

Notice of Meeting

CABINET

Tuesday, 16 April 2024 - 7:00 pm
Council Chamber, Town Hall, Barking

Members: Cllr Darren Rodwell (Chair); Cllr Saima Ashraf (Deputy Chair) and Cllr Dominic Twomey (Deputy Chair); Cllr Sade Bright, Cllr Cameron Geddes, Cllr Syed Ghani, Cllr Kashif Haroon, Cllr Jane Jones, Cllr Elizabeth Kangethe and Cllr Maureen Worby

Invited: Cllr John Dulwich (non-voting)

Date of publication: 8 April 2024

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Please note that this meeting will be webcast via the Council's website. Members of the public wishing to attend the meeting in person can sit in the public gallery on the second floor of the Town Hall, which is not covered by the webcast cameras. To view the webcast online, click [here](#) and select the relevant meeting (the weblink will be available at least 24-hours before the meeting).

AGENDA

1. Apologies for Absence

2. Declaration of Members' Interests

In accordance with the Council's Constitution, Members are asked to declare any interest they may have in any matter which is to be considered at this meeting.

3. Minutes - To confirm as correct the minutes of the meeting held on 19 March 2024 (Pages 3 - 8)

4. Contract for the Provision of a Domestic Abuse Victim/ Survivor Support Service (Pages 9 - 24)

5. Provision of Children's Residential Care Homes and Independent Foster Care Agency Services (Pages 25 - 70)

6. **Procurement of Reablement At Home Service (Pages 71 - 110)**
7. **Travelodge Hotel, Yew Tree Avenue, Dagenham - Development Agreement (Pages 111 - 122)**

Appendix 1 to the report is exempt from publication as it contains commercially confidential information (exempt under paragraph 3, Part 1, Schedule 12A of the Local Government Act 1972 (as amended)).

8. **Any other public items which the Chair decides are urgent**
9. **To consider whether it would be appropriate to pass a resolution to exclude the public and press from the remainder of the meeting due to the nature of the business to be transacted.**

Private Business

The public and press have a legal right to attend / observe Council meetings such as the Cabinet, except where business is confidential or certain other sensitive information is to be discussed. Item 7 above includes an appendix which is exempt from publication, as described. ***There are no other such items at the time of preparing this agenda.***

10. **Any other confidential or exempt items which the Chair decides are urgent**

Our Vision for Barking and Dagenham

**ONE BOROUGH; ONE COMMUNITY;
NO-ONE LEFT BEHIND**

Our Priorities

- Residents are supported during the current Cost-of-Living Crisis;
- Residents are safe, protected, and supported at their most vulnerable;
- Residents live healthier, happier, independent lives for longer;
- Residents prosper from good education, skills development, and secure employment;
- Residents benefit from inclusive growth and regeneration;
- Residents live in, and play their part in creating, safer, cleaner, and greener neighbourhoods;
- Residents live in good housing and avoid becoming homeless.

To support the delivery of these priorities, the Council will:

- Work in partnership;
- Engage and facilitate co-production;
- Be evidence-led and data driven;
- Focus on prevention and early intervention;
- Provide value for money;
- Be strengths-based;
- Strengthen risk management and compliance;
- Adopt a “Health in all policies” approach.

The Council has also established the following three objectives that will underpin its approach to equality, diversity, equity and inclusion:

- Addressing structural inequality: activity aimed at addressing inequalities related to the wider determinants of health and wellbeing, including unemployment, debt, and safety;
- Providing leadership in the community: activity related to community leadership, including faith, cohesion and integration; building awareness within the community throughout programme of equalities events;
- Fair and transparent services: activity aimed at addressing workforce issues related to leadership, recruitment, retention, and staff experience; organisational policies and processes including use of Equality Impact Assessments, commissioning practices and approach to social value.

MINUTES OF CABINET

Tuesday, 19 March 2024
(7:01 - 7:56 pm)

Present: Cllr Darren Rodwell (Chair), Cllr Dominic Twomey (Deputy Chair), Cllr Sade Bright, Cllr Cameron Geddes, Cllr Syed Ghani, Cllr Kashif Haroon, Cllr Jane Jones, Cllr Elizabeth Kangethe and Cllr Maureen Worby;

Apologies: Cllr Saima Ashraf and Cllr John Dulwich

95. Declaration of Members' Interests

There were no declarations of interest.

96. Minutes (19 February 2024)

The minutes of the meeting held on 19 February 2024 were confirmed as correct.

97. Revenue Budget Monitoring 2023/24 (Period 10, January 2024) and Q3 Capital Programme Update

The Cabinet Member for Finance, Growth and Core Services introduced the Council's revenue budget monitoring report for the 2023/24 financial year as of 31 January 2024 (period 10) and the quarter 3 Capital Programme update.

The Council's General Fund revised revenue budget for 2023/24 was £194.46m and the forecast outturn position at the end of January projected a net overspend of £6.016m after transfers to and from reserves, which represented a significant improvement of £3.32m on the position reported for period 9. The Cabinet Member commented on the main reasons behind the improved position and the key organisational risks which could still affect the end-of-year position, as well as the projected impact on reserves in order to achieve a balanced budget position at the year end.

Reflecting on the past year, the Cabinet Member remarked on the considerable work that had been undertaken to minimise the level of overspend, which had been projected as high as £14.579m in the period 4 report, and reiterated his call on the Government to properly fund the local government sector to protect social care and other essential services.

The Housing Revenue Account (HRA) showed a projected overspend of circa £5.396m for 2023/24, up from £5.005m at period 9, and it was noted that any end-of-year deficit would be met via a drawdown from the current HRA reserve of £18.4m.

The 2023/24 Capital Programme showed a project end-of-year spend of £361.832m against the revised budget of £339.042m.

Cabinet **resolved** to:

- (i) Note the projected £6.016m revenue overspend forecast at Period 10 for the General Fund for the 2023/24 financial year, as set out in sections 2 and 3 and Appendix A of the report, and the net projected year end drawdown of £2.366m reserves to support the in-year position;
- (ii) Note the projected £5.396m revenue overspend forecast for the Housing Revenue Account, as set out in section 6 and Appendix A of the report;
- (iii) Note the projected returns for the Investment and Acquisition Strategy as set out in section 4 and Appendix A of the report;
- (iv) Note the movement in Reserve drawdown as indicated in section 5 of the report and that the Cabinet shall be asked to approve the drawdown of reserves to support any overspends at final outturn (post March 2024), subject to finalisation of the actual spend against budget; and
- (v) Note the Q3 Capital Monitoring update as set out in section 7 and Appendix B of the report.

98. Allocation of Strategic CIL for Uber Boat Thames Clipper Services

The Cabinet Member for Regeneration and Economic Development presented a report on an application from Barking Riverside Limited (BRL) for funding via the Council's Strategic Community Infrastructure Levy (SCIL) to support extended Thames Clipper Uber Boat services at Barking Riverside.

By Minute 51 (17 October 2023), the Cabinet had approved revised arrangements for the allocation of SCIL and other planning-related funding aimed at supporting the delivery of new infrastructure as part of the Council's growth agenda. The Cabinet Member confirmed that the application from BRL fully met that criteria and would extend the current peak-time only weekday and all-day weekend service to also provide an all-day weekday service. The extended service would provide an improved service for Borough residents, help to boost visitor numbers and enhance local business trading conditions, while the proposed three-year funding arrangement, which would be matched by BRL and other parties, would enable an all-day service at Barking Riverside to become commercially viable, without subsidy, going forward.

Cabinet **resolved** to:

- (i) Support the proposal for £450,000 to be allocated over three years to part-fund extended services for Uber Boat by Thames Clipper (UBTC) services at Barking Riverside;
- (ii) Note the proposed draft letter of support to BRL setting out the in-principle allocation of the funding, conditional on remaining funding being found by BRL;
- (iii) Delegate authority to the Strategic Director, Inclusive Growth to take any steps necessary to ensure compliance with the Subsidy Control Act 2022; and

- (iv) Delegate authority to the Strategic Director, Inclusive Growth, in consultation with the Head of Legal, to execute all agreements, contracts and other documents on behalf of the Council in order to implement the allocation of SCIL funding.

99. Procurement of 0-19 Integrated Healthy Child Programme Contract

The Cabinet Member for Adult Social Care and Health Integration introduced a report on the proposed procurement of a new integrated 0-19 Healthy Child Programme (HCP) service, to commence from 1 January 2025.

It was noted that the HCP brought together health, education and other main partners to deliver an effective programme of prevention and support for the Borough's children and young people. The main elements of the programme related to health visiting, school nursing and the national Child Measurement Programme and aligned with the Council's 'Best Chance in Life' priorities as well as other existing initiatives, facilities and programmes operating in the Borough.

Cabinet **resolved** to:

- (i) Agree that the Council proceeds with the procurement of a contract for the provision of a 0-19 Healthy Child Programme (Health Visiting, School Nursing and National Child Weight Measurement Programme) in accordance with the strategy set out in the report; and
- (ii) Delegate authority to the Strategic Director for Children and Adults, in consultation with the Cabinet Member for Adult Social Care and Health Integration, the Strategic Director, Resources and the Head of Legal, to conduct the procurement and award and enter into the contract and all other necessary or ancillary agreements, including periods of extension, to fully implement and effect the proposals.

100. Procurement of Specialist Intervention Service (SIS) Family Contact Services

The Cabinet Member for Children's Social Care and Disabilities introduced a report on proposals to procure a new four-year Framework Agreement for the provision of Family Contact services, commencing 1 September 2024.

The Cabinet Member explained that the Council had a duty under section 34 of the Children Act 1989 to make arrangements for children in its care to have reasonable contact with their parents and 'other persons', as prescribed within the Act. The service was led by the Council's in-house Specialist Intervention Service (SIS) Family Time Family Contact Team who used a mixed model of in-house delivery supported by externally commissioned accredited Family Contact providers via a Framework Agreement. The current 'call off contracts' in place with providers would be extended until 31 August 2024 to provide sufficient time to complete the procurement of the new Framework.

Cabinet **resolved** to:

- (i) Agree that the Council proceeds with the establishment of a four-year framework contract for the provision of SIS Family Contact Services and

invite providers to apply to be on the Framework, in accordance with the strategy set out in the report;

- (ii) Agree that the Council enters into two new 'call off contracts' under the current framework for a period of two years;
- (iii) Approve a new waiver under paragraph 35.5 (g) of the Council's Contract Rules (for below-threshold contracts), to extend contracts for three providers (on the preferred providers list) for the three-month period 1 June to 31 August 2024; and
- (iv) Delegate authority to the Strategic Director, Children and Adults, in consultation with the Cabinet Member for Children's Social Care and Disabilities and the Head of Legal, to award and enter into the access agreement and all other ancillary call-off agreements upon conclusion of the procurement process as appropriate.

101. Woodward Road and 12 Thames Road - Approval of Disposals, Head Lease and Loan Facility Agreement

Further to Minute 90 (19 February 2024), the Cabinet Member for Regeneration and Economic Development introduced a report on proposals to progress the disposal of a further 212 new homes built at the Woodward Road and 12 Thames Road redevelopment projects.

The Cabinet Member advised that, as with previous reports, the properties would be disposed of by way of long leases and associated loans to the Barking and Dagenham Reside Regeneration Ltd (Reside) or Barking and Dagenham Homes Ltd (BDHL) structure of companies following practical completion over the coming months.

The Cabinet Member also referred to the intention to apply a service charge to all new London Affordable Rent (LAR) properties and to existing Reside LAR properties (as they came up for renewal), following the decisions by Cabinet to apply a service charge to LAR properties at the Beam Park and Gascoigne East Phase 3B developments (Minutes 34 and 35, 19 September 2023 refer).

Cabinet **resolved** to:

- (i) Approve, in principle, the disposal of the New Build schemes below by the granting of long leases to the to the appropriate Reside or BDHL entity identified in the report;

Woodward Road

- Flat 1 - Flat 4, 1 Centenary Road, Dagenham, RM9 4DA
- Flat 1 - Flat 4, 2 Centenary Road, Dagenham, RM9 4DA
- 1, 3 - 14, 16, 18, 20, 22, 24, 26 and 28 Centenary Road, Dagenham, RM9 4DA
- Flat 1 - Flat 19, 22 Centenary Road, Dagenham, RM9 4DA
- Flat 1 - Flat 11, 28 Centenary Road, Dagenham, RM9 4DA

12 Thames Road

- Flat 1 - 87 Woolmore Court, Thames Road
 - Flat 1 - 35 Blackaby Court, Crossness Road
 - Flat 1 - 24, Fewell Court, Crossness Road
- (ii) Approve, in principle, the indicative draft Heads of Terms for leases and loans for the Woodward Road and 12 Thames Road developments to the appropriate Reside or BDHL entity, as set out in section 2 of the report;
- (iii) Delegate authority to the Strategic Director, Resources to agree and finalise the terms of the loans, leases and any other associated documents, and to take any steps necessary to ensure compliance with s123 of the Local Government Act 1972 and the Subsidy Control Act 2022 provided that such action does not materially affect the approvals granted by Cabinet;
- (iv) Delegate authority to the Head of Legal, in consultation with the Strategic Director, Resources, to execute all agreements, contracts and other documents on behalf of the Council in order to implement the arrangements; and
- (v) Approve the application of a service charge to all new London Affordable Rent (LAR) properties and to existing Reside LAR properties as they came up for renewal.

102. Debt Management Performance 2023/24 (Quarter 3)

The Cabinet Member for Finance, Growth and Core Services presented the latest debt management performance report covering the third quarter of the 2023/24 financial year.

The Cabinet Member referred to the main highlights within the report which showed that overall collection rates had increased by 7% on last year (equivalent to an additional £21.6m of income). The Cabinet Member stressed the importance of maximising collection of both in-year and older debts in order for the Council to continue to provide much needed services to the local community, whilst also acknowledging the difficulties that many faced as a consequence of the Government's mishandling of the economy which had led to the cost-of-living crisis.

Cabinet **resolved** to note the performance of the debt management function carried out by the Council's Collection service, including the improvements in collection in some areas and the challenges in others.

103. Direct Award of Social Care Case Management System Contract

The Cabinet Member for Adult Social Care and Health Integration introduced a report on proposals to directly award a contract for an initial five-year term, with an option to extend by a further two years, for the Liquid Logic IT system from System C.

The Cabinet Member advised that the Liquid Logic system was a key business application for both Adults and Children's Social Care with a reach extending into

other Council service areas and external agencies, such as Schools, NHS Trusts and the Police. The system was also used by neighbouring local authorities, thereby enabling smoother data sharing in order to protect vulnerable people, and in view of those synergies and the financial and resource implications associated with going out to full tender, the preferred option was to directly award a new contract to System C.

Cabinet **resolved** to:

- (i) Agree that the Council proceeds with the direct award of a contract for an initial five-year term, with an option to extend by a further two years, for the Liquid Logic System from System C in accordance with the strategy set out in the report; and
- (ii) Authorise the Strategic Director, Children and Adults, in consultation with the Cabinet Member for Adult Social Care and Health Integration, the Strategic Director, Resources and the Head of Legal, to award and enter into the contract(s) and all other necessary or ancillary agreements to fully implement and effect the proposals including any periods of extension.

104. Death of Councillor Steve Curran, former Leader of Hounslow Council

The Chair paid tribute to Councillor Steve Curran, former Leader of Hounslow Council, who sadly passed away on 18 March 2024 following a long illness.

The Chair spoke on his personal friendship with Mr Curran and extended the Council's condolences to Mr Curran's family and friends.

105. James Coulstock, Interim Strategic Director, Inclusive Growth

The Chair placed on record the Council's appreciation to James Coulstock, Interim Strategic Director, Inclusive Growth, who was attending his last meeting of the Cabinet before taking up an appointment at Swindon Council.

The Chair referred to the significant contribution that James had made during his time as Interim Strategic Director and in his previous role as Be First's Deputy Chief Planning Officer and extended the Council's very best wishes for the future. Several other Members also gave their own personal tributes to Mr Coulstock for his advice, dedication and support throughout his time in Barking and Dagenham

106. Lesley Burke, Leader's PA

The Chair also paid tribute to Lesley Burke, Personal Assistant to the Leader, who was leaving the Council later in the week and he extended the Council's very best wishes in her retirement.

CABINET**16 April 2024**

Title: Contract for the Provision of a Domestic Abuse Victim / Survivor Support Service	
Report of the Cabinet Member for Adult Social Care and Health Integration	
Open Report	For Decision
Wards Affected: All	Key Decision: No
Report Author: Amisha Maisuria – Commissioning Manager	Contact Details: Tel: 0208 227 3529 E-mail: amisha.maisuria@lbbd.gov.uk
Accountable Director: Chris Bush, Commissioning Director, Care and Support	
Accountable Executive Team Director: Elaine Allegretti, Strategic Director, Children and Adults	
<p>Summary:</p> <p>The Council currently commissions a Domestic and Sexual Violence, Victims Support Service. The contract was initially awarded 1st October 2019, with an initial contract term of three (3) years, with the option to extend for a further two (2) years. The current contract is due to expire, and we are seeking to recommission the service to ensure the Council is meeting its statutory obligations under the Domestic Abuse Act 2021. In addition, through the delivery of this service, we will be providing support to our most vulnerable residents.</p> <p>The delivery of this service will contribute towards a number of the priorities within the boroughs manifesto, and the delivery of this service will mean that victim/ survivors of domestic abuse are better supported and contribute towards the prevention of repeat victimisation. Victims are supported to flee their abusers and safety planning is undertaken with our vulnerable residents.</p> <p>This report seeks permission to procure and award a new contract for delivering an outcomes-based domestic and sexual violence support service due to the approaching expiry of the existing contract which ends on 30th September 2024.</p>	
<p>Recommendation(s)</p> <p>The Cabinet is recommended to:</p> <ul style="list-style-type: none"> (i) Agree that the Council proceeds with the procurement of a contract for a Domestic Abuse Victim / Survivor Support Service in accordance with the strategy set out in the report; and (ii) Authorise the Commissioning Director for Care and Support, in consultation with the Cabinet Member for Adult Social Care and Health Integration, the Strategic 	

Director, Resources and the Head of Legal, to conduct the procurement and award and enter into the contract(s) and all other necessary or ancillary agreements to fully implement and effect the proposals.

Reason(s)

The Council has committed to the vision of 'One borough; one community; No one Left Behind'. The Borough Manifesto and corporate plans sets domestic violence as a clear priority and the developing Health and Wellbeing Strategy puts forwards the need to work closely with and for our residents to tackle violence and abuse. It is a council priority that residents are safe, protected, and supported at their most vulnerable, the delivery of the Domestic Abuse Victim/ Survivor Support Service will contribute to keeping residents safe and protected at their most vulnerable.

1. Introduction and Background

1.1 Council we have a shared vision and are dedicated to keeping our residents safe by tackling Violence Against Women and Girls, this vision has been further embedded into the borough manifesto and Strategic policies and practice. Recognising and responding to VAWG is a responsibility shared by all professionals and partner organisations; be it health providers, Law enforcement, employers, family and friends. Within Barking and Dagenham, we wish to continue our journey in supporting vulnerable residents who have been impacted by domestic abuse and help them in their recovery to build their lives and 'live free from violence and abuse'.

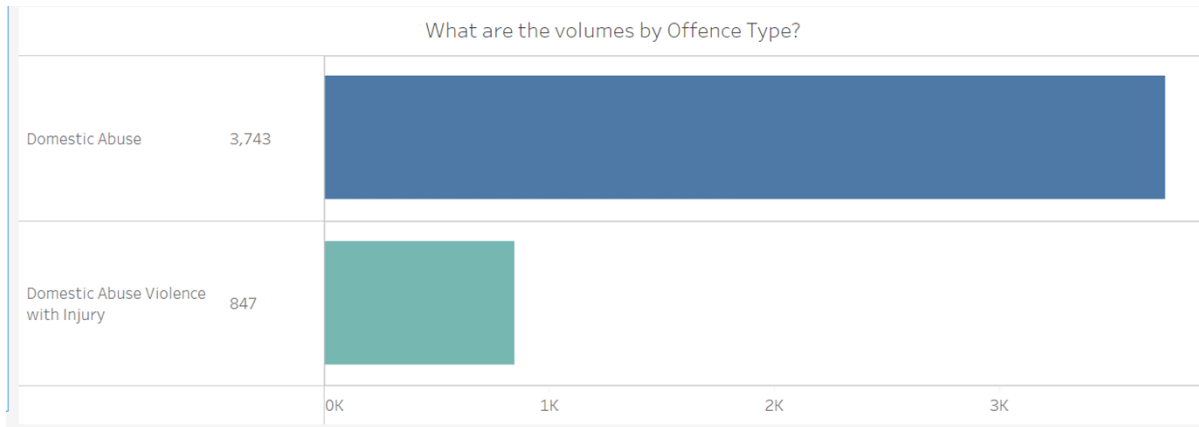
"We need to build systems and services which can change the directions of people's lives for the better – preventing the big issues of poverty, unemployment, debt, health inequalities, poor housing, and domestic abuse from determining the lives led by our residents".

1.2 Preventing violence and abuse in the first instance will have a substantial impact on the overall prevalence of these crimes. It is of utmost importance, that from a young age children and young people are informed about healthy relationships and are challenged about negative views that they may hold. Within Barking and Dagenham, are committed to ensuring young people are making informed choices and are aware of: healthy relationships. It is our priority that residents are safe and protected at their most vulnerable.

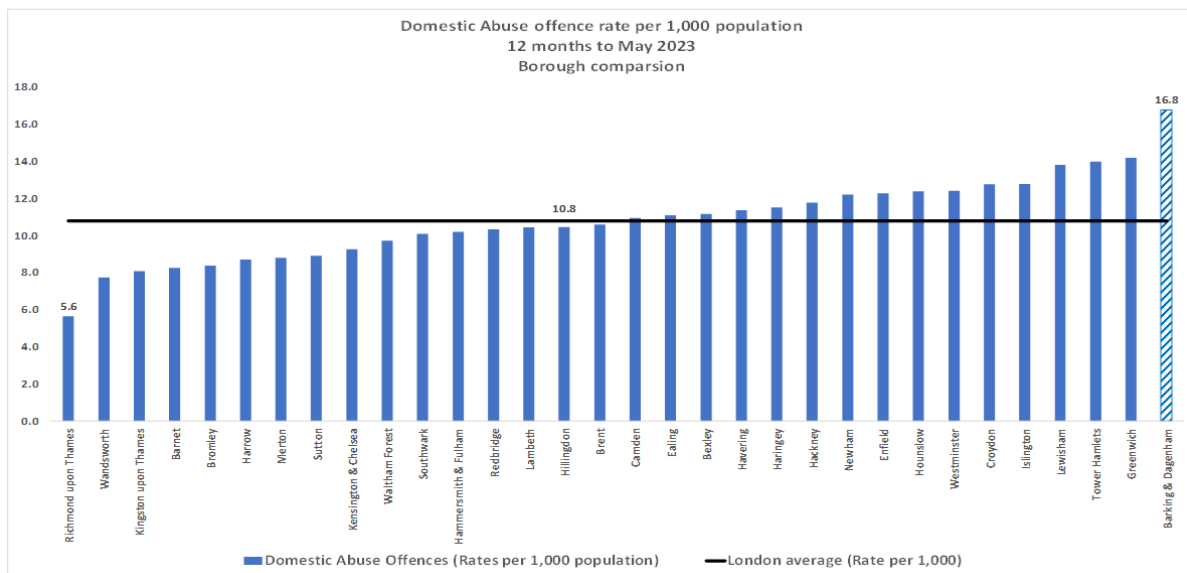
1.3 It is estimated that domestic abuse affects 2.3 million people each year, with women more disproportionately affected than men, due to the gendered nature of this crime. Around one fifth of all homicides where the victim is an adult female are domestic homicides, however, this figure does not include the number of suicides due to domestic abuse.

