver a Homecare and extra care service that will enable the following:
 - **High Quality –** enhanced service for Medway residents.
 - **Outcomes Focused Care** to ensure the care received meets the service users' desired outcomes.
 - **Ongoing Development** the ability to continuously develop the service, in line with innovative approaches.

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Appendices

None

Background Papers

The following documents have been relied upon in the preparation of this report:

Description of Document	Location	Date
Medway Adult Social	https://www.medway.gov.uk/downloads/file/1066	2021-
Care Strategy	/medway_adult_social_care_strategy	2025
Medway Council People	https://democracy.medway.gov.uk/mgconvert2p	2021-
Strategy	df.aspx?id=60760&nobdr=2	2025

Description of Document	Location	Date
Medway Council Joint	https://www.medway.gov.uk/downloads/file/3710	2023
Health and Wellbeing	/joint health and wellbeing strategy 2018 to	
Strategy	2023	
Medway Council Aging	https://www.medway.gov.uk/info/200591/medwa	
Well Strategy	y s joint strategic needs assessment jsna/15	
	67/enabling our older population to live inde	
	pendently and well	