1.4 Domestic abuse is a significant issue within Barking and Dagenham, reported instances of domestic abuse are the highest in London per 1,000 of the population. Domestic Abuse features in a large proportion of all open social care cases, having an enormous impact on children and young people who following on from the Domestic Abuse Act 2021, are considered victims in their own right.

1.5 Barking and Dagenham has one of the highest rates of domestic abuse within the London, and still remains a high rate within the country. Although we know that most domestic abuse incidents go unreported, so the actual figure is likely to be much higher. The levels of domestic abuse in the borough have not decreased and have been relatively high for at least the last 10 years. Domestic abuse is cyclical and intergenerational, requiring work to change attitudes.



Barking & Dagenham Domestic Abuse Offences Trends by volume and rates per 1,000 population



Fiscal costs of domestic abuse within England and Wales

1.6 The Home Office has estimated that domestic abuse has an economic and social cost of around £74 billion in England and Wales each year. Costs to health services estimated to 2.3 billion and police 1.3 million. The government will be affected fiscally too with the cost of homelessness, temporary housing, housing repairs, and costs to social care, especially if a child is taken into care as a result. It is normally three years before a domestic abuse case reaches the Multi Agency Risk Assessment Conference (MARAC) for victims of domestic abuse, 27 percent of young people who witness domestic abuse will require mental health support, according to SafeLives research, taking into account the costs of mental health support, police referrals, youth crime costs, children social care and education disruption ahead of this three year point, their research estimated the potential of a £508 million cashable saving if

early, effective interventions are put in place. Each victim is estimated to cost £34,015, however, the true actual cost will be much higher.

- 1.7 Locally, the costs have been estimated to be £13.8m fiscal costs and £60m including the wider social economic costs in Barking and Dagenham. This is based on reported figures to police services, and it is important to note that only 20% of victims report to the police so these costs are likely to be much higher, especially, as we have the highest rates of domestic abuse in London, and we are in the higher quartile of London boroughs for levels of sexual violence too.
- 1.8 Through a coordinated response and providing services for victim/ survivor's children and young people at the earliest opportunity available, there is potential to reduce not only the emotional harms. But also, the fiscal costs associated with this social harm, of VAWG, and the potential of escalating costs to social care, by having to bring a child into the care of the local authority. Supporting the victim/ survivor can also enable them to rebuild their lives and increase resilience.

Procurement of the current Service

- 1.9 Following on from extensive consultation with survivors, professionals and partner agencies the LBBDD Ending Violence Against Women and Girls Strategy 2018 -2022 was formed, which highlighted a number of priorities which underpinned the commissioning intentions of the new Domestic Abuse Support service in 2019. The Domestic Abuse and Sexual Violence Victim/ Survivor Support service was commissioned within Barking and Dagenham in 2019, with the new provider Refuge commencing delivery of the service 1st October 2019. This was the first time the service was to be commissioned as a single point of access, with victims able to get support from Independent Gender Violence Advocates (IDVAs), Support for Children and young people, Sanctuary scheme, Refuge Accommodation, Young Persons Advocate, Honor Based Violence, Forced Marriage, Female Genital Mutilation, Peer Support, DA Champions, By and For Service, Schools Support and the Perpetrator Service was also to be subcontracted by the provider. All services were to be accessed via a single duty line, to be managed via a rota by the IDVAs.
- 1.10 The contract was tendered for a period of five (5) years in total, three (3) years for the initial period with a two (2) year extension, which commenced 1st October 2022. The current contract will expire 30th September 2024. It is due to the approaching expiry of this contract, that we wish to retender for this service in accordance with the Council's contract rules and relevant national legislation. Approval is sought from Procurement Board to commence this tender exercise.

2. Proposed Procurement Strategy

2.1 Outline specification of the works, goods or services being procured

- 2.1.1 This report presents a procurement strategy that will commission an outcome based domestic and sexual violence victim support service in Barking and Dagenham to commence on the 1st of October 2024, due to the approaching expiry of an existing contract.
- 2.1.2 We intend to seek a VAWG a delivery partner to provide a service which can be adapted to the changing needs of residents and fluctuating budgets. We intend to

identify a provider that will bring several additional layers to the borough, including the ability to seek out potential funding streams to strengthen sustainability within the service.

2.1.3 The provider will deliver a needs-based domestic and sexual violence service that meets national guidelines for Violence Against Women and Girls Commissioning and fulfils the Council's obligations and commitments to tackle domestic and sexual violence within the borough.

2.1.4 The provider will work in conjunction with other agencies and services to provide a coordinated response to the social issue that is VAWG. Agencies who the provider will be expected to work with will include police, perpetrator services, health, social care, early help, education, mental health, substance misuse, and other services.

2.1.5 There are several outputs that will need to be delivered including:

- A single front door with one phone number, one referral form, assessment and transfer into appropriate support.
- Trauma informed service provision for residents, victim/ survivors and their children
- Refuge Accommodation
- Independent Advocacy and 1:1 Support
- Therapeutic support (group) for adults and for children affected by domestic abuse
- Sanctuary schemes – and target hardening, making the survivors safer in their homes
- Community engagement and awareness raising, including training for staff and partners, and healthy relationship workshops offered to schools and providers working with children and young people
- Volunteering Opportunities, peer mentoring and peer support development

2.2 **Estimated Contract Value, including the value of any uplift or extension period**

2.2.1 The annual value of the service which has been agreed is £635,991, with an aggregate value over the five years (including the extension) will be £3,179,995. This funding is made up of contributions from Public Health Grant, General Fund, Housing Revenue Account, Targeted Early Help and Safer Homes.

2.3 **Duration of the contract, including any options for extension**

2.3.1 The contract will be let for a three (3) years from 1st October 2024 to 30th September 2027 with the option to extend for a further two (2) years period from 30th September 2029 the extension will be based on funding and at the sole discretion of the council.

2.4 **Is the contract subject to (a) the Public Contracts Regulations 2015 or (b) Concession Contracts Regulations 2016? If Yes to (a) and contract is for services, are the services for social, health, education or other services subject to the Light Touch Regime?**

2.4.1 This contract is subject to the (EU) Public Contracts Regulations 2015 and is subject to the Light Touch Regime. As the procurement will be undertaken under the Light Touch Regime, it will not be subject to the full rigor of the Public Contracts Regulations 2015, however, we will ensure that the procurement is open, transparent, and fair, in accordance with the council's contract rules and the PCR.

2.5 **Recommended procurement procedure and reasons for the recommendation**

2.5.1 The service will be procured in line with the Public Contract Regulations 2015 through a 'light touch regime' and line with the Councils contract rules. The Open tender opportunity will be advertised in Find a Tender, on the Council's e-tendering portal (Bravo), Contracts Finder and the Council's website.

2.5.2 Potential suppliers will be required to complete Supplier Information in addition to a tender submission document (including method statements) to ascertain suitability to deliver. An evaluation of the Tender Submission will take place once the deadline has passed for submission. To ensure that the quality of the service is satisfactory there will be a pass threshold and a minimum quality score will be set that providers must meet, to be considered for delivery. Potential suppliers may be invited to attend a clarification interview to further determine suitability and assess their ability to deliver against the specified outcomes. Overall scores will be collated and a provider who meets the thresholds and has the highest overall score will be awarded the contract following on from the mandatory Alcatel standstill period.

2.6 **The contract delivery methodology and documentation to be adopted**

2.6.1 The service will be delivered by external providers. Documentation to be adopted will be the Council's standard terms and conditions. The contracts will be monitored on a quarterly basis to ensure compliance with terms and conditions, and to confirm the provider is meeting performance targets.

2.7 **Outcomes, savings and efficiencies expected as a consequence of awarding the proposed contract**

2.7.1 There are no direct financial efficiencies as a result of awarding this contract. However, in her 2008 up-date, Walby found that domestic abuse costs public services across England and Wales £3.856 billion each year; £479 million of which was spend from local government on housing and children's social care. In 2017, it was estimated that approximately £383m is spent on housing repairs nationally, a total of 933 million was spent on emergency homelessness, when applying the 12.8% assumed homelessness due to domestic abuse, this figure equates to £119m. However, estimates are much higher, as most domestic abuse goes unreported. A study by the charity Shelter found that 40% of all homeless women stated that domestic abuse was a contributory factor to their homeless status.

2.7.2 Domestic abuse can cause persistent absenteeism, time off work due to sickness and injury, performance issues, and lost productivity, which will all result in reduced and lost earnings for women, who are also more likely to work in industries with zero-hour contracts, where they will not be paid if they do not work.

2.7.3 Within Barking and Dagenham, over 70 percent of Police Merlins (referrals) into social care are due to domestic abuse. Many of these children will be subject to

either child in need or child protection plans, with these children requiring additional support from either social care or targeted early help teams. In the event a child is unfortunately taken into care, this would be a lifetime of emotional trauma, which is unquantifiable. The fiscal costs will be high, with the average residential placement costing £4,700 per week. If a child was in care for approximately 5 years, this could amount to approximately 1.2 million, for one child was taken into care at 13 and left the placement at 18, not taking into account inflation, and potential placement changes, or a child coming into care at a younger age who may require a residential placement.

2.7.4 Domestic abuse is a complex social problem, which requires a coordinated community response, as mentioned within the Standing Together Against Domestic Abuse (STADA) paper *In Search of Excellence*. Providing support early, can reduce the harm caused by domestic abuse, potentially keeping children with the non-abusive parent, reducing the need of placements and repeat victimisation, by building resilience, and giving survivors the support when they need it at the earliest opportunity.

2.7.5 Through the delivery of this service, it is anticipated that more survivors will be supported, which may reduce the need for more costly interventions in the future.

2.8 **Criteria against which the tenderers are to be selected and contract is to be awarded**

2.8.1 The price/quality ratio upon which contracts will be awarded will be 70% quality, 20% price and 10% social value. The contract will be awarded based on value for money, and the provider who obtains the highest score from the bidders. Due to the current market, it is highly unlikely that weighting the bid more towards price will reduce the cost dramatically, as the current staffing is a large part of the cost, which will remain as TUPE will apply.

2.9 **How the procurement will address and implement the Council's Social Value policy**

2.9.1 The government recommends a minimum weighting of 10% in order to ensure contractors deliver meaningful Social Value proposals. As a part of the tender process, we will add a 10% weighting for social value proposals. Suppliers wishing to bid for works with the council will be asked to set out convincing Social Value proposals that support delivery of the Borough Manifesto goals and Corporate Plan priorities.

These strategic goals have been grouped into three priority themes which provide the context for the council's Social Value Framework. These themes are shown below with examples of the sorts of activities and outputs the policy seeks to secure under each theme:

- **Investment in local people:** tackling unemployment and, securing quality employment, work experience and apprenticeship opportunities – with additional consideration for opportunities created for those facing disadvantage in the labour market (including NEETs, care leavers, young offenders and those with learning disabilities or physical and mental health conditions);

- **Investment in the local economy:** supporting local job creation by sourcing goods and services from organisations with premises/operations based in the borough and supporting initiatives to build the capacity of local suppliers;
- **Environmental sustainability:** reducing waste and single-use plastics, promoting recycling and sustainable energy, supporting local growing initiatives and other activities to improve the local environment and air quality

Potential contractors will be required to set out a method statement and delivery plan setting out their commitments to one of the above themes and how these will be delivered, including how they will work with local partners and (where relevant) ensure compliance in their wider supply chain.

2.10 London Living Wage (LLW)

2.10.1 Potential contractors will be required to set out within method statements how they will provide the LLW for staff members, and a commitment to do so as a part of the contractual terms and conditions, will be set out at the tender stage.

2.11 How the Procurement will impact/support the Net Zero Carbon Target and Sustainability

2.11.1 We will ask potential providers how they will support and contribute towards the Council's Net Zero Carbon target. Also, what proposals they have which can reduce their carbon emissions within service delivery.

3. Options Appraisal

- 3.1 Do nothing – this is not a viable option as the Council would be in breach of its statutory duties arising from the Domestic Abuse Act 2021 and the Children Act 1989. It would also result in victim/survivors and their children not receiving the vital support that need, when they are vulnerable and at risk. The negative effects of domestic abuse are significant on victim/ survivors and their families. Over 70% of open social care cases have domestic abuse as a presenting factor. Merlin's completed by the police due to domestic abuse are high within LBB. Sexual assault incidents are high in comparison to some of the other London boroughs. Doing nothing is not a viable option and not providing a support service for victim/ survivors would have a detrimental effect on our residents.
- 3.2 Join up with other boroughs – there are currently not any procurement exercises for Domestic Abuse Victim/Survivor Support service being undertaken, which align with the current contract expiry dates. Hence, joining up with neighbouring boroughs would not be a viable option in this instance.
- 3.3 Tender the service – tendering of this service would ensure compliance with the Council's Contract rules and the Public Contracts Regulations 2015. The tender would be open to any organisation which has the experience of delivering the service and will be undertaken under the Light Touch Regime. Of the options that have been considered this is the recommended option.

4. Waiver

4.1 Not applicable.

5. Consultation

- 5.1 As part of the need to re-tender Commissioners have reviewed the current service provision and pathways. The local authority will be providing an open access, universally provided Domestic Abuse and Victim/ Survivor Support Service that will meet the need of the population.
- 5.2 Extensive consultation has been undertaken in relation to the services which are needed for victim/ survivors of domestic abuse in the borough with our residents through a series of workshops and consultations, in the development of the Violence Against Women and Girls Strategy 2018-2022 and the Domestic Abuse Commission.
- 5.3 The proposals in this report were considered and endorsed by the People and Resilience Management Group on 16 November 2023, and the Violence Against Women and Girls Strategic Group on 14 September 2023. The proposals were also endorsed by Procurement Board Subgroup on 5 February 2024 and Executive Board in March 2024.

6. Corporate Procurement

Implications completed by: Francis Parker – Senior Procurement Manager

- 6.1 The proposed Open tender route is compliant with the PCR 2015 and the Councils contract rules.
- 6.2 Officers have satisfied themselves that the proposed route to market will offer the best value for money to the Council.
- 6.3 The service will be heavily weighted for quality which is suitable for this service. There is unlikely to be much price variance between bids so quality needs to be the defining factor.

7. Financial Implications

Implications completed by: Implications completed by Amar Barot – Head of Service Finance

- 7.1 This report seeks permission to procure and award a new contract for the provision of a Domestic Abuse Victim / Survivor Support Service due to the approaching expiry of the existing contract on 30th September 2024.
- 7.2 The service has agreed funding from several streams, set out per annum as follows:

<u>Funding Stream</u>	<u>Allocation</u>
• Public Health	£272,000
• HRA	£80,800

- Safer Homes/Community Solutions £49,000
- Targeted Early Help £147,000
- Other General Fund (Commissioning) £87,700
- Total** **£636,500**

7.3 The value of the new contract would need to be contained within the total available funding.

8. Legal Implications

Implications completed by: Lauren van Arendonk, Principal Contracts and Procurement Lawyer (Acting), Law and Governance

8.1 This report seeks to approve the procurement strategy for the commissioning of domestic abuse survivor support services.

8.2 This contract is subject to the (EU) Public Contracts Regulations 2015 and is subject to the Light Touch Regime. As the procurement will be undertaken under the Light Touch Regime, it will not be subject to the full rigor of the Public Contracts Regulations 2015. However, the procurement must be conducted in accordance with the principles of procurement (reg 18 of PCR 2015) and in accordance with the council's contract rules and the PCR.

8.3 The annual value of the contract shall be £635,991, with an aggregate value over the five years (including the extension) to be £3,179,995. This funding is made up of contributions from Public Health Grant, General Fund, Housing Revenue Account, Targeted Early Help and Safer Homes. Given that grant funding may also form part of the payment terms of the contract, special terms for the payment schedule should be considered to offer the council additional protections.

8.4 Given the value of the contract, in accordance with rule 51 of the contract rules, the contract must be sealed. Legal will be onside to assist with drafting and sealing, once instructed. It is proposed that the procurement strategy herein is approved.

9. Other Implications

9.1 **Risk and Risk Management** – Potential procurement risks are highlighted below:

Issue	Likelihood	Impact Risk	Category	Mitigation
Delay in issuing the tender/ procurement exercise	Medium	Medium	Medium	Ensure procurement timelines are realistic and the tender is advertised widely
No submissions are received	Medium	Medium	Medium	There is a developed market in this area within the voluntary and community sector with organisations who specialise in delivering services to victim/ survivors
Contract award decision challenged by	Low	Medium	Medium	The procurement will be the Gold threshold under the Councils contract rules, and

unsuccessful providers				we will undertake advice and guidance from both corporate procurement and legal services throughout the process, and ensure the tender is undertaken with the fair and transparent principles under relevant legislation.
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- 9.2 **TUPE, other staffing and trade union implications** – There will be TUPE implications associated with this contract if someone other than the incumbent provider is awarded the contract. Potential bidders will be made aware of the TUPE implications of staff currently employed by the service.
- 9.3 **Corporate Policy and Equality Impact** – The Equality Impact Assessment Screening Tool has been completed for the service and is attached at Appendix 1. As a part of the tender process we will be assessing providers cultural competencies and ability to comply with the Equality Act 2010 and all protected characteristics, their understanding of intersectionality, and work with a diverse population, through method statement questions and current policies they hold as an organisation, in addition to their ability to demonstrate relevant experience.
- 9.4 **Safeguarding Adults and Children** – Over 70% of active social care cases feature domestic abuse, in addition to Merlin reports completed by the police. Domestic abuse consequences can last into adulthood. Adverse childhood experiences (ACES) can have long lasting impacts on children and young people, which can last into adulthood, including health outcomes. Domestic abuse is identified as an ACE. ACEs can lead to poor health consequences in adulthood such as diabetes, heart disease, cancer, asthma and depression. ACEs can also increase risky behaviours in young adults, such as smoking, and heavy drinking. It is estimated that 27 percent of children who witness domestic abuse will go on to develop a mental health condition, and 22 percent who display aggressive behaviours have been exposed to domestic abuse.
- Addressing ACEs and increasing the resilience of children and young people by providing them with the support they need at the earliest opportunity can improve future prospects for children and young people and increase their resilience.
- 9.5 **Health Issues** – VAWG damages health and wellbeing and is a public health issue. According to research women are twice as likely to experience poor mental health episodes if they have been subject to domestic abuse, then women who have not. Substance misuse and alcohol are increasingly shown to be present in cases where there is intimate partner violence, as the victim/ survivor seeks to self-medicate, and uses substances to cope, placing them at further risk of harm. The physical violence itself often results in injury including, broken teeth, bones, dislocated joints, there can often be life threatening and or life changing injuries as a result of the violence, including maiming, and death in some cases. The violence and abuse can also lead to increased risk of suicide for the victims.
- 9.6 **Crime and Disorder Issues** - the delivery of this service will not have a direct impact on reducing the levels of crime and anti – social behaviour, however, it will

provide the opportunity to safeguard and support victim/survivors of domestic abuse to rebuild their lives, escape violence to a refuge, advocacy, safety planning and assistance from a sanctuary scheme, whereby the victim/ survivor can be made safe in their home through specific security measures on the property.

- 9.7 **Property / Asset Issues** – there are currently two safe accommodation buildings that are a part of the service offer and the lease is provided concurrently with the contract through London and Quadrant Housing.
- 9.8 **Business Continuity / Disaster Recovery** – As a part of the procurement process, we will seek business continuity and disaster recovery plans from the potential providers. Potential providers will be asked to demonstrate how they continued to deliver services during a pandemic, such as COVID or in the event of another extreme emergency situation.

Public Background Papers Used in the Preparation of the Report: None

List of appendices:

Appendix 1 - Equality Impact Screening Tool

Equality Impact Assessment Screening Tool

Equality Impact Assessments help the Council to comply with its public sector duty under the Equality Act 2010 to have due regard to equality implications. EIAs also help services to be customer focussed, leading to improved service delivery and customer satisfaction.

The Council understands that whilst its equalities duty applies to all services, it is going to be more relevant to some decisions than others. We need to ensure that the detail of Equality Impact Assessments (EIAs) are proportionate to the impact of decisions on the equality duty, and that in some cases a full EIA is not necessary.

This tool assists services in determining whether plans and decisions will require a full EIA. It should be used on all new policies, projects, functions, staff restructuring, major development or planning applications, or when revising them.

Full guidance on the Council's duties and EIAs and the full EIA template is available at [Equality Impact Assessments](#).

Proposal/Project/Policy Title	Domestic Abuse Victim/ Survivor Support and Advocacy Service	
Service Area	Care and Support Commissioning	
Officer completing the EIA Screening Tool	Amisha Maisuria – Commissioning Manager	
Head of Service	Heather Storey – Head of Commissioning, Children's	
Date	24/11/2023	
Brief Summary of the Proposal/Project/Policy Include main aims, proposed outcomes, recommendations/ decisions sought.	The aim of the service will be to provide victim/ survivors with support and advocacy services. The service will provide a single point of access, including advocacy, refuge, sanctuary schemes (making the homes safer), Programmes of support for those who need to overcome the abuse, peer mentors, and a champions scheme, in addition to awareness raising for professionals. Working with children who have been impacted by domestic abuse.	
Protected characteristic	Impact	Description
Age	Positive impact (L)	Domestic abuse affects people of all ages, whether this is intimate partner violence, or adult child to adult parent violence. Following on from the Domestic Abuse Act 2021, children are considered as victims of violence in their own right. We will work with the provider to ensure that the service is available to all those who are suffering from domestic abuse, that wish to access. Children will also be supported by the

		service, and the expectation would be they would train staff who are able to support and work with children.
Disability	Positive impact (L)	We acknowledge women with a disability are twice as likely according to the crime survey of England and Wales to be impacted by domestic abuse, we will ensure the tender seeks the providers suitability to work with residents who may have an additional need or disability. We would be asking bidders how they would be able to support those with additional needs and disabilities.
Gender re-assignment	Positive impact (L)	Anyone who is suffering from domestic abuse in the borough will be able to access the service, should they wish to do so. We will also work with the provider to ensure that specialist 'By and For' services can be accessed where residents feel they would be better supported through them.
Marriage and civil partnership	Positive impact (L)	Marriage and Civil partnership status will not have an impact on a residents ability to access the service. We will assess potential providers and their ability to comply with the requirements of the Equality Act 2010.
Pregnancy and maternity	Positive impact (L)	Around 30% of women will experience their first incident of domestic violence during pregnancy according to safelives data. 40-60% of women experiencing domestic abuse are abused while pregnant. We would expect this programme to have a positive impact on pregnant women, because it will provide further options for them if they are experiencing domestic abuse. With Independent advocacy options, making the home safe via the sanctuary scheme, in addition, to refuge provision for those who need to flee.
Race	Positive impact (L)	Domestic Abuse cuts across all races and Barking and Dagenham is a diverse borough. The commissioning of a support service will have a positive impact on victim/ survivors of domestic abuse. We will verify the provider will be using translation services, in the event they are liaising with someone who has English as a second language. In addition to employing a diverse workforce. Within the tender process we will be asking the

		provider how they will deliver a service that meets a diverse range of people.
Religion	Positive impact (L)	Domestic abuse and sexual violence affect people from all religions. We will assess the potential providers for their ability to deliver a culturally aware and competent service. Potential providers should be able to demonstrate they can work with people from various faiths, ie providing staff with appropriate training.
Sex	Positive impact (L)	<p>Women are more likely than men to be subject to all forms of domestic abuse and sexual violence, it is a gendered crime, which needs to be acknowledged within service delivery. Data shows 1 in 4 women will experience domestic abuse at some point during their lifetime.</p> <p>Barking and Dagenham police reported rates of domestic violence show that more victims are female, and were compared males. We would therefore expect the programme to have a positive impact on female domestic abuse victims as they are disproportionately affected by domestic abuse, which is backed up by national evidence.</p> <p>The programme would be open to both genders, but we would expect that more female victim/ survivors to access support through the services.</p>
Sexual orientation	Positive impact (L)	<p>Evidence shows that domestic abuse is higher in same-sex relationships than the wider population. Stonewall research show that one in four lesbian and bi women have experienced domestic abuse in a relationship. Two thirds say the perpetrator was a woman, and a third a man. Almost half (49%) of all gay and bi men have experienced at least one incident of domestic abuse. The programme would be open to all, and therefore would have benefits to LGBT individuals.</p> <p>People should be able to access the DA survivor support services regardless of their sexual orientation, we will seek previous experience from the provider of working with people who have a range of protected characteristics and intersectionality. We will request the service provider secures training for all staff members.</p>

Socio-Economic Disadvantage¹	Positive impact (L)	Domestic abuse affects people from all classes and socio-economic backgrounds within society. As a borough we have high levels of domestic abuse rates within the borough and multiple levels of deprivation, this service is vital support for a number of residents.
How visible is this service/policy/project/proposal to the general public?		Medium visibility to the general public (M)
What is the potential risk to the Council's reputation? Consider the following impacts – legal, financial, political, media, public perception etc		Medium risk to reputation (M)

If your answers are mostly H and/or M = **Full EIA to be completed**

If after completing the EIA screening process you determine that a full EIA is not relevant for this service/function/policy/project you must provide explanation and evidence below.

From the EIA Screening tool, a full EIA does not need to be completed as the provision of this service has positive impacts across all protected characteristics. Through the tender process we will ensure providers can demonstrate their ability to work with those who have protected characteristics under the Equality Act 2010, and their compliance. In addition, to their ability to work with those who have a range of intersectionality's.

Please submit the form to CE-strategy@lbbd.gov.uk and include the above explanation as part of the equalities comments on any subsequent related report.

¹ Socio-Economic Disadvantage is not a protected characteristic under the Equality Act. London Borough of Barking and Dagenham has chosen to include Socio-Economic Disadvantage as best practice.

CABINET**16 April 2024**

Title: Provision of Children’s Residential Care Homes and Independent Foster Care Agency Services	
Report of the Cabinet Member for Children’s Social Care and Disabilities	
Open Report	For Decision
Wards Affected: All	Key Decision: No
Report Author: Claudia Wakefield, Commissioning Manager	Contact Details: Tel: 020 8227 5276 E-mail: claudia.wakefield@lbbd.gov.uk
Accountable Director: April Bald, Operational Director, Children’s Care and Support	
Accountable Executive Team Director: Elaine Allegretti, Strategic Director, Children and Adults	
<p>Summary:</p> <p>This report seeks the authority for the London Borough of Barking and Dagenham (LBBB) to join and access the London Borough of Newham’s Dynamic Purchasing System (DPS), which will provide access to a pool of pre-approved providers of Children’s Residential Care Homes and Independent Foster Care Agencies. The aim of the DPS is to source placements that best meet the individual needs of our looked-after children and young people, acknowledging that these needs are often ongoing.</p> <p>The Agreement will commence on the 1 April 2024 for an initial one year and eleven-month period (23 months) until 8 March 2026. This initial period will allow LBBB to evaluate if this DPS meets the needs of our children and young people. If successful, we will have the option to request to continue with this arrangement for a further four (4) years from March 2026 until March 2030.</p> <p>Access to the DPS will ensure a pool of good quality pre-approved providers, which meets the needs of our looked-after children and young people aged 0-18 (up to a maximum age of 25), represents value for money and is compliant with Public Contract Regulations (PCR 2015). The DPS will also enable LBBB to meet its strategic priorities, as underpinned in the Corporate Plan, Corporate Parenting Plan, the Looked After Children Sufficiency Strategy and our CARES Practice Standards.</p>	
Recommendation(s)	
The Cabinet is recommended to:	
(i) Approve the entering into of an Access Agreement with the London Borough of Newham and call-off from Newham’s Dynamic Purchasing Vehicle (DPS) in respect of the provision of Children’s Residential Care Homes and Independent	

Foster Care Agency Services, in accordance with the Council's Contract Rules and the strategy detailed in the report; and

- (ii) Delegate authority to the Strategic Director, Children and Adults, in consultation with the Cabinet Member for Children's Social Care and Disabilities, the Strategic Director, Resources and the Head of Legal, to award and enter into the Access Agreement and all other necessary or ancillary agreements to fully implement and effect the proposals.

Reason(s)

- To support the Council's vision to "protect the most vulnerable, keeping adults and children healthy and safe";
- To provide an appropriate, best-value service that delivers excellent outcomes for children and young people; and
- To help relieve budget pressures by ensuring the best value for money options are available to the Nominated Officer when seeking to place a young person.

1. Introduction and Background

- 1.1 Section 22G of the Children Act 1989 requires Local Authorities to secure sufficient accommodation for Looked After Children (LAC) that meets their needs and is within the local area wherever this is reasonably practicable. The Council has a statutory duty to ensure that there is sufficient, good quality, and safe provision for the children in its care. This provision should represent value for money and be sourced in compliance with the Public Contracts Regulations 2015 (PCR 2015), and the Council's Contract Rules to ensure best value for both the children and the Council.
- 1.2 The Council's belief is that children are best cared for within their families wherever this can be safely achieved, and that investing in services that are able to promote change in families can be more effective than removing children and placing them in alternative care.
- 1.3 Where children cannot remain safely with their families, the London Borough of Barking and Dagenham seeks to provide suitably matched high-quality homes, preferably within family settings such as foster care and as near as possible to the child's home locality to maintain links with their families and communities. The aim is for children to be in care for the shortest time possible and to achieve a sustainable exit from care that meets all of their needs.
- 1.4 In order to ensure access to a range of high-quality and flexible provision that seeks to deliver excellent outcomes for our children and young people, particularly in light of increasing national demand for placements exacerbated by the Covid-19 pandemic, and increased difficulty in finding placements for children and young people with complex and challenging needs, this report is requesting permission from the Cabinet for the London Borough of Barking and Dagenham to enter into an Access Agreement with the London Borough of Newham (LBN) and Call-Off from the LBN Dynamic Purchasing Vehicle (DPS) for the following services:
- Children's Residential Homes; and

- Independent Foster Care Agencies.

- 1.5 Independent Foster Care Agencies provide foster carers to local authorities where there is insufficient in-house provision, or where the needs of the child are more specialist and require either a home at a distance or with specialist support. Foster carers are able to provide temporary and long-term care for children and young people in a family home-style environment, where they are not able to live with their own natural families. In Barking and Dagenham, Independent Fostering Agencies provide approximately 14% of all of our looked after children's care arrangements and play a critical role in meeting our sufficiency for looked after children.
- 1.6 Young people in LBBB also benefit from a large in-house foster carer provision, which provides approximately 60.50% of all of our looked after children's care arrangements and plays a vital role in supporting the needs of our children and young people. Whilst in-house foster care does not fall under the remit of the Newham DPS, we acknowledge the importance of our in-house foster carers and will continue to grow and support this community throughout and beyond the lifetime of the DPS.
- 1.7 Children's Residential Homes provide 24/7 care and accommodation for looked after children, where foster care is not suitable for the child's needs, more specialist support is required and where the child is unable to live with their own natural family. Multiple children and young people live together in the same environment, supported by residential support staff. In Barking and Dagenham, Children's Residential Homes provide approximately 10.34% of all of our looked after children's care arrangements.

2 Existing Arrangements

- 2.1 Prior to 2019, the Council had been solely reliant on securing placements through spot purchasing and individually brokered packages with providers, rather than procuring via framework arrangements. This practice was not sustainable, and it was recognised that the commissioning process needed to be reviewed with the objective of securing greater sufficiency of placements with improved value for money. The review subsequently identified opportunities for better cross-borough working, the use of digital solutions such as e-brokerage tools and improving the processes for making placements.
- 2.2 Spot-purchasing can also present a number of challenges and issues for local authorities that undertake these arrangements:
- The process is not compliant with the Public Contracts Regulations (PCR) 2015;
 - The process is widely seen as the most inefficient model of purchasing in terms of value for money;
 - There is a limited ability for local authorities to manage/shape the market with any degree of success;
 - Difficulties in linking "Demand" (referrals to suppliers) with "Supply" (actual placements made and current available supply) to provide intelligence to both local authorities and Providers, on unmet needs or gaps in supply to meet demand;
 - The length of time and resource required to tender for block contracts;

- The cost pressures to local authorities, as well as the management of market and inflationary pressures; and
 - The risk to local authorities where there are no contracts to hold Provider's accountable (particularly for when there are safeguarding issues within a placement).
- 2.3 To overcome the challenges associated with spot-purchasing arrangements and individually brokered packages with providers, the Council entered into an existing commissioning partnership, the Commissioning Alliance (formerly known as the West London Alliance (WLA)), following Cabinet approval to enter into an Access Agreement with the WLA and call-off from the WLA Dynamic Purchasing Vehicle (DPV), on 22 January 2019 (minute 79 refers).
- 2.4 Since 2 July 2019, the Council has been a part of the access agreement with the Commissioning Alliance for the provision of residential, supported accommodation and independent foster care services for children and young people in its care. Whilst the Partnership has enabled the Council to explore opportunities to engage in shared services and joint working, a number of issues have presented:
- A lack of suitable provision for our children and young people, with the majority of placement requests made by the Council to the Commissioning Alliance having been unsuccessful;
 - Limited responses from Providers through the Commissioning Alliance's CarePlace technology platform;
 - An inability to effectively utilise the data available through CarePlace due to a lack of placements, resulting in reduced opportunities to support evidence-based commissioning, support daily purchasing decisions and monitor both expenditure and savings;
 - Limited contract management and premises monitoring support; and
 - No ceiling prices for Supported and Semi-Independent Accommodation.
- 2.5 The Council is currently paying the Commissioning Alliance £50k per year for commissioning services, DPV access and contract management; in addition, a further £50K is being paid for the use of the CarePlace technology platform (datahub and eBrokerage). As such, the Council is currently spending a total cost of £100k per annum for access to the Commissioning Alliance, with a discount of £5k due to two other additional local authorities having joined. This does not include the cost of individual placements for our children and young people.
- 2.6 Joining the London Borough of Newham's Dynamic Purchasing System (DPS) will ensure that LBBD is compliant with contract procurement rules and reduce the need to independently spot purchase services. It will also ensure that LBBD has access to a pool of pre-approved Providers for children's residential care homes and independent fostering agencies at an annual membership cost of £6,300, as well as access to joint contract monitoring of Providers to ensure compliance in service delivery based on established key performance indicators (KPIs).
- 2.7 LBBD will be able to access the Agreement and use the services on the terms set out in the Agreement and the relevant Services Contract. It is important to note that the DPS does not commit the Council to any given level of expenditure in relation to individual placements for our children and young people and there is no guaranteed level of spend with any of the suppliers admitted to the DPS.

- 2.8 If approved, it is anticipated that LBBB will join the framework for the duration of the contract or until LBBB's commissioning team working in conjunction with operational colleagues propose an alternative service model which could realise better quality or improved value for children in care. It is also important to state that if the Newham DPS arrangements do not work well for LBBB, that LBBB would be able to leave the Newham DPS by giving six (6) months' notice to the London Borough of Newham. LBBB would then be able to explore alternative options for sourcing placements for its children and young people, such as creating its own frameworks for Residential Children's Care Homes and Independent Foster Care Agencies.
- 2.9 It is important to note that LBBB will remain in the Commissioning Alliance until June 2024, whilst alternative arrangements for supported and semi-independent provision are explored. LBBB is currently in the process of establishing its own frameworks for both supported and semi-independent accommodation, which are expected to be in place by the end of 2024 and which will be detailed in future reports to Cabinet. Current supported and semi-independent placements made through the Commissioning Alliance will continue post-June 2024, with placements made following this date being spot purchased until LBBB's new supported and semi-independent frameworks are established. This will enable LBBB to put in place ceiling prices for supported and semi-independent provision, which are not available under the Commissioning Alliance. This option will not present any additional future costs to the Council and will enable more sound financial planning.

3 Newham Dynamic Purchasing System (DPS)

- 3.1 On 3 November 2020, the London Borough of Newham sought approval from their Cabinet to establish a Dynamic Purchasing System (DPS) for homes for looked after children and care leavers, which was agreed and has been live since 30 November 2022. The DPS was established by Newham to enable themselves and other local authorities to deliver their statutory duties and ensure good quality, locally available homes which represent value for money and that are compliant with public contract regulations.
- 3.2 Whilst the DPS is similar to a framework, the advantage of the Newham DPS is that it will be open to new suppliers throughout its lifespan; as such, new Providers can onboard at any time and there is scope to grow the number of Providers currently on the DPS. The DPS will also standardise the enrolment and quality assurance of all Providers being commissioned, enabling a robust audit trail of spend and providing a fast route to market for new initiatives, saving time and resources. Providers will be required to meet a minimum quality standard and therefore value for money should be delivered with lower unit costs. However, there is no requirement to spend on the DPS if this is not the case.
- 3.3 There are 27 Independent Foster Care Agencies and 12 Children's Residential Care Homes already on the DPS. Applications to join the DPS are administered by the London Borough of Newham; however, call-offs from the DPS for individual placements will be approved by relevant officers in line with the scheme of delegation.

- 3.4 86 per cent of the Children’s Residential Homes and 88 per cent of the Independent Foster Care Agencies (IFAs) on the DPS are currently rated by Ofsted as “Good” or “Outstanding”. The remaining are rated as ‘Requires improvement’ or have yet to be inspected. These agencies will require a risk assessment completed and signed off by a senior manager before they are used. Priority will be given to the “Good” and “Outstanding” homes. Ofsted ratings will continue to be monitored throughout the life of the DPS to reflect the latest ratings.
- 3.5 The London Boroughs of Waltham Forest, Hackney, Redbridge, Havering, Tower Hamlets, Greenwich and Milton Keynes City Council have also indicated their intention to join this DPS, many of which were previously subscribing members of the now defunct London Care Services (LCS) and who currently rely solely on spot purchasing arrangements for providing placements for their looked after children and young people.
- 3.6 By working in partnership with other local authorities and particularly those with similar needs and geographical location, we will be able to share resources, create efficiencies and enable greater market shaping, which ultimately will support placement stability and cost effectiveness. We will also be able to build strong relationships with smaller and local providers who are invested in working with our local authorities.
- 3.7 The London Borough of Barking and Dagenham will also continue to encourage all agencies that are currently providing placements for LBBB children to join the Newham DPS. We will also ensure that LBBB children and young people who are happy, safe and stable in their current placements, will not be moved into new placements under the DPS.
- 3.8 Whilst there is no guarantee that prices submitted under the DPS will be lower than current rates, the ambition of the new DPS is to lower the unit cost through the provision of some new lower cost services. The DPS prices will only apply to new placements from the date of implementation.

4 Demand in Barking and Dagenham

- 4.1 As of December 2023, there were 426 looked after children in the care of the London Borough of Barking and Dagenham. Of these, 83 were placed in externally commissioned services to be tendered through the DPS (Independent Fostering Agencies and Children’s Residential Care Homes). The national demand for placements far exceeds supply, with some Providers reporting receiving 300 referrals a day for children’s home and fostering placements. This has been compounded by COVID-19. The result is that local authorities are experiencing more difficulty in finding placements for children and young people with complex and challenging needs. In Barking and Dagenham, this includes young people with a combination of harmful sexualised behaviour and young people at risk of criminal and sexual exploitation, all of which can be compounded by young people having learning difficulties or disabilities.
- 4.2 In June 2015, we recorded the highest number of Looked After Children (LAC) in the system (476), since which numbers have been steadily declining. LAC numbers reduced to 391 at the end of 2020/21, compared to 402 at the end of the previous

year; however, LAC numbers saw a slight increase of 5% for the year 2021/22. By December 2023, LAC numbers were at 426.

- 4.3 In 2020, our rate of children in care per 10,000 children aged 0-17 had fallen from 63 to 61, but for 2021/22 this rate had risen to 64.6; for 2022/23, this rate had risen slightly to 66.9, which remains higher than the London rate (52) and our geographical neighbours (51), but below the national (78) rate¹.
- 4.4 The total number of children coming into care continued to increase from 191 in 2019/20 to 193 in 2020/21. The number for 2021/22 was 203 and for 2022/23, was 257. Slightly less children left care during 2021/22 (181) compared to 204 in the previous year; however, 240 children left care during 2022/23 and our projections (based on population growth and a three-year pooled average) are set to increase over the next 5 years.
- 4.5 Growing numbers of children and young people in the social care system in LBBD will have a significant impact on spend, in terms of both the workforce and resources such as foster carers, residential placements, care leavers' accommodation and sourcing adoptive parents. The Newham DPS will assist Barking and Dagenham in meeting its statutory duty to ensure that there is sufficient, good quality, and safe provision for the children in its care by increasing the pool of residential care home and independent foster care agency provision.

5 DPS Tender and Tender Evaluation

- 5.1 The advantage of the Newham DPS is that it will be open to new suppliers throughout its lifespan; as such, new Providers can onboard at any time and there is scope to grow the number of Providers currently on the DPS. Rounds are held for each lot and as soon as one round closes, the DPS re-opens within 48 hours. At a minimum, applications are evaluated annually and market engagement events are held for each lot in advance of the closing date. A Prior Information Notice (PIN) is issued for each event on the UK 'Find a Tender' service, where organisations can search for opportunities within the public sector in the UK.
- 5.2 The London Borough of Newham also shares information about each market engagement event with the National Association of Fostering Providers (NAFP) and other networks and with partner local authorities so that they can communicate with their current Providers.
- 5.3 The DPS ensures compliance with national and EU regulations under the Light Touch regime. It can be used to call off individual contracts and for mini competitions for any block contracts for all types of homes.
- 5.4 The DPS also enables commissioners to run mini competitions for different types of homes; for example, unaccompanied asylum-seeking children (UASC) who may have specific needs which are not met by current available provision.

¹ <https://lginform.local.gov.uk/reports/lgastandard?mod-area=E09000002&mod-group=AllLainCountry&mod-metric=891&mod-type=comparisonGroupType>

Independent Foster Care Agencies

- 5.5 Tenders are evaluated based on 60% quality and 40% price. Suppliers must achieve a qualitative evaluation score of no less than 36% out of a total of 60% to be admitted onto the DPS.
- 5.6 The Quality scores for Lot 4 (Independent Fostering Agencies) Round 1 (November 2022) were evaluated by using the Suppliers' latest Ofsted inspection report overall judgement. Following evaluation, 27 registered IFAs were accepted onto the DPS. This offers 2,382 places and helps to meet the demand.
- 5.7 For Independent Foster Care Agencies, there are 3 sub lots which include:
- 4a. Core Fostering Placements;
 - 4b. Specialist Fostering Placements; and
 - 4c. Parent and Child Foster Placements without assessment.
- 5.8 Lot 4b is further divided into the below sub-categories:
- 4b i) Children and young people with significant challenging behaviour (for e.g. Autism, conduct disorder);
 - 4b ii) Children and young people with risk taking behaviours to themselves and others;
 - 4b iii) Children and young people with offending or highly sexualised behaviours;
 - 4b iv) Children and young people with multiple and profound disabilities with complex medical needs and high level of medical appointments;
 - 4b v) Children and young people with significant mental health and emotional needs for e.g. suicidal ideation; and
 - 4b vi) Children and young people with serious sexual and criminal gang exploitation risks.
- 5.9 Table one below shows the Providers that were successful per lot in round one. The London Borough of Newham would not share a full breakdown with submitted prices per week and final evaluated scores until the access agreements have been signed, due to this being commercially sensitive information.

Table 1

Fostering Agencies	4a	4b (i)	4b (ii)	4b (iii)	4b (iv)	4b (v)	4b (vi)	4c
Barnardos South East	Y	Y	Y	Y		Y	Y	Y
Capstone Foster Care South East	Y	Y	Y	Y	Y			Y
Fostering Support Group Limited	Y					Y	Y	Y
Caring Hearts	Y							Y
Family First	Y	Y	Y	Y	Y	Y	Y	Y
Family Works	Y	Y	Y	Y	Y	Y	Y	Y
FCA South East	Y	Y	Y	Y	Y	Y	Y	Y
Five Rivers - London & East	Y				Y			Y
Fostering Innovations	Y	Y	Y	Y	Y	Y	Y	Y
Fusion Fostering North East	Y	Y	Y	Y	Y	Y	Y	Y

Fusion Fostering North West	Y	Y	Y	Y	Y	Y	Y	Y
Fusion Fostering South Central	Y	Y	Y	Y	Y	Y	Y	Y
Fusion Fostering South East	Y	Y	Y	Y	Y	Y	Y	Y
Fusion Fostering - The Midlands	Y	Y	Y	Y	Y	Y	Y	Y
Fostering Hearts	Y	Y	Y	Y		Y	Y	Y
Greater London Fostering	Y	Y	Y	Y		Y	Y	Y
South Coast Fostering	Y	Y	Y	Y		Y	Y	Y
HATOLS	Y					Y		Y
Homefinding	Y	Y	Y					Y
Infinity	Y	Y	Y	Y	Y	Y	Y	Y
ISP Enfield	Y	Y	Y	Y	Y	Y	Y	Y
LiKa	Y							
Orange Grove - London and Essex	Y	Y	Y	Y	Y	Y	Y	Y
Ryancare Fostering Ltd	Y	Y	Y	Y	Y	Y	Y	Y
Sunbeam Fostering Agency - London & South	Y	Y	Y	Y	Y	Y	Y	Y
TACT - East London	Y							Y
NFA – London	Y	Y	Y	Y	Y	Y	Y	Y

- 5.10 89% of the successful Independent Foster Care Agency suppliers admitted to the DPS are rated as ‘Good’ or ‘Outstanding’ with Ofsted. The remaining are rated as ‘Requires improvement’ or have yet to be inspected. These agencies will require a risk assessment to be completed and signed off by a senior manager before these are used. Priority will be given to the good and outstanding homes.
- 5.11 Ofsted ratings will continue to be monitored throughout the life of the DPS to reflect the latest ratings.
- 5.12 The tender process has been successful in attracting a wider supply base. 30% of suppliers are new and not part of the London Care Services (of which Newham was previously a member).

Children’s Residential Care Homes

- 5.13 Tenders are evaluated based on 60% quality and 40% price. Suppliers must achieve a qualitative evaluation score of no less than 36% out of a total of 60% to be admitted onto the DPS.
- 5.14 The Quality scores for Lot 2 (Children’s Homes) Round 1 (February 2022) were evaluated by using the Suppliers’ latest Ofsted inspection report overall judgement. Following evaluation, 11 suppliers with 64 children’s homes were accepted onto the DPS.
- 5.15 For Children’s Residential Care Homes, there are 2 sub lots which include:
- 2a. Standard children’s homes; and
 - 2b. Solo homes.
- 5.16 Table 2 below shows the Providers that were successful per lot in round one. The London Borough of Newham would not share a full breakdown with submitted prices per week and final evaluated scores until the access agreements have been signed, due to this being commercially sensitive information.

Table 2

Lot 2a		
Supplier	Number of homes	Number of places for children and young people
Bryne Melyn Care Limited	10	31
Care 2 Share	3	17
Compass Fostering	7	40
Family First Fostering	2	5
Five Rivers Childcare Ltd	3	17
Gordon Care Services Ltd	1	4
Hillcrest Children's Services Ltd	13	94
Hillcrest Children's Services (2) Limited	11	46
James Kids Homes Ltd	1	3
PJL Healthcare Limited	2	20
Progress Children's Services Ltd	5	27
	58	304
Lot 2b		
Bryne Melyn Care Limited	5	5
Five Rivers Childcare Ltd	1	1
	6	6

- 5.17 86 per cent of the successful Children's Residential Care Homes admitted to the DPS are rated as 'Good' or 'Outstanding' with Ofsted. The remaining homes are rated as 'Requires improvement' or have yet to be inspected. These homes will require a risk assessment to be completed and signed off by a senior manager before these are used. Priority will be given to the good and outstanding homes.
- 5.18 Since the initial evaluation, Adeza Care Home Limited has also been admitted to the DPS, with three (3) children's residential care home provisions.
- 5.19 Ofsted ratings will continue to be monitored throughout the life of the DPS to reflect the latest ratings.

6 Improving quality and outcomes

- 6.1 The DPS will improve the quality of provision and ensure that good services are in place to meet all of our children and young people's identified needs. The DPS will also ensure that a consistent quality assurance monitoring approach is used across each type of provider.
- 6.2 The access fee paid by LBBB (and every additional authority that will join) will provide 0.5 full-time equivalent (FTE) additional contract officer post to support in the management of the DPS by Newham. The success of the DPS will be overseen by the Strategic Resource Manager in Corporate Parenting with oversight from the Head of Service for Corporate Parenting, the Group Accountant and the Category Lead. Local authorities that join the DPS will be part of contract management meetings and any issues or concerns will be addressed in monthly East London

Commissioner meetings that are already established. Commissioners in LBBD will promote the DPS to any Providers that are being used that are not yet registered and participate in any future market engagement events. The London Borough of Newham has a dedicated Contract Management team that supports the management and implementation of this DPS in partnership with their Commissioning agency service and Strategic Procurement teams.

6.3 The outcomes that Newham are looking to improve will focus on: tracking personal outcomes through the use of an individual outcomes monitoring tool by both Providers and the Quality Assurance service (the Outcomes Star). This will look at key themes for a young person, including health and wellbeing, managing personal finances, relationships, education and training.

6.4 Newham Council will also undertake regular engagement with Providers and collaborate both sub-regionally and nationally to share best practice including membership of the Children's Cross Regional Arrangements Group (CCRAG) alongside 34 other local authorities.

7. Proposed Procurement Strategy

7.1 Outline specification of the works, goods or services being procured

7.1.1 Through the DPS, LBBD will be able to secure the following services:

- Access to a pool of pre-approved Providers for Children's Residential Care Homes and Independent Fostering Agencies at an annual membership cost of £6,300.00; and
- Access to joint contract monitoring of Providers to ensure compliance in service delivery based on established key performance indicators (KPIs).

7.1.2 Additional services to be delivered to LBBD children and young people as part of the DPS will include the following:

- Ensuring that children and young people are accommodated and supported in high quality and fully vetted alternative homes fulfilling the Council's Corporate Parenting responsibilities; and
- Supporting delivery of the Council's Corporate Parenting Plan, the Looked After Children Sufficiency Strategy and CARES Practice Standards.

7.2 Estimated Contract Value, including the value of any uplift or extension period

7.2.1 The London Borough of Barking and Dagenham is requesting permission to enter into an Access Agreement with the London Borough of Newham (LBN) and Call-Off from the LBN Dynamic Purchasing Vehicle (DPS) for the following services:

- Children's Residential Homes; and
- Independent Foster Care Agencies.

7.2.2 The Annual Administration Fee of £3,150 per lot is the only fee payable from a Partner Organisation to access the DPS. This equates to a total cost of £6,300 per

annum for both lots and therefore £12,600 for the 23-month period that LBBB would join and access the Newham DPS.

7.2.3 No commitment to expenditure by the Council will be stipulated within the DPS itself. Expenditure will only be incurred when placements are made. Based on current spend, the cost to LBBB is circa. £8,994,214 per annum for Children's Residential Care Home accommodation and £2,645,273 per annum for Independent Foster Care Agencies. For the one year and eleven-month period (23 months) that LBBB would join and access the Newham DPS, based on our current expenditure, the total combined potential value of the contracts would be circa £22,309,016.80. As such, the total combined potential value of the contracts, as well as the annual administration fee for the two lots, would equate to a total value of £22,321,616.80 (in comparison, our total spend for a 23-month period within the Commissioning Alliance would equate to a total value of £22,499,016.80).

7.2.4 Providers will have the opportunity to request an annual fee uplift; however, there is no commitment to uplift requests being agreed and will largely be dependent on the needs of the children and young people.

7.3 **Duration of the contract, including any options for extension**

7.3.1 The report is seeking permission for the Agreement to commence on 1 April 2024 for an initial one year and eleven-month period (23 months) until 8 March 2026, with a further report to be submitted to Cabinet if we wish to participate for a further four (4) years.

7.3.2 Terms & Conditions - Termination Clause states that, either Party may terminate the DPS Access Agreement upon giving at least six (6) months' notice to the other Party.

7.4 **Is the contract subject to (a) the Public Contracts Regulations 2015 or (b) Concession Contracts Regulations 2016? If Yes to (a) and contract is for services, are the services for social, health, education or other services subject to the Light Touch Regime?**

7.4.1 Contracts are subject to the Public Contracts Regulations 2015; however, the contracts with each provider are considered a 'light touch regime contract' under current procurement legislation.

7.4.2 The London Borough of Newham has given due consideration to the PCR2015 and have ensured the principles of transparency and equal treatment of suppliers are embedded in the establishment of the DPS.

7.5 **Recommended procurement procedure and reasons for the recommendation**

7.5.1 It is recommended that permission is given for LBBB to enter into an Access Agreement with the London Borough of Newham (LBN) and Call-Off from the LBN Dynamic Purchasing Vehicle (DPS) for the following services:

- Children's Residential Homes; and
- Independent Foster Care Agencies.

7.5.2 The Dynamic Purchasing Vehicle (DPS) will replace many of the current spot purchasing arrangements and it is hoped that the limited responses from Providers currently experienced through the Commissioning Alliance's CarePlace technology platform, will increase as a result of Newham DPS' secure email referral system, which will enable LBBD to better tailor placements according to the needs of its children and young people and approach the most suitable Providers in the case of each young person. The Council will also benefit from better contractual arrangements with agencies to ensure quality and the price of these placements; where necessary; are driven down as much as possible.

7.6 **The contract delivery methodology and documentation to be adopted**

7.6.1 The service is to be delivered by external Providers. The London Borough of Newham will be responsible for contract procurement, management and monitoring functions. Updates will be provided at the East London Commissioner meetings, which take place monthly.

7.6.2 Entering into an Access Agreement with the London Borough of Newham and calling-off from Newham's Dynamic Purchasing Vehicle (DPS) will enable:

- A better choice of quality homes for our children and young people;
- For us to work with suppliers who share our passion to achieve the best possible outcomes for our children and young people;
- A range of flexible provision that meets the needs of our children and improves stability and reduces breakdown, in turn achieving better value for money;
- The creation of strong partnerships with selected suppliers and the promotion of local small- and medium-sized companies;
- A culture of continuous improvement, including developing a training offer for suppliers through the Social Care Academy; and
- A quick route to the market for the commissioning and procurement of homes delivered in partnership or block contracts.

7.6.3 Requirements will be detailed as part of the contract terms and conditions and the DPS specifications of service.

7.7 **Outcomes, savings and efficiencies expected as a consequence of awarding the proposed contract**

7.7.1 Savings will be made in reducing the costs associated with accessing a partnership agreement. LBBD is currently spending a total cost of £100k per annum for access to the Commissioning Alliance, with a discount of £5k due to two other additional local authorities having joined. In joining and accessing the London Borough of Newham's DPS, LBBD will have access to a pool of pre-approved Providers for Children's Residential Care Homes and Independent Fostering Agencies at an annual membership cost of £6,300, as well as access to joint contract monitoring of Providers to ensure compliance in service delivery based on established key performance indicators (KPIs). It is important to note that these fees do not include the cost of individual placements for our children and young people, which will be submitted by the Providers upon their entry into the DPS.

7.7.2 All Providers must work to any specific outcomes agreed with the Contracting Body at time of call-off and set out in the child or young person's Individual Placement

Agreement (IPA). In addition, Providers must work towards achieving the outcomes listed below.

- a) The young person enjoys good physical, emotional, mental and sexual health; has a healthy lifestyle, and has access to information about health issues that allows them to make informed choices;
- b) The young person is physically safe, stable and emotionally secure. They are protected from ill-treatment, neglect, violence and sexual exploitation; they are free from bullying and discrimination; and are protected from social exclusion through involvement in crime, anti-social behaviour and other risk-taking activities;
- c) The young person attends and fully engages in education, training or employment and receives encouragement and recognition for their achievements; and
- d) The young person positively participates in their own development and with the local community; they are actively involved in making decisions about their future; they develop self-confidence and can deal with change and other life challenges; they understand the effects of racism and discrimination and are able to challenge this behaviour; they demonstrate enterprise and a will to contribute to the well-being of others

7.8 Criteria against which the tenderers are to be selected and contract is to be awarded

7.8.1 The DPS will be used to call off individual contracts and for mini competitions for any block contracts for all types of homes. Evaluation criteria of 60 per cent quality and 40 per cent cost will be used to encourage cost competitive bids with a clear focus on quality for our young people. While quality is critical, the agreed ratio of quality and cost will ensure a focus on value for money given the current overspend. All suppliers will have to meet a minimum quality threshold before their services are considered.

7.9 How the procurement will address and implement the Council's Social Value policy

7.9.1 The Council continues to be committed to promoting the welfare of and protecting the most vulnerable children and young people in Barking and Dagenham.

7.9.2 In addition to the outcomes sought for individual children, there will also be community level outcomes through the DPS which will further enhance children and young people's lives. Embedded within the new contract is a requirement for the Provider to consider social value in all aspects of the business and provide evidence that it has considered and/or implemented actions flowing from the Public Services (Social Value) Act 2012. This may include, but will not be limited to:

- Supporting local economic development;
- Providing training and employment opportunities, including supporting local colleges and schools with work placements and apprenticeship schemes; and
- Supporting and working with the local community.

7.9.3 Discussions with Newham as to how best to represent social value are ongoing and it is likely that social value will be applied on a provider basis in relation to the volume of referrals.

7.10 London Living Wage (LLW)

7.10.1 Tenderers will be required to pay the London Living Wage (LLW) as a minimum to staff and ensure that all such costs are transparently declared as required by the Council. Suppliers outside of London will also be required to pay National Living Wage as a minimum to staff.

7.11 How the Procurement will impact/support the Net Zero Carbon Target and Sustainability

7.11.1 The Procurement will support the Council's Net Zero Carbon targets, as the Council will be looking primarily at placing young people with local providers where possible, so that young people are able to maintain connections with their families, friends and schools. This would also enable young people to either walk or utilise public transport when attending visits and activities, which would prove more environmentally sustainable. It would also assist social workers in using public transport when visiting young people, as well as reducing their travel time.

8. Options Appraisal

8.1 Option 1: Do nothing and remain in the Commissioning Alliance

Advantages

- Continued access to the current Commissioning Alliance Dynamic Purchasing Vehicle (DPV) and all current arrangements under this (contract monitoring, contract advice and queries, KPIs);
- CarePlace and processes already in place to procure from the DPV;
- An inability to procure through a partnership agreement would result in increased spot purchasing arrangements, with inconsistencies in quality and pricing, as well as non-compliance with the Public Contracts Regulations 2015.

Disadvantages

- A lack of suitable provision for our children and young people, with the majority of placement requests made by the Council to the Commissioning Alliance having been unsuccessful;
- Limited responses from Providers through the Commissioning Alliance's CarePlace technology platform;
- An inability to effectively utilise the data available through CarePlace due to a lack of placements, resulting in reduced opportunities to support evidence-based commissioning, support daily purchasing decisions and monitor both expenditure and savings;
- Limited contract management and premises monitoring support (the Commissioning Alliance's fees include some contract monitoring but at a strategic level and which is not responsive to emergency or individual level needs);

- Buying into the Commissioning Alliance model is significantly more expensive than the Newham DPS model, which will continue to add pressure to service budgets and provide an inconsistent service to our young people;
- No ceiling prices for Supported and Semi-Independent Accommodation; and
- The Commissioning Alliance does not require Providers to pay employees the London Living Wage.

8.2 Option 2: Procure as a single borough service

Advantages

- By establishing our own framework, we would be able to ensure access to a wide range of high-quality services and Providers for our children and young people. A DPS would also mean that new Providers would be able to join our framework at any time (should they meet our set evaluation criteria);
- Our own framework could be offered to other local authorities, which could generate additional income for the Council.

Disadvantages

- Going out to market on our own would not offer the same opportunities for economies of scale (thereby maximising value for money) that joining the Newham DPS will offer;
- Research conducted by the National Association of Fostering Providers (NAFP) has indicated that Independent Foster Care Agencies would prefer to work with multiple local authorities as part of framework contracts and DPS's, as this 'can create efficiencies, in that it reduces the duplication of tendering and monitoring information and the associated cost of this²;
- A single borough service procurement would be both time and resource intensive, with implications across Commissioning, Quality Assurance and Procurement functions. This process would also not enable us to seek placements immediately;
- Partnership working with other local authorities enables greater market shaping possibilities, which are not possible as a sole local authority undertaking a single borough procurement exercise.

8.3 Option 3: (Preferred option) Join London Borough of Newham's DPS

Advantages

- LBBD will have access to a wide range of high-quality providers for Children's Residential Care Homes and Independent Foster Care Agencies;
- Annual fees to join the Newham DPS are considerably lower than those to remain in the Commissioning Alliance;
- Providers on the DPS submit pre-agreed fees, which include core prices and additional placements costs. As such, LBBD will have increased certainty around future placements costs for our children and young people;
- By working in partnership with other local authorities and particularly those with similar needs and geographical location, we will be able to share resources,

² <https://www.nafp.org.uk/pages/20-how-well-are-fostering-services-commissioned>

create efficiencies and enable greater market shaping, which ultimately will support placement stability and cost effectiveness;

- We will be able to build strong relationships with smaller and local providers;
- The Newham DPS will be open to new suppliers throughout its lifespan; as such, new providers can onboard at any time and there is scope to grow the number of providers currently on the DPS;
- The process of joining the Newham DPS will be reasonably quick and straightforward;
- LBBD would be able to leave the Newham DPS model with a minimum notice period of six months, if it so desired.

Disadvantages

- LBBD will be bound by the terms and conditions as presented in the DPS Access Agreement, with either party able to terminate the Agreement by giving at least six months' notice to the other party. It is important to state that all call-off contracts already in place would be able to continue beyond the expiry date or termination of the DPS.

9. Waiver

9.1 Not applicable.

10. Consultation

10.1 The London Borough of Newham carried out a Market Testing Event on 24 November 2020 to ensure that there was a market to deliver services being tendered for. The event was well attended with 193 attendees from 274 bookings. The response received from Providers in joining the DPS has demonstrated that there is a market to deliver these services.

10.2 A Young Commissioner from the London Borough of Newham's Young Commissioners' Scheme also worked in conjunction with the LBN to develop the service specifications for the lots available on the DPS. Feedback from the wider Children in Care Council and Care Leavers Forum has also been built into the specifications.

10.3 Rounds are held for each lot and as soon as one round closes, the DPS re-opens within 48 hours. At a minimum, applications are evaluated annually and market engagement events are held for each lot in advance of the closing date. The London Borough of Newham also shares information about each market engagement event with the National Association of Fostering Providers (NAFP) and other networks and with partner local authorities so that they can communicate with their current Providers.

10.4 The proposals in this report were considered by the Procurement Board at its meeting on 19 February 2024. This report will also be considered at the Council's Cabinet meeting on 16 April 2024.

11. Corporate Procurement

Implications completed by: Francis Parker, Senior Procurement Manager

- 11.1 The proposed DPS is compliant with the Council's contract rules and the PCR2015.
- 11.2 Officers have satisfied themselves that the DPS is suitable for them in an operational context.
- 11.3 The mini competitions held under the DPS will provide value for money in each instance. The DPS also provides flexibility so that more providers can join and offer potentially further value for money.

12. Financial Implications

Implications completed by: Antony Envoldsen-Harris, Business Partner (Finance) and Amar Barot, Head of Finance for People Services

- 12.1 This presents an opportunity for LBBD to save money. The current cost of using Commissioning Alliance is circa £95,000 a year, while the cost of moving to Newham DPS will be £6,300 a year, with a small fee for Commissioning Alliance covering April to June. Even with that fee, the expected savings for 2024/25 would be circa £64,950 and £88,700 in 2025/26. This saving has already been offered up as part of the 2024/25 budget setting process.
- 12.2 Over the initial two years we would be part of Newham DPS, LBBD stands to save £153,650 as outlined above. There would be no additional funding required or pressure on existing on budgets with this change.
- 12.3 There is a small risk that the rates offered through the Newham DPS may not be as low as those currently obtained through the Commissioning Alliance. However, existing placements will not be affected, and the LA is under no obligation to accept any placements identified through the Newham DPS if they do not represent value for money.

13. Legal Implications

Implications completed by: Yinka Akinyemi, Contracts and Procurement Solicitor, Law and Governance

- 13.1 This report seeks approval to use London Borough of Newham's Dynamic Purchasing System (DPS) for the provision of Children's Residential Care Homes and Independent Foster Care Agency Services. Paragraph 11.1 states that this DPS is compliant with the Council's Contract Rules and the Public Contracts Regulations 2015, LBBD is therefore permitted to use this DPS. This also ensures compliance with the Council's own Contract Rules which requires a competitive tendering exercise be undertaken for any contract above £50,000.
- 13.2 This report states that the intention is for LBBD to sign up to the access agreement allowing it to use the DPS from 1 April 2024 for an initial 23-month period until 8 March 2026. During this period the Council will be able to enter into various call-off

contracts as and when a need arises for the Council. This ensures a compliant route to market for all respective works and service requirements within this area.

14. Other Implications

- 14.1 **Risk and Risk Management** – Call-Off Contracts from the DPS can continue beyond the expiry date of the DPS and still be covered by the terms of the Call-Off Contract. Therefore, there is no limit on the term of Call-Off Contracts, provided the Call-Off Contract commences prior to DPS expiry.

For a more detailed risk breakdown, please see the attached Risk Register (Appendix 4).

- 14.2 **TUPE, other staffing and trade union implications** – There are no TUPE implications for this procurement. Joining the Newham DPS will assist the Placements Officers (4 FTE) at LBBD to meet the needs of the organisation more effectively. Whilst there are currently four Placements Officers at LBBD, it is important to note that placements finding is only one aspect of their role; in addition to this, they are responsible for the placement movements of children and young people, the Individual Placement Agreements (IPAs) of our children and young people and ensuring that all of the information that is held on LiquidLogic (software designed to be used by social workers) is clear and up-to-date at all times.

- 14.3 **Corporate Policy and Equality Impact** – The recommendations in this report support all local policies relating to looked after children and care leavers; these policies are underpinned by statutory guidance published by the Department for Education. The statutory guidance that relates to this report is the Children Act 1989, the Care Leavers Regulations 2010, Fostering Services: National Minimum Standards and Children's Homes: National Minimum Standards. The recommendations in this report also support the Council in its statutory responsibilities as a Corporate Parent.

The service will impact on Looked After Children. The service will contribute towards reduced levels of placement disruption for those children in care. Wellbeing of children in the Borough and ensuring that potentially vulnerable children and young people are safely housed and supported based on their needs, is a fundamental responsibility for the Council, staff and Members. Indeed, this is a responsibility for all Members as corporate parents. The services will enable children and young people to be safeguarded while being housed and allows them to experience services within the community in a safe way, thereby, contributing to positive life chances, educational and social development.

- 14.4 **Safeguarding Adults and Children** - Referrals will be made by the LBBD Placements team via secure email. The LBBD Placements Team Manager and the LBBD Commissioning team will work closely with the Commissioning team at the London Borough of Newham throughout the contract life to ensure close communications and the sharing of relevant information.

- 14.5 **Health Issues** - The wellbeing of children in the Borough is a fundamental responsibility of the Council and this service, which will contribute to positive health outcomes for our looked after children and young people.

Public Background Papers Used in the Preparation of the Report: None

List of appendices:

- Appendix 1: Award report for Commissioning homes for Children looked after and care leavers, Round 1 Lot 4: Independent Fostering Agencies (18th November 2022)
- Appendix 2: Approval to award places on the DPS for Homes and Support Services for Looked After Children and Care Leavers Lot 2 Childrens Homes - (Round 1) (1st February 2022)
- Appendix 3: Equality Impact Assessment Screening Tool- Newham DPS
- Appendix 4: Risk Register- Newham DPS

OFFICER KEY DECISION

The following decision was taken on 18th November 2022

Officer taking the decision Corporate Director of Children and Young People

Date notified to all Members 22nd November 2022

End of the call-in period is midnight on 29th November 2022

This decision can be implemented from 30th November 2022

Award report for Commissioning homes for Children looked after and care leavers, Round 1 Lot 4: Independent Fostering Agencies

LONDON BOROUGH OF NEWHAM

OFFICER DECISION RECORD

Is it an officer key decision, i.e. because;		
a. it has an estimated total value or impact over £500,000 but up to £1M <u>and/or</u>	Yes	
b. It is a key decision delegated by Cabinet to the officer to make	Yes	
And the community impact threshold has not been met (i.e. the decision does not have <u>significant</u> impact on 2 or more wards) – MARK THE NO BOX IF THIS IS THE CASE		No
Is it a non-key decision (i.e. it is a decision with a value up to £500,000)		No

Report Title	Award report for Commissioning homes for Children looked after and care leavers Round 1 Lot 4: Independent Fostering Agencies
Date of Decision	
Authority to take decision	Cabinet Meeting held 3rd November 2020

	Cabinet agreed to delegate authority to The Corporate Director of Children and Young People for approval of the admission of suppliers to the DPS throughout the life of the DPS including entering into the relevant contract documentation.	
Decision Maker & Position	Tim Aldridge Corporate Director of Children and Young People	
Exempt information & Grounds	Yes	Appendix 1 contains information considered to be exempt under paragraphs 3 of Schedule 12A of the Local Government Act 1972, as amended: (3) Information relating to the financial or business affairs of any particular person (including the authority holding that information).
Wards Affected	All	
Appendices (if any)	1. Appendix 1: Moderated Scores and Costs Lot 4 Independent Fostering Agencies (IFA)	

1 Executive Summary

- 1.1 This report seeks approval from the Corporate Director of Children and Young People's services, in consultation with the Director of Procurement and the Cabinet member Children's Social Care, to seek the acceptance on to the PDPS of suppliers listed in the report who have met the minimum entry requirements for Lot 4: Independent Fostering Agencies (IFA).

2 Recommendations

- 2.1 For the reasons set out in the report and its appendices, Tim Aldridge the Corporate Director of Children and Young People's Services is recommended to agree admission on to the Dynamic Purchasing System (DPS) of the 27 successful fostering agencies (listed within the table at paragraph 3.9) who have met the minimum criteria for Lot 4: Independent Fostering Agencies.
- 2.2 The contract will run until 8th March 2026, with the option to extend for a further four years. The estimated contract value for Lot 4 over a four-year contract period is £32,400,000.

3 Background

- 3.1 Section 22G of The Children Act 1989 requires councils to provide, as far as is reasonably practicable, accommodation for children looked after in their local area which meets the needs of those children.
- 3.2 Prior to the establishment of DPS, all placements for children in care was made on spot purchase basis. For residential and IFA placements, Newham is part of London Care Services (LCS) which negotiates prices on behalf of London Care Services members. The LCS contract however is not a tender process so all placements are on spot purchase basis. This means that there is limited influence and control over the quality and shape of the market.

- 3.3 The DPS has been established and approved by Cabinet to ensure all placements are procured through a quality assured and tendered process. This is the third lot to be approved for admission onto the DPS with Round 1 for Lot 1 and Lot 2 endorsed in February 2022.
- 3.4 The PDPS does not commit the council to any given level of expenditure and there is no guaranteed level of spend with any of the suppliers admitted to the PDPS.
- 3.5 Tenders were evaluated based on 60% quality and 40% price. Suppliers must achieve a qualitative evaluation score of no less than the 36% out of a total of 60% to be admitted onto the DPS.
- 3.6 The Quality scores for Lot 4 were evaluated by using the Suppliers latest Ofsted inspection report overall judgement. Following evaluation, 27 registered IFAs are proposed to be accepted on the DPS. This will offer 2382 places and help to meet the demand.
- 3.7 There are 3 sub lots which include:
- 4a. Core Fostering Placements
 - 4b. Specialist Fostering Placements
 - 4c. Parent and Child Foster Placements without assessment
- 3.8 Lot 4b is further divided into the below sub-categories:
- 4b i) Children and young people with significant challenging behaviour (for e.g. Autism, conduct disorder)
 - 4b ii) Children and young people with risk taking behaviours to themselves and others
 - 4b iii) Children and young people with offending or highly sexualised behaviours
 - 4b iv) Children and young people with multiple and profound disabilities with complex medical needs and high level of medical appointments
 - 4b v) Children and young people with significant mental health and emotional needs for e.g. suicidal ideation
 - 4b vi) Children and young people with serious sexual and criminal gang exploitation risks
- 3.9 Table 1 shows the Suppliers that have been successful per lot. A full breakdown with submitted prices per week and final evaluated scores can be found in the Appendix, Item 1.

Fostering Agencies	4a	4b (i)	4b (ii)	4b (iii)	4b (iv)	4b (v)	4b (vi)	4 c
Barnardos South East	Y	Y	Y	Y		Y	Y	Y
Capstone Foster Care South East	Y	Y	Y	Y	Y			Y
Fostering Support Group Limited	Y					Y	Y	Y

Caring Hearts	Y							Y
Family First	Y	Y	Y	Y	Y	Y	Y	Y
Family Works	Y	Y	Y	Y	Y	Y	Y	Y
FCA South East	Y	Y	Y	Y	Y	Y	Y	Y
Five Rivers - London & East	Y				Y			Y
Fostering Innovations	Y	Y	Y	Y	Y	Y	Y	Y
Fusion Fostering North East	Y	Y	Y	Y	Y	Y	Y	Y
Fusion Fostering North West	Y	Y	Y	Y	Y	Y	Y	Y
Fusion Fostering South Central	Y	Y	Y	Y	Y	Y	Y	Y
Fusion Fostering South East	Y	Y	Y	Y	Y	Y	Y	Y
Fusion Fostering - The Midlands	Y	Y	Y	Y	Y	Y	Y	Y
Fostering Hearts	Y	Y	Y	Y		Y	Y	Y
Greater London Fostering	Y	Y	Y	Y		Y	Y	Y
South Coast Fostering	Y	Y	Y	Y		Y	Y	Y
HATOLS	Y					Y		Y
Homefinding	Y	Y	Y					Y
Infinity	Y	Y	Y	Y	Y	Y	Y	Y
ISP Enfield	Y	Y	Y	Y	Y	Y	Y	Y
LiKa	Y							
Orange Grove - London and Essex	Y	Y	Y	Y	Y	Y	Y	Y
Ryancare Fostering Ltd	Y	Y	Y	Y	Y	Y	Y	Y
Sunbeam Fostering Agency - London & South	Y	Y	Y	Y	Y	Y	Y	Y
TACT - East London	Y							Y
NFA – London	Y	Y	Y	Y	Y	Y	Y	Y

4 Proposals (including the reasons for the proposed decisions)

- 4.1 To ensure that Newham Council delivers its statutory duty and achieves good value and quality when placing children in care.
- 4.2 To ensure that Newham Council is compliant with public contract regulations.
- 4.3 To bring IFA placements in line with residential and semi-independent provision and ensuring all placements are made through a tendered process.
- 4.4 Some suppliers have submitted applications for more than one agency. Applications were received for 23 suppliers with 28 IFAs. One (1) tender is not compliant and will not be admitted onto the DPS.
- 4.5 27 agencies have been successful and are proposed to be admitted onto the PDPS. Of this, there is an outstanding LADO investigation for one Supplier under a spot placement arrangement. This Supplier has met the minimum criteria and under Legal advice, are recommended entry onto the DPS. No placements will be made with the Supplier until the investigation is complete and the Council is satisfied that the Safeguarding processes are sufficient.
- 4.6 89 per cent of the successful Suppliers admitted to the PDPS are rated as

'Good' or 'Outstanding' with Ofsted. The remaining are rated as 'Requires improvement' or have yet to be inspected. These agencies will require a risk assessment completed and signed off by a senior manager before they are used. Priority will be given to the good and outstanding homes.

- 4.7 Ofsted ratings will continue to be monitored throughout the life of the DPS to reflect the latest the ratings.
- 4.8 The tender process has been successful in attracting a wider supply base. 30% of suppliers are new and not part of the LCS.
- 4.9 Of those remaining agencies who are part of the LCS, over 50% have opted to not submit their LCS prices.

5. Delivering Council Policy and Priorities

5.1 These services will contribute to the Towards a Better Newham Strategy:

- **Pillar 2:** The Council will ensure every resident under 25 is safe, happy and cared for, with positive activity to secure their long-term wellbeing
- **Pillar 3:** The Council will take action to ensure all residents are supported and enabled to access work and other opportunities in the new economy
- **Pillar 4:** The Council will make sure our residents are healthy, happy, safe and cared for, to enable them to thrive during times of recession and in the new economy
- **Pillar 8:** The Council will only welcome investment that secures a Fair Deal and Good Growth for Newham

6 Alternative options considered and rejected

6.1 The following alternative options have been considered.

6.1.1 Do nothing: Suppliers could continue to be spot purchased without a DPS, but there would be a lack of purchasing control and the element of competition to drive cost efficiencies would not influence the price of provision. Spot purchasing does not go far enough in securing better value for money and is time inefficient.

6.1.2 Operate a standard framework without the use of a DPS: This would be a 'static' framework, which would not allow new suppliers to enter the framework throughout its lifetime and would therefore reduce the flexibility available in the current and proposed systems.

6.1.3 Join another DPS: LBN has considered joining a framework or consortium with other local authorities for a framework or DPS. There is an established Dynamic Purchasing Vehicle (DPV) through the Commissioning Alliance, the

cost to joining this DPV is £936k over the lifetime of the DPV and it introduces a new IT system solution. The fee includes some contract monitoring but at a strategic level which is not responsive to emergency or individual level need and so Newham Council is not assured that it will meet our needs. The unit costs for the Commissioning Alliance DPV are not submitted upfront so it would be more challenging when planning spend. Furthermore the DPS is not Real Living wage compliant. Newham Council has invested in Fusion as a procurement solution and it is available at no additional IT cost. As suppliers find using multiple platforms prohibitive, Newham Council will continue to use secure emails for the referral process. The Newham PDPS is also open for other local authorities to join

- 6.1.4 Procure jointly with East London Authorities: Establishing a joint DPS with our neighbouring authorities can be challenging to organise as it means multiple authorities investing in the same ICT solution or joining a new IT system. Newham Council has invested in Fusion as a procurement solution and it will be available at no additional IT cost. A standalone DPS IT solution which is used in Newham Council for other services is available at a cost of £340k for the life of the DPS. This cost is prohibitive when compared to Fusion that is at a zero cost.

Establishing a Newham PDPS offers flexibility as unlimited suppliers may join and is also open to other local authorities to join. The PDPS includes the submission of pre-agreed pricing structures linked to the Real Living Wage. Suppliers have submitted core prices and additional placement costs and we anticipate control over additional placement costs and more certainty of additional costs based on bidder's submissions.

7 Consultation (see also Consultation sheet)

- 7.1 In accordance with the delegation given reports have been shared for consultation.
- 7.2 **Name of Lead Member consulted:** Councillor Sarah Ruiz, Lead Member for Children and Young People
- 7.3 **Name of officers consulted,** Steve Atherton, Director of Procurement

8 Implications

8.1 Financial Implications

- 8.1.1 It is anticipated that reductions in costs will come from more alternative placement options available on the PDPS, including the use of block contract purchasing. This means buying a pre-agreed number of beds from a supplier,

will potentially mean the rates will be at a lower cost to the Council.

- 8.1.2 It is expected that the PDPS will enable the Council to provide a consistent approach to purchasing placements at prices stated by suppliers in applications to join the PDPS.
- 8.1.3 From the bids received, a range of unit costs were submitted with a number of new suppliers submitting rates lower than current average. The average of rates submitted is 5% higher than the current average however the current average included some rates have not been reviewed for since 2016.
- 8.1.4 The PDPS does not commit the council to any given level of expenditure and there is no guaranteed level of spend with any of the suppliers admitted to the PDPS. The new rates will only apply to new placements therefore the financial implications cannot be forecast at this stage however the unit costs and total spend will be closely monitored as part of the monthly budget monitoring process. An annual report will be submitted to CMT to capture the volume and spend going through the PDPS as per Cabinet report on 3rd November 2020. The first annual report will be submitted in February 2023.

8.2 Legal Implications

- 8.2.1 The Council's statutory duties to provide care and support to those who meet the relevant criteria are already set out in the body of this report. Children's Social Care seek to provide these services in compliance with such duties.
- 8.2.2 The procurement process was conducted in accordance with the Public Contracts Regulations 2015 and was subject to the light touch regime under Regulations 74 - 76.
- 8.2.3 The Council published a contract notice on Find a Tender Service (FTS) and Contracts Finder and complied with the relevant provisions of the Council's Contract Standing Orders.
- 8.2.4 This report seeks authority to admit all candidates (listed at paragraph 3.9) who satisfied the selection criteria. There is no limit under the Regulations as to the number of candidates and the Council can admit any supplier at any time during the DPS period of validity.
- 8.2.5 There is no requirement to submit award notices when new suppliers are admitted to the DPS. However, in accordance with Regulation 50(5), the Council must publish contract award notices for specific contracts awarded under the DPS. The Council may choose to group DPS contract award notices on a quarterly basis, which must be sent within 30 days after the end of each quarter.
- 8.2.6 To award a contract/ make a placement under the DPS, the Council will need to follow the rules of the restricted procedure.

8.3 Equalities Implications

- 8.3.1 The proposed procurement process aims to place children in the most

appropriate setting for their specific needs taking into consideration any specific need relating to age, disability, transgender, pregnancy and maternity, race, religion/belief, sexual orientation, sex, marriage/Civil partnership, reducing negative outcomes which result from class or socio-economic disadvantage. Therefore, we anticipate that the procurement will result in greater equality of opportunity and ability to make more appropriate matches for individual children.

8.3.2 The decisions recommended through this report have not identified any disadvantage relating the protected characteristics.

8.3.3 An Equalities Impact Assessment (EQIA) has been completed for the DPS and will be reviewed annually.

8.4 Other Implications (e.g. HR, ICT, Property)

8.4.1 Staff resource to undertake the procurement exercise have been secured from within business-as-usual functions and includes Legal Services, Procurement, Finance and Contracts and Commissioners.

8.4.2 Commissioners will work closely with the Brokerage Team manager throughout the contract period to ensure close communications and that service types on the PDPS are responsive to changing needs of children in care

8.4.3 The DPS can be used by multiple teams and organisations therefore, we will allow other local authorities to access the PDPS through fee negotiations or contribution in kind, e.g. sharing quality assurance visits. In order to achieve this we will be developing terms for those local authorities joining at a later date.

8.4.4 As a result of the DPS we have also developed spot terms and conditions which mirror the DPS and will be rolled out for all spot placements.

9 Background Information used in the preparation of this report

9.1 Pre procurement of DPS to Commission Homes and Support Services for Looked After Children and Care Leavers Cabinet Report (03/11/2020)

9.2 Commissioning Homes Lot 4 Gateway 2 Report (28/09/2022)

9.3 Approval to award places on the DPS for Homes and Support Services for Looked After Children and Care Leavers Lot 1 Semi Independent Living (SIL) Services (Round 1) (1st February 2022)

9.4 Approval to award places on the DPS for Homes and Support Services for Looked After Children and Care Leavers Lot 2 Childrens Homes (Round 1) (1st February 2022)

CONSULTATION SHEET – COMPLETE WHERE REQUIRED OR PUT N/A

IN CONSULTATION WITH (Refer to delegation for other specific consultees)


Please check the following

- Does the decision require the agreement of or consultation of another Director, especially Finance and Legal?
- Does the decision require consultation with one or more Lead Members?

Add additional directors / members to this form as are necessary.

Only sign the report when you have received the outcome of the consultation and taken into account any comments in your decision.

Electronic signatures of any kind are accepted.

<p>SIGNATURE Officer with Delegated Powers: Corporate Director of Children & Young People Services: Tim Aldridge</p> <p>AGREED/NOT AGREED Comment: AGREED</p>	<p>Signed: </p> <p>Date: 18/11/2022</p>
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<p>Lead Member Cllr Sarah Ruiz Comment: AGREED</p>	<p>Signed: </p> <p>Date: 18/11/2022</p>
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NB Key decisions made by officers cannot be implemented until the 6th working day following the date of publication of the decision to allow members to consider whether or not to call in the decision.

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LONDON BOROUGH OF NEWHAM

OFFICER KEY DECISION

Report title	Approval to award places on the DPS for Homes and Support Services for Looked After Children and Care Leavers Lot 2 Children's Homes - (Round 1)	
Date of Meeting	1 st February 2022	
Authority to take decision	Cabinet on 3 rd November 2020 Cabinet agreed to delegate authority for approval of the admission of suppliers to the DPS throughout the life of the DPS including entering into the relevant contract documentation.	
Decision Maker	Tim Aldridge Corporate Director of Children and Young People	
Exempt information & Grounds	Yes	Grounds: Appendix 1 contains information considered to be exempt under paragraphs 3 of Schedule 12A of the Local Government Act 1972, as amended: (3) Information relating to the financial or business affairs of any particular person (including the authority holding that information).
Wards Affected	All	
Appendices (if any)	1. Appendix 1 for Commissioning Homes Round 1 Lot 2 Moderated scores	
Reason for Urgency (only where item was not included in the forward plan)	N/A	

1 Purpose of report

- 1.1 This report seeks authorisation to admit the children's homes suppliers on to the Pseudo Dynamic Purchasing System (PDPS) to support the purchasing of placements in children's homes from 28th February 2022 for four years with the option to extend for a further four years.

- 1.2 The estimated spend for Lot 2 across the lifetime of the PDPS is £69,120,000. Contracts will be awarded to the successful suppliers as required and the value of spend with individual suppliers will vary. The PDPS does not commit the council to any given level of expenditure and there is no guaranteed level of spend with any of the suppliers admitted to the PDPS.

2 Proposed decision

- 2.1 For the reasons set out in the report and its appendices, the Corporate Director of Children and Young People's Services is recommended to approve:

- 2.1.1 Admission of eleven suppliers with 64 children's homes listed below on to the PDPS for Round 1 Lots 2; and entering into the relevant contract documentation.

List of Suppliers of Lot 2a and lot 2b

Lot 2a		
Supplier	Number of homes	Number of places for children and young people
Bryne Melyn Care Limited	10	31
Care 2 Share	3	17
Compass Fostering	7	40
Family First Fostering	2	5
Five Rivers Childcare Ltd	3	17
Gordon Care Services Ltd	1	4
Hillcrest Children's Services Ltd	13	94
Hillcrest Children's Services (2) Limited	11	46
James Kids Homes Ltd	1	3
PJL Healthcare Limited	2	20
Progress Children's Services Ltd	5	27
	58	304
Lot 2b		
Bryne Melyn Care Limited	5	5
Five Rivers Childcare Ltd	1	1
	6	6

3 Reason for proposed decision

- 3.1 To ensure that Newham Council delivers its statutory duty and achieves good value and quality when placing children in care with independent residential children's home providers.
- 3.2 That Newham Council is compliant with public contract regulations.

- 3.3 28 suppliers expressed an interest in the tender for Round 1, Lot 2 with 12 of the 28 submitting bids for the initial Round submission. Bids were received for homes based in and around Newham as well as further afield. These homes should support the complexity of needs presented by our children and young people covering areas including physical health, mental and emotional health and wellbeing, risk from others and risk to others.
- 3.4 The evaluation process and outcome: Tenders were evaluated based on 60% quality and 40% price. Applications were received for seventy four (74) children's homes from the suppliers providing a range of homes from small, medium and large organisations. Sixty four homes have been successful and will be admitted onto the PDPS. Of the remaining ten homes that are not accepted on the PDPS:
- 3.4.1 nine (9) homes are registered in Wales (a minimum requirement was for homes to be registered with Ofsted).
- 3.4.2 one (1) has safeguarding concerns that are currently being investigated
- 3.5 86 per cent of the successful homes admitted to the PDPS are rated as good or outstanding with Ofsted. The remaining homes are rated as 'requires improvement' or have yet to be inspected. These homes will require a risk assessment is completed and signed off by a senior manager before they are used. Priority will be given to the good and outstanding homes.
- 3.6 A decision to admit one of the successful suppliers on to the PDPS is pending the outcome of an Ofsted investigation (details can be found in Appendix 2). A decision will be made once the investigation is completed.
- 3.7 Ofsted ratings will continue to be monitored throughout the life of the PDPS and homes can improve their rating or their rating can deteriorate.
- 3.8 There are two suppliers that have submitted bids that we are currently working with. When we compare bids submitted by the two suppliers we are currently using, there has been no increase in cost. These two local suppliers are used consistently by Newham Council.
- 3.9 From the bids received, the average unit cost per child per week for Lot 2a Group Children's Homes and 2b Solo Units for core services is £4,338 per week which is higher than the costs of residential homes where our children are currently placed at a unit cost of £4,193 per child per week. This is the basic unit cost excluding the additional amounts we are paying for education and additional support. There is a difference of £145 per week, however this is not a like-for-like comparison as it is based on bids received rather than the utilisation of placements.
- 3.10 It is expected that the PDPS will be the vehicle to manage placements more effectively, secure good and better outcomes for children in care and identify opportunities to improve value for money.

4 Alternative options considered and rejected

Option 1: Do nothing - The council may choose to 'do nothing'. Newham Council would continue to spot purchase children's homes and use only London Care Services contracted providers. However both of these approaches are not compliant with public contract regulations.

Option 2: Operate a standard framework without the use of a DPS: This would be a 'static' framework, which would not allow new suppliers to enter the framework throughout its lifetime and would therefore reduce the flexibility available in the current and proposed systems.

Option 3: Join an existing DPS- the only existing DPS is run by Commissioning Alliance and the cost of the scheme was prohibitive and would introduce a new IT system solution. The cost to joining this DPS is £936k for the life of the DPS and it introduces a new IT system solution. The fee includes some contract monitoring but at a strategic level which is not responsive to emergency or individual level need and so Newham Council is not assured that it will meet our needs. The unit costs for the Commissioning Alliance DPS are not submitted upfront so it would be more challenging when planning spend. Furthermore the DPS is not Real Living wage compliant. Newham Council has invested in Fusion as a procurement solution and it is available at no additional IT cost. As suppliers find using multiple platforms prohibitive, Newham Council will continue to use secure emails for the referral process. The Newham PDPS is also open for other local authorities to join.

Option 4: Procure jointly with East London Authorities: Establishing a joint DPS with our neighbouring authorities can be challenging to organise as it means multiple authorities investing in the same ICT solution or joining a new IT system. Newham Council has invested in Fusion as a procurement solution and it will be available at no additional IT cost. A standalone DPS IT solution which is used in Newham Council for other services is available at a cost of £340k for the life of the DPS. This cost is prohibitive when compared to Fusion that is at a zero cost.

Option 5: Establish a Newham PDPS This option offers flexibility as unlimited suppliers may join and is also open to other local authorities to join. The PDPS includes the submission of pre-agreed pricing structures Linked to the Real Living Wage. Suppliers have submitted core prices and additional placement costs and we anticipate control over additional placement costs and more certainty of additional costs based on bidder's submissions.

The PDPS will have no minimum value, nor will any commitment to expenditure by the Council be stipulated within the contract itself. Expenditure will only be incurred when referrals are made.

5 Background

- 5.1 Section 22G of The Children Act 1989 requires councils to provide, as far as is reasonably practicable, accommodation for children looked after in their local area which meets the needs of those children.
- 5.2 Newham Council is part of the London Care Services operated by London Councils. The rates are agreed for London authorities however the approach is not compliant with public contract regulations. Newham currently spot purchases the majority of residential homes and associated support from a range of suppliers using agreed fees negotiated through London Care Services and some residential placements through a block contract arrangement with the North East London Commissioning Partnership.
- 5.3 As at 30th November 2021, there were 432 Children Looked After.

Residential children's home placements

Children in Care in residential children's homes								
Year	2017-2018		2018-2019		2019-2020		2020-2021	
Children and young people	No.	%	No.	%	No.	%	No.	%
	44	10.9%	44	11.7%	31	7.5%	32	8.4%

Source: Azeus report CLA at 31st March

6 Consultation

- 6.1 In accordance with the delegation given reports have been shared for consultation.
- 6.2 **Name of Lead Member consulted:** Councillor Sarah Ruiz, Lead Member for Children and Young People
- 6.3 **Name of officers consulted:** Rose Young, Director of Procurement
- 6.4 The recommendations in this report were considered and endorsed by the Gateway Panel on 24 November 2021.

7 Implications

7.1 Financial Implications

- 7.1.1 Directorate Finance Comments
- 7.1.2 It is anticipated that reductions in costs will come from more alternative placement options available on the PDPS, including the use of block contract purchasing. This means buying a pre-agreed number of beds from a supplier, will potentially mean the rates will be at a lower cost to the Council.

- 7.1.3 It is expected that the PDPS will enable the Council to provide a consistent approach to purchasing placements at prices stated by suppliers in applications to join the PDPS.
- 7.1.4 From the bids received, the average unit cost per child per week for Lot 2a Group Children's Homes and 2b Solo Units for core services was not comparable to the costs of residential homes where our children are currently placed as this is not a like for like comparison. However, there had not been an increase in weekly charges submitted for the two homes currently being utilised by Newham Council. The PDPS gives an opportunity to engage with the suppliers more effectively to create opportunities for developing more services.
- 7.1.5 The PDPS does not commit the council to any given level of expenditure and there is no guaranteed level of spend with any of the suppliers admitted to the PDPS, any financial benefits cannot therefore be forecast at this stage, but the unit costs and total spend will be closely monitored. An annual report will be submitted to CMT to capture the volume and spend going through the PDPS as per Cabinet report on 3rd November 2020. The first annual report will be submitted in February 2023.

7.2 Legal Implications

- 7.2.1 The procurement process was conducted in accordance with the Public Contracts Regulations 2015 (PCR 2015) and was subject to the light-touch regime (LTR) under Section 7 Social and Other Specific Services.
- 7.2.2 Under Regulation 76 of the PCR 2015, the Council is free to determine a LTR contract award procedure, provided that procedure is at least sufficient to ensure compliance with the principles of transparency and equal treatment of economic operators.
- 7.2.3 The Council published a contract notice on Find a Tender Service and Contracts Finder (FTS) and complied with the relevant provisions of the Council's Contract Standing Orders and principles of the PCR.
- 7.2.4 Under paragraph 2.4 of the Scheme of Delegation 2.4. "*Where a function or power falls to be discharged by an officer, a more senior post holder in the Directorate, Division or Service may also discharge that function or power, unless the officer has been expressly prohibited from doing so.*"
- 7.2.5 In line with the Council's Constitution, contracts with a value of at least £250,000 must be executed as a deed by the affixing of the corporate seal by Legal Services.
- 7.2.6 The PCR 2015 require contract awards with a value of at least £25,000 (net of VAT) to be published on Contracts Finder.

7.3 Equalities Implications

7.3.1 This procurement will impact on children in care positively. The background and life experiences of children and young people in care will shape the nature and level of care packages provided.

7.4 Other Implications relevant to this report:

7.4.1 Commissioners will work closely with the Brokerage Team manager throughout the contract period to ensure close communications and that service types on the PDPS are responsive to changing needs of children in care.

7.4.2 Successful suppliers will be prioritised for use using their overall value for money score.

8 Background Information used in the preparation of this report

8.1 Cabinet Report 3rd November 2020

IN CONSULTATION WITH (Refer to delegation for other specific consultees)

Director of Procurement : Rose Younger AGREED/NOT AGREED Comment	Signed: Print Date:
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Lead Member - Cabinet Member - Education and Children Social Care (Statutory Lead member) : Sarah Ruiz Comment	Signed: Print Date:
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SIGNATURE Delegated Officer: Corporate Director of Children and Young People (DCS) : Tim Aldridge AGREED/NOT AGREED:	Signed: Print Date:
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NB This decision cannot be implemented until the 6th working day following the date of publication of the decision.

Equality Impact Assessment Screening Tool

Equality Impact Assessments help the Council to comply with its public sector duty under the Equality Act 2010 to have due regard to equality implications. EIAs also help services to be customer focussed, leading to improved service delivery and customer satisfaction.

The Council understands that whilst its equalities duty applies to all services, it is going to be more relevant to some decisions than others. We need to ensure that the detail of Equality Impact Assessments (EIAs) are proportionate to the impact of decisions on the equality duty, and that in some cases a full EIA is not necessary.

This tool assists services in determining whether plans and decisions will require a full EIA. It should be used on all new policies, projects, functions, staff restructuring, major development or planning applications, or when revising them.

Full guidance on the Council’s duties and EIAs and the full EIA template is available at [Equality Impact Assessments](#).

Proposal/Project/Policy Title	Request to join and access to the London Borough of Newham’s Dynamic Purchasing System (DPS) for the provision of Children’s Residential Care Homes and Independent Foster Care Agency Services
Service Area	Children’s Care and Support (Commissioning)
Officer completing the EIA Screening Tool	Claudia Wakefield, Commissioning Manager
Head of Service	Heather Storey, Head of Commissioning Children’s
Date	15/01/2024
Brief Summary of the Proposal/Project/Policy Include main aims, proposed outcomes, recommendations/decisions sought.	By joining and accessing the London Borough of Newham’s Dynamic Purchasing System (DPS), LBBB will be provided access to a pool of good quality pre-approved providers for Children’s Residential Care Homes and Independent Foster Care Agencies, through which we will be able to meet the needs of our Looked After Children aged 0-18 (up to a maximum age of 25). The aim of the DPS is to source placements that best meet the individual needs of the child or young person and it is acknowledged that these needs are often ongoing. Placements will provide children and young people with suitably matched high-quality homes, with 24/7 support around outcomes such as health and wellbeing, educational attainment and daily living. The DPS will assist LBBB in meeting its statutory duty to ensure that there is sufficient, good quality, and safe provision for the

	<p>children in its care. This provision represents value for money and will be sourced in compliance with the Public Contracts Regulations 2015 (PCR 2015), and the Council’s Contract Rules, to ensure best value for both the children and the Council. It is also important to note that Section 149 of the Equality Act requires public authorities to remove or minimise disadvantages affecting any particular equality group. This means that giving due regard to Equality will require the procurement process, tender specification and award of the tender to take into account the needs of care leavers who are disabled or where appropriate, commission specialist services or require main suppliers to use specialist subcontractors to respond to the specific disability support needs of care leavers. In the event that a looked after child or care leaver with physical and sensory disabilities and long-term conditions required specialist accommodation and support services these would be commissioned on a case-by-case basis.</p>	
Protected characteristic	Impact	Description
<p>Age</p>	<p>Positive impact (L)</p>	<p>This proposal will provide looked after children with good quality accommodation arrangements with access to education, health and wellbeing support whilst also providing seamless transitional arrangements.</p> <p>Access to the DPS will provide a range of high-quality Providers that will meet the diverse needs of children and young people in the Borough. Young people with complex needs will be given bespoke individual support.</p> <p>This proposal will also ensure that LBBB has a range of high-quality assured Providers capable of providing accommodation and support to young people within LBBB and in neighbouring boroughs to a very high standard.</p> <p>All looked after children and young people from ages 0-18 (up to a maximum age of 25) will be catered to, with placements that best meet the individual needs of the child or young person.</p> <p>Through standards established in the service specifications, targets set and contract monitoring, Providers will be required to demonstrate how they are meeting the emotional needs of our</p>

		children and young people, to ensure that any issues are addressed promptly.
Disability	Positive impact (L)	<p>The current Newham DPS has considered the needs of children and young people who have a complex need and require enhanced levels of care for their complex needs. This element of the service for Children's Residential Care Homes is covered under Lot 2b and for Independent Foster Care Agencies is covered under Lot 4b of the Agreement.</p> <p>Through standards established in the service specifications, targets set and contract monitoring, all young people with strength and difficulties questionnaire (SDQ) scores of 17 and over will be referred to CAMHS and receive a service within 4 weeks. This proposal will contribute towards ensuring that children in care are healthy and emotionally resilient.</p> <p>Providers will also be expected to support children and young people to access education (mainstream/ special schools), training and meaningful activities.</p> <p>In the event that a looked after child or care leaver with physical and sensory disabilities and long-term conditions required specialist accommodation and support services these would be commissioned on a case-by-case basis.</p>
Gender re-assignment	Positive impact (L)	<p>All looked after children and young people will be supported as appropriate, with placements and tailored support that best meet the individual needs of the child or young person.</p> <p>Capturing gender, identity and sexual orientation will be achieved through standards established in the service specifications, targets set and contract monitoring; Providers will be required to demonstrate how they are meeting these needs. Providers will also be required to submit details of incidents</p>

		and their response to keep young people safe including bullying, issues related to their sexuality or sexual identity and other protected factors.
Marriage and civil partnership	Not applicable (N/A)	Not applicable.
Pregnancy and maternity	Positive impact (L)	Pregnant young people in care will be supported through their allocated key workers within the provision to access appropriate anti-natal and post-natal support.
Race	Positive impact (L)	<p>All looked after children and young people across the diverse population of LBBB will be supported as appropriate, regardless of their race. Placements and tailored support that best meet the individual needs of the child or young person will be put into place through the DPS. Furthermore, unaccompanied asylum-seeking children (UASC) will be supported to settle into the community through their placements.</p> <p>Providers will also be expected to address cultural needs through providing interpreting, advocacy support and befriending services as required.</p>
Religion	Positive impact (L)	<p>All looked after children and young people in care across the diverse population of LBBB will be supported as appropriate, regardless of their religion. Placements and tailored support that best meet the individual needs of the child or young person will be put into place through the DPS. Providers will also be expected to support children and young people with practicing their faith and to provide support with faith celebrations and festivals.</p>
Sex	Positive impact (L)	All looked after children and young people will be supported as appropriate, with placements and tailored support that best meet the individual needs of the child or young person.

		<p>Capturing gender, identity and sexual orientation will be achieved through standards established in the service specifications, targets set and contract monitoring; Providers will be required to demonstrate how they are meeting these needs. Providers will also be required to submit details of incidents and their response to keep young people safe including bullying, issues related to their sexuality or sexual identify and other protected factors.</p>
Sexual orientation	Positive impact (L)	<p>All looked after children and young people will be supported as appropriate, with placements and tailored support that best meet the individual needs of the child or young person.</p> <p>Capturing gender, identity and sexual orientation will be achieved through standards established in the service specifications, targets set and contract monitoring; Providers will be required to demonstrate how they are meeting these needs. Providers will also be required to submit details of incidents and their response to keep young people safe including bullying, issues related to their sexuality or sexual identify and other protected factors.</p>
Socio-Economic Disadvantage¹	Positive impact (L)	<p>All looked after children and young people will be supported as appropriate, with placements and tailored support that best meet the individual needs of the child or young person.</p> <p>Children and young people who enter care are often from families who experience socio-economic disadvantage² and care-experienced people continue to experience socio-economic disadvantage throughout their lives³. This makes finding</p>

¹ Socio-Economic Disadvantage is not a protected characteristic under the Equality Act. London Borough of Barking and Dagenham has chosen to include Socio-Economic Disadvantage as best practice.

²(https://assets.publishing.service.gov.uk/media/5a7c4b2d40f0b6321db3836b/33571_2901304_CMO_Chapter_11.pdf,p5)

³(<https://www.sciencedirect.com/science/article/abs/pii/S0190740922002560#:~:text=In%20essence%2C%20care%20leavers%20continue,as%20causes%20of%20occupational%20disadvantage.>)

		appropriate placements for each child and young person, that set them up as well as possible for later life, important for combatting inequality.
How visible is this service/policy/project/proposal to the general public?		Medium visibility to the general public (M)
What is the potential risk to the Council's reputation? Consider the following impacts – legal, financial, political, media, public perception etc		High risk to reputation (H)

If your answers are mostly H and/or M = **Full EIA to be completed**

If after completing the EIA screening process you determine that a full EIA is not relevant for this service/function/policy/project you must provide explanation and evidence below.

This screening tool has identified that a full EIA is not required at this time, with membership of the Newham DPS resulting in a positive impact against all protected characteristics listed above; however, the impact on protected characteristics will continue to be reviewed and monitored over the course of LBBB's membership of the Newham DPS. Another EIA screening will be completed in March 2026, prior to LBBB deciding if it would like to continue with the Newham DPS arrangement for a further 4 years, from March 2026 until March 2030.

Please submit the form to CE-strategy@lbbd.gov.uk and include the above explanation as part of the equalities comments on any subsequent related report.

Risk Register- Newham DPS

APPENDIX 4

ID	Date raised	Risk description	Likelihood of the risk occurring	Impact if the risk occurs	Severity <i>Rating based on impact & likelihood.</i>	Owner <i>Person who will manage the risk.</i>	Mitigating action <i>Actions to mitigate the risk e.g. reduce the likelihood.</i>	Contingent action <i>Action to be taken if the risk happens.</i>
1	12/01/2024	There is no guarantee that Barking and Dagenham will be able to fully meet its demand for placements through the Newham DPS	Medium	High	Medium	Commissioning Team	The DPS will be open to new Providers for up to eight years so there is no cut off period for new entrants. Providers have informed that opportunities for block contracts and partnership work will be attractive and a strong reason to enrol on the DPS. Market warming events and consultation held by Newham with Providers have also been positive. Local authorities that are joining the DPS are also being encouraged to promote the DPS to their Providers.	Maintaining some spot purchase arrangements will mitigate this risk. LBBD will promote the DPS to its current Providers, to encourage them to join the DPS. LBBD will also continue to promote its in-house foster carer scheme and undertake ongoing recruitment.
2	12/01/2024	The DPS may result in higher unit costs	Medium	High	Medium	Commissioning Team	The high demand for homes especially for children and young people with complex and challenging needs may result in higher unit costs especially as we want to have greater emphasis on achieving good quality outcomes. The impact of better outcomes should be better medium to long-term value for money as placements are more stable even if the initial unit cost is higher. Once young people are settled then the higher costs initially paid should be reduced as support needs lessen. In the long-term, if the outcomes and stability are better, then the overall unit costs can be lowered.	The procurement contract will renew on an annual basis with new fees set each year thereby driving competition. Although prices are agreed - officers always negotiate with Providers to ensure best value. Fees would only be applicable to new arrangements but some Providers have indicated that they are willing to transfer contracts under the DPS. There are significant longer term overarching benefits of working together with multiple authorities, including more negotiating power with fees and greater market shaping.

3	12/01/2024	Not all current Providers are/will be contracted through the DPS arrangement so there is a likelihood that it will not be possible to maximise the supply of placements or the potential for long term discounts.	Medium	Medium	Medium	Commissioning Team	LBBB can use individual authorities' good working relationships with Providers not on the DPS to promote them to join, on behalf of the Partnership. Furthermore, any new Providers on the DPS that we are not currently using, will support increasing our placements capacity, which is a benefit that outweighs the risk.	The benefits of joint working with other local authorities will bring efficiencies, which will outweigh any associated risks. LBBB can also continue to encourage any Providers not on the DPS, to join this.
4	12/01/2024	The risk of market failure cannot be ruled out	Low	High	Low	Commissioning Team	The DPS is already established with 27 providers, with more market engagement currently taking place to attract more Providers to the DPS. LBBB is currently working with its existing Providers to encourage them to join the DPS. The DPS will also support creating a sustainable pricing structure and therefore is attractive to Providers with fair fee reviews and annual uplift considerations, which should reduce the risk of Providers joining and then leaving the DPS.	The DPS will be open to new Providers for up to eight years so there is no cut off period for new entrants. LBBB and other participating local authorities will work with their existing Providers to encourage them to join the DPS.
5	12/01/2024	There are additional costs to LBBB for joining the Newham DPS	Low	Low	Low	Cost	Whilst there is a fee to join the Newham DPS, this is considerably lower than those required for LBBB's current arrangements with the Commissioning Alliance (80% reduction in cost). Newham's Contract Management team, Commissioning team and Strategic Procurement team will work together to operate the DPS and enrol new Providers so there is little impact on LBBB in this respect.	Terms & Conditions - The Termination Clause states that either Party may terminate the DPS Access Agreement upon giving at least six months' notice to the other Party; as such, LBBB could leave the Newham DPS with six months' notice if it wished and look to explore alternative options.

CABINET**16 April 2024**

Title: Procurement of Reablement At Home Service	
Report of the Cabinet Member for Adult Social Care and Health Integration	
Open Report	For Decision
Wards Affected: All	Key Decision: Yes
Report Author: Carol O'Brien, Lead Commissioner Reablement	Contact Details: E-mail: carol.obrien@lbbd.gov.uk
Accountable Director: Chris Bush, Commissioning Director for Care and Support	
Accountable Executive Team Director: Elaine Allegretti, Strategic Director, Children and Adults	
<p>Summary</p> <p>Local authorities through the Adult Social Care Services have a duty to prevent, reduce or delay needs for care and support (Care Act 2014 s2) for all adults including carers; this means early intervention to prevent deterioration and reduce dependency on support from others. Reablement is one of the services designed to fulfil this duty. Currently the Council does not have a formal reablement contracted service.</p> <p>This report sets our Adults Social Care commissioning intentions for developing a new Reablement at Home Service.</p> <p>Reablement is a short-term care service offered to individuals at home, who are unwell and unable to look after themselves due to a crisis in their lives. Typically, this will be due to an accident, poor health or the early onset of a long-term health condition. It is free of charge for up to six weeks (in line with the Care Act 2014 s2.6).</p> <p>It will be designed to support residents in need to regain the ability to look after themselves. At the end of the intervention the aim is for them to be able to return to living independently, outside of the care system.</p> <p>Alternatively, it is acknowledged that some individuals may still need long term care services e.g. Homecare. If reablement can contribute to supporting new service uses to recover sufficiently to have a reduction in their care hours and complexity of support reduced within the first few weeks this will have a positive impact on both the individual in need and the pressure faced by the borough in relation to the cost of care.</p> <p>Currently, the authority has set up and is running two short-term pilots to test and trial different models of reablement. The learning from these pilots will inform the final service design for the new service that this report is seeking approval to commission.</p>	

The pilots are due to end March/April 2024, but work is underway to extend both pilots for continuity and to ensure an efficient transition from the Adult Crisis Intervention service to reablement service:

- Scheme One – Essex Cares Limited (ECL) who have a short-term contract.
- Scheme Two – Direct Award from the Framework for three homecare providers (Reablement Three)

Both will continue to the point that the newly commissioned service is awarded and mobilised thereby ensuring that residents of Barking and Dagenham continue to benefit from a reablement service led by therapist and designed to support individuals to recover.

Reablement is an invest to save service held within the Medium-Term Financial Strategy Proposals for Adult Services in 2024/25. It is designed to provide a short-term service at home (it will be per hour a higher rate than a traditional home care service) however, the longer an individual is diverted from entering homecare or any other care service commissioned by the council has a positive impact on the cost of care for the Council.

The intention around the newly commissioned service is to enter a four-year with two times one-year extensions to a maximum of six years overall. The table below shows the annual value and the targeted reablement hours per year. This does not incorporate any annual uplifts that may be required during the life of the contract.

Year	Reablement Hours	Annual Budget	Four Year Contract Value
1	55380	£1,600,000.00	
2	58980	£1,704,000.00	
3	62813	£1,831,800.00	
4	67524	£1,969,185.00	£7,104,985.00
5	72589	£2,126,719.80	
6	78396	£2,296,857.38	
Total	395682	£11,528,562.18	

Funding for the extension of the pilots and provision of the new service will be via redirecting the budget for Adult crisis service to reablement. For 2024/25 the budgeted spend is £1,600,000 providing approximately 55,380 reablement hours over a year.

Recommendation(s)

The Cabinet is recommended to:

- (i) Note that the two reablement pilot schemes were extended into the 2024/25 financial year and shall terminate upon the award / mobilisation of the new reablement provision;
- (ii) Agree that the Council proceeds with the procurement of a contract for Reablement at Home arrangements in accordance with the strategy set out in the report, subject to the endorsement of the Procurement Board to the exact model of reablement to be procured;
- (iii) Authorise the Strategic Director, Children and Adults, in consultation with the Cabinet Member for Adult Social Care and Health Integration, the Strategic

Director, Resources and the Head of Legal, to conduct the procurement and award and enter into the contract(s) and all other necessary or ancillary agreements to fully implement and effect the proposals, including any periods of extension.

Reason(s)

The procurement exercise will ensure compliance with the Council's Contract Rules and the Public Contracts Regulations 2015, ensuring due processes are followed and assist in achieving the priorities outlined below.

Developing a dedicated reablement service with the relevant expertise in supporting our residents to recover and regain the ability to live independent of the care system, relates to three of the Councils' strategic priorities:

- Priority One, Residents are supported during the current Cost-of-Living Crisis.
- Priority Two, Residents are safe, protected, and supported at their most vulnerable.
- Priority Three, Residents live healthier, happier, independent lives for longer.

1. Introduction and Background

1.1 Reablement is a service that is expected to be:

- For a short period of time up to and no longer than six weeks.
- Provide support and care based on achieving personal goals for an individual in relation to recovering from a period of ill health or a crisis in the person's life that has inhibited their ability to care for themselves 'temporarily' they clearly have the potential to improve.
- Which might mean at the end of reablement they will:
 - Exit the service as they no longer require ongoing care
 - OR just as importantly the level of ongoing care that they need has reduced and can be significantly less than the initial assessment of needs.

1.2 Most clients of the reablement service are those being discharged from hospital who need time to recover and require support at home. However, it should also be a service that prevents an individual from a crisis that may result in either a hospital admission or becoming dependent on long-term care services.

1.3 Barking and Dagenham does not have a contracted dedicated specialist reablement service.

1.4 Reablement is closely connected to and can be confused with Homecare. And many local authorities have in the past commissioned their homecare agencies to deliver this service. The simple distinction is that:

- Homecare agencies care for and undertake personal care tasks for the person receiving the service.
- Reablement provides a safe environment and support to enable a person to undertake personal care tasks and other daily living activities for themselves.

- 1.5 The service model for reablement in Barking and Dagenham is currently referred to as the Crisis Service which is commissioned through spot purchasing care via providers on the Homecare Framework.
- 1.6 Most residents essentially receive a period of free care services and then default into long-term homecare.
- 1.7 In 2022/23, Barking and Dagenham were 26th out of 32 London Boroughs in relation to residents not requiring long term care services after receiving a reablement service. The London average is 74% and Barking and Dagenham achieved 56.8%.
- 1.8 It is estimated this year (2023/24) that there will be approximately 1,010 crisis/reablement services which equates to approximately 4,000- crises care hours a month (estimated to be 51,000 hours for a year). As required under the Care Act 2014 S2.6 these are free care hours. There is a drop in relation to the number of packages delivered in the last two years 1,304 (2021/2) up to 1,373 (2022/3).
- 1.9 The commissioning intentions are focused on shifting:
- from spot purchased crisis services with homecare agencies whose business model is set up for long-term care
 - to utilising the services of agencies who have established an interest, expertise and care model that supports recovery and enables people out of the care system.
- 1.10 The expectation is that this would then start to show a more positive outcome for the residents of Barking and Dagenham which has the added benefit of then starting to influence the level of demand/cost for long term care services.

Care Act 2014/Health and Care Act

- 1.11 The Care Act (including amendments to this act) has a number of aspects directly relevant to the delivery of Reablement. These will need to be taken into consideration as the model and the specification for the future service is developed. This includes:
- **Wellbeing and prevention** – The promotion and maintaining of a person's wellbeing enshrined in law. As well as meeting the individual's wellbeing outcomes the service will be required to contribute to the prevention, reduction and delay of a person's needs.
 - **Person-centred, person-led processes** – Central to the wellbeing principle is the ethos that the individual is best placed to make decisions about their care and support, and that a person-centred system takes account of the individual's views, wishes and beliefs. The successful provider will be required to involve the service user in all aspects of their care.
 - **Personalisation** – Independence, choice and control are key themes of the Care Act which aims to complete the mainstreaming of personalisation and stimulate the proliferation of choice of services to meet different needs (and/or meet those needs differently).

- 1.12 The Health and Care Bill¹ looks to bring about a closer integration between health and social care and improve outcomes for people. This is further detailed in People at the Heart of Care: adult social care reform white paper² the paper identifies that the top 3 priorities for people who require care and support are:
- Remaining independent.
 - Having access to the internet, phone and technology.
 - Being able to stay in my current or own home.
- 1.13 This procurement exercise supports all three of these priorities, by encouraging independence and autonomy for people in their own home through actively working with people to recover at home (therapy support), develop a 'reablement care technology pack' as a taster for care tech services.

Service Models within Barking and Dagenham and Across London Boroughs

- 1.14 There are a variety of models to consider and some learning from our own experiences alongside other London Boroughs.
- 1.15 Currently, the crisis service within Barking and Dagenham is the reablement service. Most residents in need of support primarily from hospital discharge receive care from a provider on the homecare framework after four weeks they are assessed for long term care needs. A survey in November 2023 of the homecare framework providers indicated that only one had access to a therapist for reablement.

Models Across London

- 1.16 The following analysis refers to new clients. These are individuals not in receipt of long-term care services at the time of receiving reablement. The success rate is reference to the national performance measure that all adult social care systems report on – this counts the number of new clients who left reablement with no-ongoing care needs/sometimes referred to as self-caring.

An Inhouse model. Most of these services stem from a local authority opting to keep their former homecare provision and converting it into a reablement services. Feedback on these is that they are very expensive to retain. Two local authorities with an inhouse reablement service are Islington who are 9th on the London Benchmark table with the second lowest number of new clients achieving an 86% success rate and Tower Hamlets who are 28th with a mid-range of new clients achieving a success rate of 48%.

A Framework or a Dynamic Purchasing System accessing Homecare Agencies. The experience of this over the years has been that authorities have merged the tender for homecare and reablement into a single procurement. And essentially mixed a few local homecare providers into a reablement 'lot'. The dynamics then providing homecare and/or reablement becomes blurred. Camden have just moved away from this model but in 2022/23 they had a framework and

¹ <https://publications.parliament.uk/pa/bills/cbill/58-02/0140/210140.pdf>

² https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1037663/people-at-the-heart-of-care_asc-form-print-ready.pdf

were tied with Barking and Dagenham 25th/26th with a similar number of clients with a success rate of 57%.

A locality model commissioning a provider per area - this is the model that Camden has now moved to.

A single provider – Similar to the inhouse provision, this relies on one provider to provide a reablement service. However, this uses specialist private providers to do so. They will often work across a whole borough and might support more than one borough. Currently in one of our pilots we are utilising Essex Cares Limited who are such a provider. Southwark had a large reablement provider and are 7th with a success rate of 90% and Redbridge who are 2nd/3rd on the list with a success rate of 94%

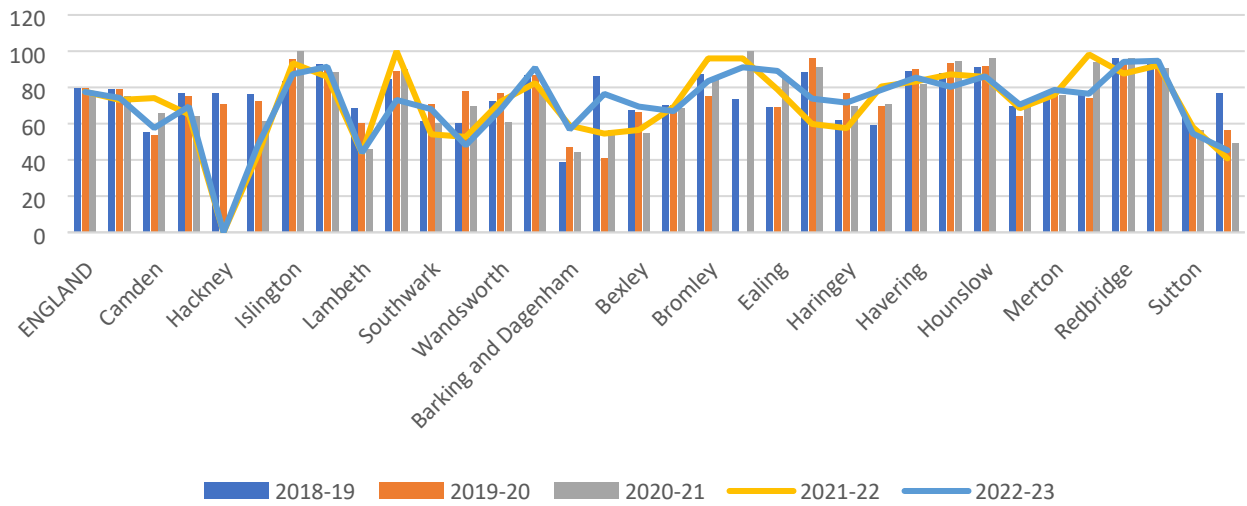
A hybrid system - Croydon has a mixed model, they have an in-house reablement team which is part of the multi-disciplinary team 'One Croydon' and is focused on hospital discharges. The plan is to build capacity in the in-house service to move to 50/50 split between the in-house provision and 8 providers on a dynamic purchasing system with a LOT specifying reablement. They are 4th highest performer in London with a success rate of 91% but a fairly low number of clients. This year they are looking for more efficiencies they have managed to reduce care needs within the first 7 days. They have achieved this by a multi-disciplinary team led by a therapist holding oversight of all residents in the service. This last element of their programme of work is similar to the approach being taken on a smaller scale within the Barking and Dagenham pilot - the framework three (the second scheme (pilot)) are being directly supported by a small reablement team within Adult Social Care.

Integrated Health and Care Provision - Greenwich has a complex integrated model at the core of their system they have an in-house (within the authority) provider arm. This is a small service and does not have capacity for the volume of work. Therefore, in their recent Homecare Tender they have made it a requirement that up to 12 to 14 home carers are required to work for short periods of time within a rotation scheme. They receive training and work alongside the councils' enablers before returning to their agency. This builds capacity within their current inhouse system whilst also building skills and resilience within the care sector. Access to reablement therapist has been via their community health provider.

1.17 Table 1 below shows across London the percentage of residents who received reablement who were able to leave the service with no-ongoing care needs sometimes referred to as self-caring.

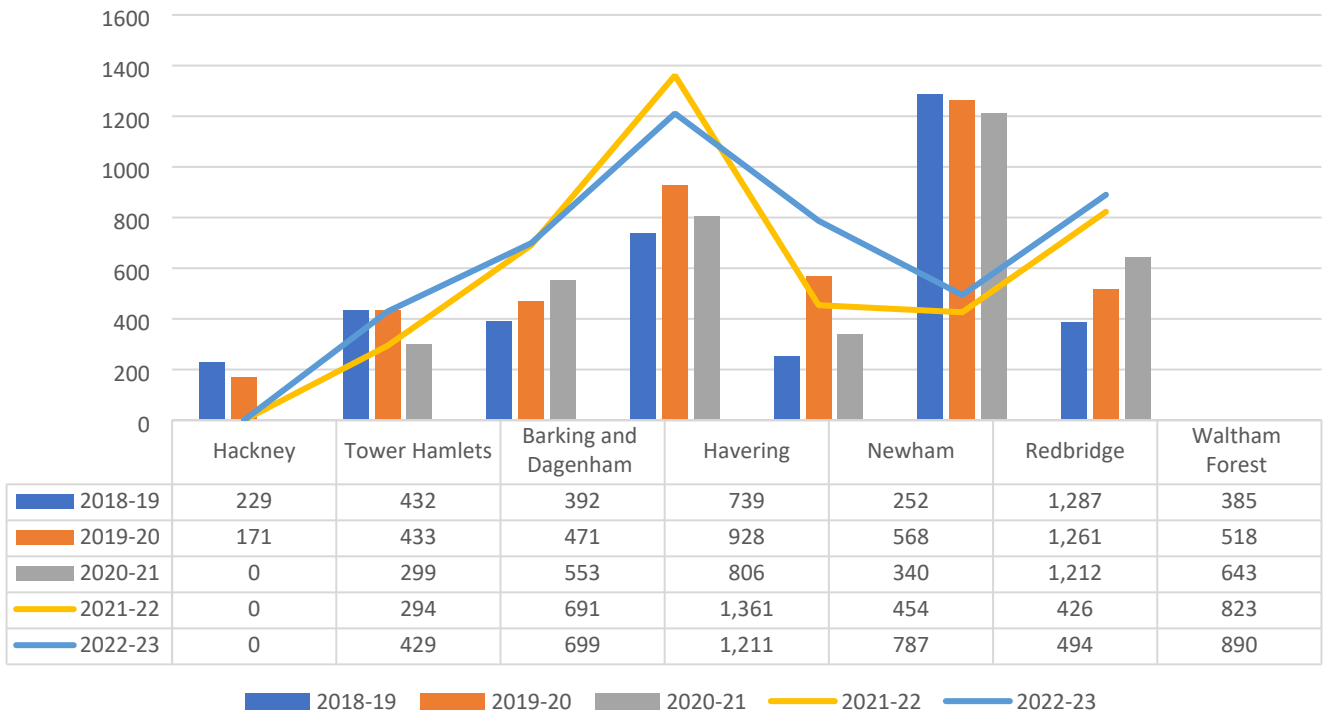
- Many in the sector highlight that patterns and trends for reablement have changed since COVID due to more complex needs and ill health of those leaving hospital and accessing reablement services.
- There is a strong trend to show a steady outturn from 2018 to 2020 with reablement dropping during 2020/21. With a small number showing an improvement in reablement outcomes post Covid which does include Barking and Dagenham, but the authority was starting from a poor baseline 39% in 2018-19.

Table One
Percentage of Residents with no ongoing care needs
After Reablement London 2018 to 2023

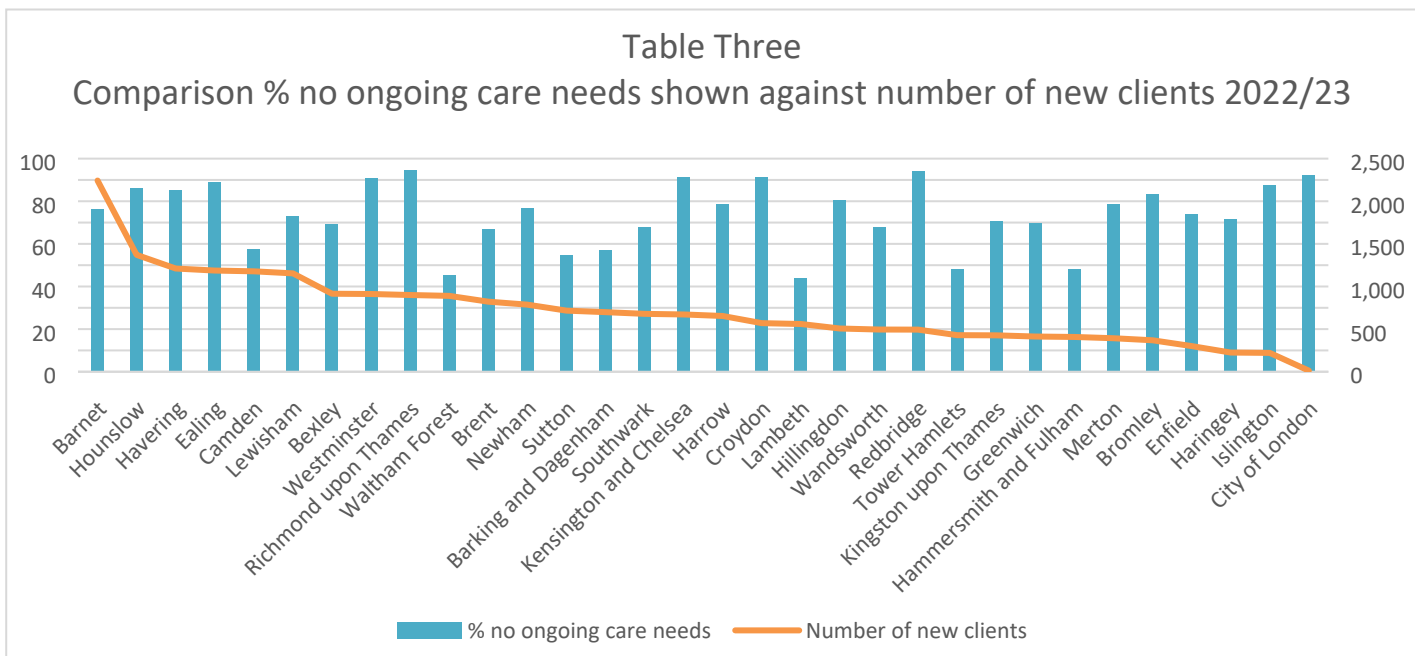


1.18 There are only ten London boroughs that show an increase in the number of residents accessing Reablement since Covid. Four of those are based in the East London Corridor (Table Two) with Barking and Dagenham being one of those authorities.

Table Two
Number of East London Residents Accessing Reablement
Between 2018 to 2023



- 1.19 The total number of reablement service users across London in 2022/23 was 22,987 averaging 766 residents. Barking and Dagenham served 699 residents (14th highest in London)
- 1.20 Six boroughs provided Reablement to over 1,000 new residents in 2022/23 with Four of these exceeding the London average of 74% in this year.
- 1.21 Table three compares the number of new clients against the authority's success rate in relation to those exiting the service with no on-going care needs. This provides useful context for instance discarding both City of London and Islington high success rates when their client base is very low. A high client base with a high success rate on the other hand are authorities who are clearly delivering a valuable service Hounslow, Havering and Ealing stand out for this reason.



Reablement Pilots

- 1.22 The acknowledgement that the current model of reablement within Barking and Dagenham via Homecare Providers on the Framework offering a crisis response has not optimised the opportunity to support our residents to recover or to reduce their dependency on the care system with a success rate of 39% in 2018/19 to 56.8% in 2022/23.
- 1.23 There have been three pilots the first in the last quarter of 2022/23 and two pilots are currently live and will impact on the outturn for 2023/24. The learning from all three pilots will inform the decision around which model of reablement works for Barking and Dagenham or the component parts that add value and can support the design of a new model of reablement for Barking and Dagenham going forward.
- 1.24 The first pilot involved Redbridge Reablement Service (RRS) between January to April 2023. It utilised an existing commissioning relationship with NELFT (North East London Foundation Trust) who were commissioned to support our hospital discharges. They provided a 4–6-week reablement period for 10 hospital discharges a week, whereas previously they would have gone into a long-term care package. Success rate for this pilot was an increase in outcomes with 80% of our

service recipients exiting the service with no on-going care needs e.g. self-caring and independent of the care system.

1.25 Essex Cares Limited (ECL) provide a specialist reablement service in Havering and have a registered office in Brentwood. They provide a therapy-based recovery model of reablement (both occupational and physio therapists) and do not have any conflicts of interest as none of the residents they serve will become a long-term customer. They are already known to the local acute hospitals used by Barking and Dagenham residents and they had capacity to support a local pilot. Initially providing a 100 reablement hours per week moving up to a ceiling of 250 reablement hours serving residents living in the RM post codes only.

1.26 Below is the activity reported by ECL between 20 November 2023 (start date) up to 20 February 2024:

- 129 referrals
- 81 accepted (demand exceeded capacity at times)
- 55 starting the service (some referrals accepted were not in the end discharged home from hospital)
- Success Rate of 90% (leaving the service self-caring)
- 175 hours a week (which is 9124 hours per year) long term care hours saved from those residents with no-ongoing care needs.
- Assuming all of these residents are diverted from a home care package for one year. This sample would indicate a cost avoidance on the home care budget of approximately £191,604.
- It is worth noting that the return-on-investment model used by Essex Cares Limited within the Essex areas that they serve is based on 'tracking clients' to ascertain how long they are diverted away from receiving a long-term care package using this data to establish an 'average number of weeks' for this cost calculation.

On the 1st February 2024 Barking and Dagenham joined a pilot on a ward at Queens Hospital already set up between the Hospital, Havering and ECL. ECL have staff based on a ward for the elderly they are working with selected patients to prevent them from 'deconditioning' during their hospital visit and to support through engaging in therapy-based work to improve their mobility and dexterity. For those still needing support on discharge they then go home with the resident and continue the reablement work.

With ECL not having capacity for the whole borough the Homecare Framework providers were approached and asked for expressions of interest from those already contracted to work for the borough. Seven providers expressed their interest and three were selected to work on the second pilot. The successful providers were Cera, Caronna and Supreme Care.

The second pilot 'Reablement Framework Three', is a hybrid service with a reablement multi-disciplinary team based in Adult Social Care (Occupational Therapists and Social Workers) who are working directly with the three providers who are familiar with and used to the current service model in relation to crisis support. The MDT remit is twofold a) to work closely with these providers and directly with the residents receiving the service collaborating on setting recovery/rehabilitation goals and upskilling the workforce to work as enablers. And

b) to identify skills gaps, cultural changes (that shift from doing for (caring) to coaxing/enabling a person to do what they can for themselves (reabling) identifying areas for change that would support the provider in delivering better reablement outcomes.

This second pilot is an investment in the local market within Barking and Dagenham and actively supports a change in approach, culture and expectations around achieving better outcomes through reablement for local residents being clear about what this looks like.

The Reablement Framework Three started on 1st February 2024 the data for this will be available in time for the final draft of this report.

- 1.27 There have been opportunities to test and trial different approaches and to pick up new strands of work with each of these providers most are linked to the broader view on prevention services – a couple of examples are:
- Working with families as future carers and providing training around being an enabler, understanding what to expect around changing health conditions and some practical training in preparing to be a carer.
 - Introduction of Reablement Care Tech Packs. An early introduction to the potential benefits to introducing technologies into a person's life early enabling greater choices, controls and independence that will give them the confidence to live the life they want.
- 1.28 The learning and analysis from these pilots and the information still being gathered from authorities across London in relation to reablement will influence the service model and service specification for the future procurement of a longer term reablement service.
- 1.29 The pilots were due to end March 2024 which would mean that the service would default to the old model of crisis support until such time as the new provision has been commissioned. Defaulting to the old model increases the likelihood of a high number of new clients staying in the care system.
- 1.30 The decision was reached to extend the pilots to enable:
- Continuity of the transition from the old to the new service. Supporting a smoother transition to the newly procured service and enables the new approach to be embedded.
 - The residents of Barking and Dagenham to have the opportunity of receiving a specialist service and the support from both pilots is therapy led.
 - Therefore, focused on recovery giving these residents the best possible chance of leading a healthy, happy and independent live.
- 1.31 The longer the pilots have to bed in provides a wealth of intelligence around what works well and what doesn't. This will enable the service to use the evidence to develop the details within the service design and specification. Providing an assurance around moving into a service that can reduce the pressures facing the care system in relation to care markets capacity and costs to the authority.

2. Proposal and Issues

2.1 The proposal is to procure a therapy based reablement service that will actively work with our residents to support their recovery from a crisis in their lives. For most this will be due to ill health or an accident but for some it will be around regaining the skills to cope with emotional wellbeing and for all regaining the confidence to live an independent, fulfilling life outside of the care system.

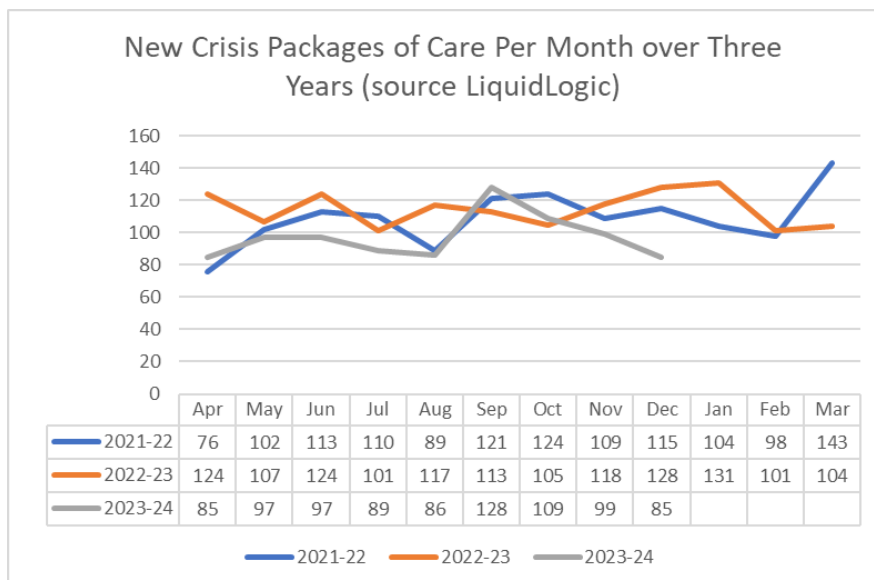
Demand For Reablement and Performance Levels

2.2 Custom and practice within adult social care has been to spot purchase a crisis service to provide personal care for up to six weeks from providers on the Homecare Framework. The outcomes from this service have been poor in the sense of a low number of residents being diverted away from a long-term care package.

- 44.3% this was 245 new residents out of 553 in 2020/21(London average 75.4%)
- 58.9% this was 407 new residents out of 691 in 2021/22 (London average 73.1%)
- 56.8% this was 397new residents out of 699 in 2022/23 (London average 74.2%)

2.3 The investment in 2022/23 with the first pilot within RRS was a small pilot from January to February 2023 served 35 out of 44 packages of care (80%) were diverted away from long term care packages.

2.4 The caveat around comparing 2.2 and 2.3 is that the national return in 2.2 is based on 'new residents' which are residents receiving reablement for the first time. And 2.3 has not filtered those out in relation to the full demand on reablement it should be noted that residents may receive reablement more than once in a year. Table Four, shows the monthly profile of activity over the last three years there have been 1,304 crisis care packages in 2021/22, 1,373 in 2022/23 and an estimated 1,156 for 2023/24



- 2.5 Daily there are approximately 163 residents in receipt of a crisis/reablement service within this financial year (2023/24).
- 2.6 In 2022/23 there were 629 (90%) of clients discharged into a crisis service with the remaining clients coming from people in crisis at home who are being supported to prevent a health crisis and a hospital admission.
- 2.7 The contribution from Adult Social Care around swift, timely discharges is a joint health and care target. Nationally the ambition is same day discharge once the hospital has declared a patient is ready for discharge the system and providers need to be ready to respond. Joint targets will be agreed to ensure the best outcomes for our residents.

Return On Investment

- 2.8 There are different models in use for reporting on the return in investment for a successful diversion through the provision of reablement from the care system.
- 2.9 Colleagues from within the financial services will explore and consider the best approach to use for Barking and Dagenham.
- 2.10 The approach may change from a simple percentage reduction against the Homecare Budget to a more refined model based on evidence which would involve tracking the length of time a person is diverted from the care system and the number of hours they were in receipt of either at the start or end of reablement.

3. Options Appraisal

3.1 Do Nothing – No change (not recommended)

- 3.1.1 This would mean continuing with spot purchasing crisis services via the homecare framework. This is not a viable option or a good model of reablement. Working outside of a contract reduces the checks and balances that need to be in place to drive change and ensure that those commissioned to provide these services have the skills, ability and focus to help the residents of Barking and Dagenham back to their baseline and support them regain the skills to live a life outside of the care system. Currently there is no real incentive for those providing crisis care to achieve this goal. As outlined in this report the current model does not achieve results on par with London and thus our residents are losing out.
- 3.1.2 There is compliance with the Care Act 2014 in that the initial service is short-term and free of charge. But perhaps questionable around service design and purpose in relation to actively diverting, delaying and preventing a resident entering the care system too early and/or reducing their dependency within the care system.
- 3.1.3 It would be misleading to assume that doing nothing would mean no spend in this area. There is a spend on crisis support but to a degree hidden within the overall Homecare Budget. Estimated current spend for these services for this year is £1.6m see below within the section on finances. It is anticipated that the reablement service will decrease long term care needs therefore resulting in a long-term cost avoidance.

3.2 Commissioning a New Reablement Service (Recommended)

- 3.2.1 Benchmarking is showing that Reablement is changing and maturing as a service. There is no clear evidence showing that one service model above all others has that 'component' that makes it consistently more prone to success.
- 3.2.2 Whatever the model all of those professionals interviewed are clear reablement cannot work without embedding a therapist to lead on the recovery programme.
- 3.2.3 All of those authorities interviewed are or have started to reshape their services. Those with a good provision are making system changes to increase their productivity. Others are moving towards different forms of hybrid services.
- 3.2.4 For those that did not go down the line of an in-house reablement provision. There was a trend to use Homecare agencies from within their frameworks or connected to their frameworks. Those involved in the benchmarking have tended to move away from this.
- 3.2.5 One driver for change has been the complexity of need from patients being discharged from hospital. This has shown a trend in increased reablement hours compared to pre-covid. Therefore, the challenge for the new service is twofold – help those who do not need care back to independence AND support a reduction in complex care packages particularly those coming out of hospital needing the assistance of two carers or a bed-based service such as a residential/nursing care home placement.
- 3.2.6 With increased care hours comes pressures on the care market and the cost of care. There is a corporate and operational social care understanding that there is a requirement for a change in approach around what reablement can and should be doing to tackle these challenges. Reablement doesn't exist in isolation and requires collaboration with health, care, voluntary sector and care technologies as part of the broader prevention agenda. There are already programmes that are working with care technology and the voluntary sector to support people who have recently been hospitalised.
- 3.2.7 Traditionally, reablement is a reactive service responding to crisis situations. One aspiration for moving into a specialist reablement provision is the opportunity of more pro-active endeavours in working strategically to contribute to tackling some of the bigger issues that the residents of Barking and Dagenham are facing. Examples could be early work with people experiencing falls or certain long-term health conditions.
- 3.2.8 The final service design and model of care for Barking and Dagenham will be influenced by the evidence emerging from the two pilots and adjustments around system flow that colleagues across London are developing.

4. Proposed Procurement Strategy

4.1 Outline specification of the works, goods or services being procured.

- 4.1.1 The model of reablement that will be procured is not yet defined. As outlined in the report the reablement pilots are currently ongoing and the findings from these pilots, as well as further benchmarking across London will inform the final model. We will bring this to procurement board in July to ratify the approach.
- 4.1.2 However, we know that we will be procuring a reablement service with the key outcome of providing short term care for residents in the borough at a point of crisis. This short-term care will focus on supporting residents around regaining their independence to as close a level as possible pre-crisis. Which might mean at the end of reablement they will exit the service as they no longer require ongoing care, or their level of ongoing care that they need has reduced and can be significantly less than the initial assessment of needs.
- 4.1.3 The service procured will be expected to provide support and care based on achieving personal goals for an individual in relation to recovering from a period of ill health or a crisis in the person's life that has inhibited their ability to care for themselves 'temporarily' they clearly have the potential to improve.
- 4.1.4 The reablement model will be designed to support:
- Hospital discharges in a timely manner resulting in better flow from the hospital into the community.
 - Avoiding admissions to hospital and care homes where there is a safe alternative and a believe that the individual can manage at home with the right interventions this could involve for example working with individuals with an early diagnosis of a long-term illness or experiencing falls at home.
 - Reducing the risk of readmissions to hospital, a pro-active reablement service that helps an individual to not only recover but provides them with the knowledge and skills to manage their condition should reduce readmissions.
 - Working with and involving the family. There is a need to invest in supporting families to understand the cause of the crisis if a long-term condition what to expect and the role they can take to delay progression of the condition and upskill them in becoming an enabler and a carer.
 - Referring to and enabling use of relevant care technologies to enable residents to understand the value of technologies to support them once the reablement provision ends.
- 4.1.5 The provider will be expected to facilitate 7-day discharges and accepting packages of care within 8 working hours.
- 4.1.6 To achieve the aims outlined above the new provision will at its core be a therapy led service as a minimum involving occupational therapist and potentially including access to physiotherapy on a regular basis within the person's home.
- 4.1.7 The provider in supporting people to regain their independence will support them back into activities in the community/outside their home. Connecting to and working with local community services.

- 4.1.8 More residents are leaving hospital with more complex needs and a clear understanding that they will need long term care at home. The new service will have a role in supporting these residents to get to a point where they can do things for themselves and ensure that they then receive an appropriate lower level of care going forward.
- 4.1.9 Reablement Provider(s) will be expected to support residents with low needs to recover quickly within the first couple of weeks. It is acknowledged that it will take longer for those with complex needs.
- 4.1.10 There is mixed market around reablement with in house (local authority) services, specialist reablement providers, larger homecare agencies who have expanded into the reablement market and community health trusts who provide integrated reablement services. As outlined the learning from recent benchmarking discussions is showing an expansion in reablement and some areas looking at hybrid models that enable flexibility and growth in relation to their capacity to meet this demand.

4.2 **Estimated Contract Value, including the value of any uplift or extension period**

- 4.2.1 The contract will be a 4-year contract with a value of £7.105m with two single year extensions, giving a maximum duration of 6 years and a total value of £11.5m this includes growth around hours of reablement purchased but not inflationary uplifts.
- 4.2.2 The contract will be aligned with the Adult Social Care Uplift policy which considers inflation in overheads and wages as well as the market and council's positions.
- 4.2.3 Based on 2023/24 activity the budget for reablement will
- Fund the extension of the pilots during 2024/25 this will be achieved by diverting the £1.6 million currently used for Adult Crisis Intervention to reablement up until the new provision is mobilised.
 - Over the course of the contract, for the new reablement service not considering at this time inflation, the budget will be in the range of £11.5 million.
 - This incorporates the ambition to incrementally increase the number of reablement hours from a base of 52k for crisis intervention up to 78k hours for reablement.
 - Over four years this would be a total of 244,697 reablement hours or over a six-year period up to a total of 401,489 reablement hours.

4.3 **Is the contract subject to (a) the (EU) Public Contracts Regulations 2015 or (b) Concession Contracts Regulations 2016? If Yes to (a) and contract is for services, are the services for social, health, education or other services subject to the Light Touch Regime?**

- 4.3.1 The service is subject to the (EU) Public Contracts Regulations 2015 and are subject to the Light Touch Regime, however due to the value of the contract it will be an open tender and advertised on FTS.

4.3.2 The report has been drafted in line with the current contract rules; however, may be subject to change according to new guidance.

4.4 Recommended procurement procedures and reasons for the recommendation

4.4.1 The Reablement at Home Service will be procured in accordance with the Public Contract Regulations 2015 and the Council's Contract Rules.

4.4.2 The recommended procurement route is a competitive open tender procedure; the tender opportunity will be advertised in Find a Tender, on the Council's e-tendering portal (Bravo), Contracts Finder and the Council's website. This process will widen the competition and ensure the Council gets best value for money for this service.

4.4.4 Potential providers will be required to complete Supplier Information in addition, to a tender submission document (including method statements) to ascertain suitability and ability to meet the core and flexible services outlined in the service specification. An evaluation of the Tender Submission will take place once the deadline has passed for submission. To ensure that the quality of the service is satisfactory there will be a pass threshold and a minimum quality score will be set that the provider must meet.

4.4.4 The service design and procurement selection process will involve a mix of key stakeholders which will include residents and carers who have experience of receiving crisis/reablement support in Barking and Dagenham.

4.4.5 The Council will negotiate and issue the contract in line with the Public Contract Regulations for the provision of the service with a break and variation clauses. The contracts will be further tightened with service specification requirements and expected outcomes. Key performance indicators are already in place in relation to nationally set measures however these will be supplemented with local measures that focus not only on activity, outcomes but an evaluation around a return on investment and the broader impact on the long-term care provision. These will be held within the service specification and agreed/reviewed with the provider(s). Performance management will be carried out by both the provider and the borough.

4.5 Criteria against which the tenderers are to be selected and contract is to be awarded

4.5.1 The contract will be awarded on the basis of the most economically advantageous tender with a split of 55% Quality and 35% Price and 10% social value. Price will be assessed on the tenderers proposed prices based on the current volume of activity within the crisis/reablement services over the last three years.

4.5.2 The Quality element will be formed of two parts, the tenderers method statement response and service user evaluation. The tenderers method statement will consist of their responses to questions set such as:

- Service delivery and quality
- Service user involvement
- Safeguarding
- Choice and control

- Innovation and creativity
- Business continuity
- Staffing model
- Social value
- Equalities and diversity in service delivery

4.5.3 The service user and stakeholder evaluation will consist of development of questions and model responses based on service user experience and stakeholder expectations. It is anticipated that the 55% quality score will therefore be made up of:

- 50% assessment of the method statement
- 5% service user/stakeholder assessment

4.5.4 Clarification meetings may be held with individual providers on any clarifications that are required in the method statement. This will not be scored.

4.6 **How the procurement will address and implement the Council's Social Value policies.**

4.6.1 The Council is committed to ensuring that services are delivered in a way that protects the quality of the environment and minimises any adverse impact on community well-being.

4.6.2 The contractors will need to clearly outline and consider the following options from below:

- **Investment in local people:**
 - working into the specification the need to employ local people, work with Barking and Dagenham College to access course-based placements and to incorporate apprenticeships opportunities.
 - working with service users and informal carers to identify approaches in delivering services that simply don't work or gaps in provision that if addressed could make it a better service that improves service outcomes for the residents of Barking and Dagenham.
 - building capacity through volunteering and mentoring opportunities and working with the community including the community and voluntary sector to support capacity improvements in civil society.

4.6.3 It has been agreed that the technical submission will expect the provider to focus on "Investment in local people".

4.6.4 There is also the opportunity of partnership working with the voluntary sector that will provide increased capacity around supporting our residents back into an active life within their communities.

4.7 Proposed Procurement Timeline

4.7.1 The proposed procurement timetable is set out below:

Proposed Key Stages:	Date Completed:
Issue Contract Notice & procurement docs	26/04/2024
Tender Submission Period	04/06/2024
Evaluation of Bids and Presentations	15/07/2024
Recommendation of Award Report	23/07/2024
Procurement Board Awards Approval	30/07/2024
Approval Directors with Delegated Authority	01/08/2024
Intention and Confirmation of to award letters sent to Bidders.	27/08/2024
FTS Contract Award Notice/Contracts Finder Notice/Add to Contracts Register	29/08/2024
Mobilisation and Service Starts	10/10/2024

4.8 Contract Management methodology to be adopted.

4.8.1 The contract will be subject to quarterly contract monitoring reviews monitoring performance against the specification.

5. Consultation

5.1 There are a number of areas of engagement, consultations and co-production around service design and procurement of the new service that will run throughout each key stage of developing this programme of work the following outlines what has taken place and an outline of a forward plan.

5.2 Provider Engagement Events:

- In October 2023 Framework Homecare Providers were invited to complete a survey around reablement to ascertain their maturity, ability, and knowledge in relation to reablement.
- Followed by an invitation to them to provide an expression of interest in working on a reablement pilot to develop the services on offer locally.
- A provider event that included all care providers not exclusively homecare to talk about prevention within the context of reablement on the 23rd November 2023 and a face-to-face provider event on the 20th March 2024 included a session on prevention/reablement.
- Next Steps in April/May there will be a (PIN event) range of specific market shaping events to give local providers and other stakeholders the opportunity to hear directly from the authority about its ambitions around reablement and enable a discussion around ideas and innovative approaches to reablement.
- In addition to the provider events the stakeholder mapping has identified other care providers who may have views to support this endeavour such as the voluntary and community sector, colleagues in care technology and/or professionals within community and acute health services.

5.3 Staff Engagement within Adult Social Care:

- Information shared on developments around the winter pilot has been used via the ASC Staff Newsletter first article in December 2023.
- This was followed up with attendance at a wide range of staff team meetings during January/February 2024. These events have involved talking through the pilots, gathering experiences of reablement in Barking and Dagenham, and seeking operational views around the component parts that make reablement a success and views around the added value a good reablement provision could bring to the care services for residents.
- Next Steps during March/April a series of drop-in sessions for staff to talk on a one-to-one bases or to gather in small groups to contribute ideas and views on the future design of a reablement service in Barking and Dagenham. At this time recruitment of interested staff will take place to join a small co-production group to take the programme of work into service design and procurement of a new service.

5.4 Other professionals involved in Hospital Discharge and colleagues across NELFT:

- Practical work around setting up and delivering on the Reablement Pilots has involved staff NELFT around those working within the Hospital Discharge systems and colleagues in Redbridge Reablement Services.
- They are involved in the regular pilot meetings with the relevant providers to support the development around 'how to deliver' these services. There will be a 360-degree assessment at the end of April/May of all those involved to reflect on their views of the different models and to gather their views on what worked, what didn't work and missed opportunities what we could weave into our future design.

5.5 Resident engagement via a combination of one-to-one telephone surveys or face to face interviews between February and April this is an on-going piece of work involving a random selection of residents who fit the following categories:

- Residents discharged from hospital without any care and support
- Residents discharged from hospital who received
 - Support via the crisis services
 - Support from Redbridge Reablement Services (January to March 2023 last year's pilot)
 - Support from scheme one provider (current pilot)
 - Support from scheme two provider(s) (current pilot)
 - New residents to the long-term Homecare service in 2023/2024

5.6 The proposals in this report were considered and endorsed by the following boards

Reablement Project Board	13 th February 2024
Procurement Sub Group	4 th March 2024
Portfolio Holder – Briefing	5 th March 2024
ICB – Place Based	6 th March 2024
Procurement Board	18 th March 2024

6. Financial Implications

Implications completed by: Amish Soni, Senior Finance Business Partner, Adults

- 6.1 The proposed Reablement provision highlighted above is estimated to cost £1,600,000 in year 1, based on providing 55,380 hours of the provision based on an approximate hourly rate of £28.89. The 4+1+1 commitment is estimated to cost a total of £11,528,562. The estimated cost and demand for future years is based on the current demand that the service is experiencing through the Reablement pilot funded by the UEC grant. Additionally, demand has been modeled with a consideration of the current number of hospital discharges and the number and acuity of clients entering the system. The projected costs and demand presented in this proposal are indicative and could be higher or lower depending on the development of care needs and demographic demand for Crisis care. The cost implications for future years will need to be considered as part of the MTFS process going forward. However, as the future savings are also expected to exceed the cost of the additional hours in future years, there should not be any additional budget required above that provided in 2024/25.
- 6.2 The current provision for crisis care is not a block purchased service and is demand led. Provision has been on a spot purchase basis accessing agencies via the homecare framework. There has been an increase in the crisis service due to an increase in hospital discharges and the acuity of care for clients entering the service. The table below outlines spend in this area since 2021/22.

Service by CC	Crisis Line	21-22	22-23	23-24- Controcc Annual Forecast
Adults Packages	Crisis Intervention annual cost	£1,380,128	£1,414,588	£1,630,481
	Percentage Increase Per year		2.5%	15.3%

- 6.3 During 2023/24 the service received grant funding from Department of Health and Social Care – UEC Funding. The unit cost for the specialist provider is at a higher rate than that of the homecare agencies.

- 6.4 Over the last three years the total commissioned crisis service hours.

	Crisis Line	21-22	22-23	23-24- Controcc Annual Forecast
Adults Packages	Number of Crisis Hours Commissioned	70,444.72	70,652.26	52,631.04
	Percentage Variance per year		0.3%	25.5%-

- 6.5 There is sufficient funding to accommodate the proposed Reablement provision through the MTFs savings proposal which realigns crisis care package budgets within Homecare and Residential care which amounts to £1,244,644, with an additional contribution from the Adult Social Care Discharge Fund in collaboration with Health partners amounting to £355,356. However, given this is a demand-based service it is imperative that the service and commissioners and the service monitor the on-going use of spot packages and consider and manage the implications of a fluctuation in demand.
- 6.6 Given that the proposed contract is part of the services MTFs (Medium Term Financial Strategy) savings proposal, the inclusion of reablement under the service portfolio of care is planned to result in £1,527,876 worth of savings in more traditional types of care. It is imperative that the service and lead commissioners measure the outcomes of reablement to ensure that the desired outcomes are achieved. With the additional injection of funding from the Adult Social Care discharge fund the service expects to overachieve on the planned saving.

7. Legal Implications

Implications completed by: Lauren van Arendonk, Acting Principal Contracts & Procurement Lawyer (Foreign Qualified), Law & Governance

- 7.1 This report seeks to approve the procurement of a contract for a reablement at home support service in accordance with the proposals set out herein. The proposed procurement route is via an open procurement. The anticipated value of the total contract, being a 4+1+1 year term, is approximately £1.6M.
- 7.2 Given the contract is for social care services, the procurement is subject to the Light-Touch Regime, as set out in Schedule 3 of the Public Contracts Regulations 2015. The procurement is over the LTR threshold. However, it is proposed that the tender will be run in accordance with the open procedure, with no adjustments to the standstill period. It is recommended that Council standard terms and conditions are used and that a robust, coherent and detailed specification is prepared. KPIs to monitor supplier performance should also be considered.
- 7.3 The open procurement must follow a compliant exercise in accordance with the Public Contract Regulations 2015, the Council's Contract Rules and the procurement strategy set out in the Procurement Strategy Report.
- 7.4 In accordance with r 59.2(a), the contract must be sealed as it is over the value of £250,000. Legal will be on side to assist with this and prepare any terms and conditions as is necessary.

8. Other Implications

8.1 Risk Management

Risk 1)

Not approving the extension of the current Pilots into 2024/25. Would result in those schemes terminating at the end of March and reverting back to the crisis support services.

Impact:

- Reduces the opportunities of enabling more of our residents who do not need long term care services and reducing complex care packages to a more proportionate level of care once an individual recovers.
- Which then contributes and continues to put pressure on the long-term cost of care.
- Enabling a longer period of time to test and trail these two approaches will provide a higher volume of residents accessing the service and with that increase a better sense of the potential return on investment but in outcomes for residents and the impact on Adult Social Care budget.

Risk 2)

Essentially this is an invest to save proposal not achieving a return on investment is the risk. Understanding different expectations over the life of the procured services is therefore important.

Impact:

- Stemming/controlling the demand for long-term care services e.g. the number of residents diverted from the care system is the first requirement.
- Understanding this may not reduce the long-term care budget over the next couple of years. However, it could contribute to reducing the growth in the first year.
- There are different models around measuring the return on investment and the model used for a newly developing service will be based on presumptions compared to a mature service with evidence around how long residents are diverted from the care system.

Risk 3)

Rejecting the proposal to set up a specialist therapy based reablement service.

Impact:

- Reduces the likelihood of this authority delivering on its ambitions around enabling residents to live healthier, happier, independent lives for longer. Alongside supporting them at a time when they may feel vulnerable and to a degree they are if we are not proactively helping them get well, recover and carry on with the life they were living before the current crisis.
- Reduces the potential for the authority to deliver on the duties within the Care Act 2014 around the whole prevention agenda and delivery of intermediate care (reablement).
- Growth in relation to the number of residents and cost of care.

8.2 **Contractual Issues** - Section 4 above outlines the procurement strategy and contract considerations for the longer-term development, delivery and establishment of a reablement service. The proposal is for the new reablement service to be contracted for four years with two times one-year extensions with a total contract value of £11.5m. The new service is yet to be designed.

Trend data over the last three years indicates that the contract will be for 71,000 Reablement Care Hours annually. Activity for 2023/24 has shown a drop in both new clients and reablement care hours. However, the expectation is that there will be growth in this service area in the future around increasing access to this service from residents before they are admitted to hospital and via other related services

such as emergency departments in hospital, virtual wards and via potentially targeted work as part of the wider prevention strategies as that develops. See table six above at 6.4.

- 8.3 **Staffing Issues** - TUPE will not apply this is a new service and there will not be a need to transfer clients between providers in relation to terminating an old contract.

However, there is likely to be a proposal to establish a small transitional or potentially a permanent reablement team located within the community and hospital assessment team, Adult Services. This is expected to involve two senior therapist and two social workers to hold oversight of clients and service delivery.

There are no other staffing issues related to this procurement.

- 8.4 **Corporate Policy and Equality Impact** - This contract will be provided in line with the Equalities Act 2010 based on an open access for all eligible individuals irrespective of their background and lifestyle. A core value within the new contract will be to take the approach that reablement is holistic in that it is reablement for the family unit and not exclusively about the person in crisis. Therefore, the family/friends and natural support networks are part of the reablement process. Including them in relation to education understanding the persons frailties, how to encourage them to self-care and to develop their skills /knowledge base around their future caring role. Therefore, the service provides support to carers and onward referral to specialist support as required.

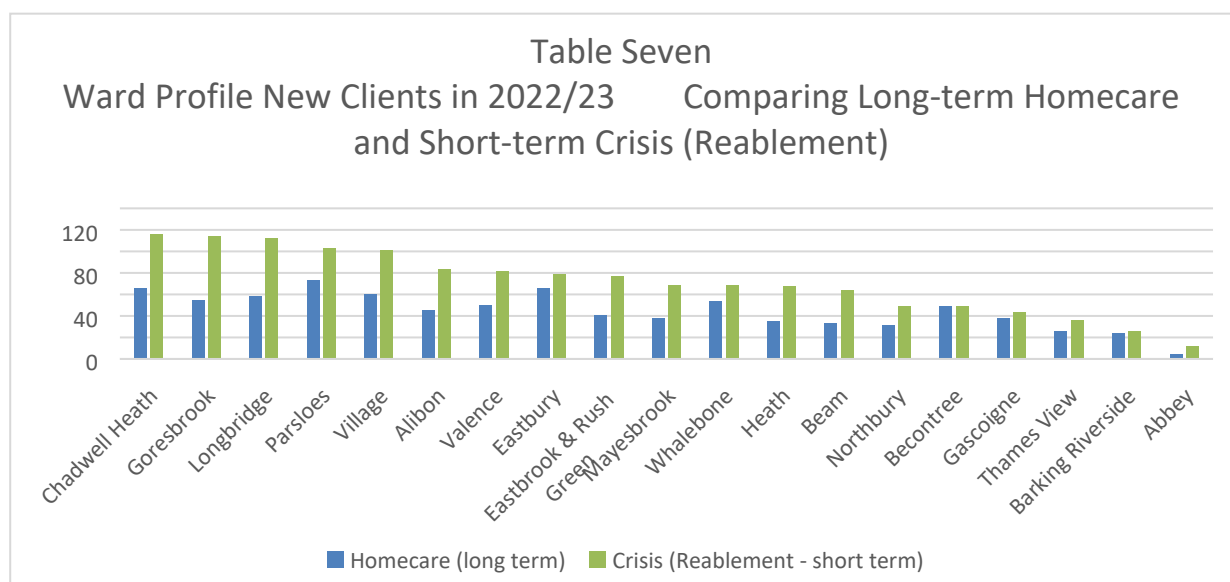
The service contract will support residents from varying backgrounds throughout the short time that they are being supported. This will be done through person centred plans that take into account individual needs and wishes. The service contract is also able to support connections with other prevention services via social prescribers, community and voluntary sector and care technology this is not an exhaustive listing. Making these connections will be done with the service users and family wishes, taking into consideration individual's needs and requirements at that time.

An Equality Impact Assessment screening tool has been completed for this procurement and approved by colleagues the Strategy and Equalities Service for this procurement see appendix One.

Analysing historical and current data around those accessing the crisis service by ward it is possible to identify areas of high demand across the borough. Crisis/Reablement services are responding to demand and is a reactive service. However, there may be opportunities as the service matures to consider opportunities for targeted work supporting the prevention agenda around residents experiencing falls at home and/or early diagnosis of certain long-term conditions in geographical wards and areas of the borough with low take up of this preventative service.

Table Seven compares new clients to adult social care in 2022/23. The greater the gap between crisis (reablement) and homecare is indicative of the number of residents who did not go into the long-term care system. This type of analysis is also helpful to identify where the demand is for both short and long term care

support. It may also aid identification of locations where access to services are lower than expected using other data on healthy populations.



8.5 Safeguarding Adults and Children – no specific issues that are related to the provision of reablement. However, it will be a requirement of the contract that the new provider work in line with the Multi Agency Protocol and play an active role in safeguarding in the borough. This will be evaluated as part of the tender process.

8.6 Health Issues - Most residents accessing reablement services will have experienced a health crisis. For some this may involve an accident and for others it may be the early stages of a diagnosed long-term condition including the possibility of some residents with dementia.

The services ambition is to help each individual to recover from the accident and/or learn how to manage their long-term condition without recourse to the provision of services from the adult social care system. They will have a greater understanding around what to expect, how to respond and manage if faced by a health crisis and learn techniques to keep them safe at home and in the community.

This self-awareness and newly acquired life skills will minimise an admission to hospital, care homes and/or reduce the risk of readmissions (most clients accessing this service will have been discharged from hospital into reablement).

Public Background Papers Used in the Preparation of the Report:

- Care Act 2014 Section 2.6

List of appendices:

- Appendix 1 – Reablement at Home Equality Impact Assessment

Community and Equality Impact Assessment

As an authority, we have made a commitment to apply a systematic equalities and diversity screening process to both new policy development or changes to services.

This is to determine whether the proposals are likely to have significant positive, negative or adverse impacts on the different groups in our community.

This process has been developed, together with **full guidance** to support officers in meeting our duties under the:

- Equality Act 2010.
- The Best Value Guidance
- The Public Services (Social Value) 2012 Act

About the service or policy development

Name of service or policy	Reablement At Home Service
Lead Officer	Carol O'Brien
Contact Details	Carol.obrien@lbbd.gov.uk

Why is this service or policy development/review needed?

Reablement at home service is currently being developed with the opportunity to pilot two distinctly different models of service delivery. Once tested, reviewed and analysed there will be a report to cabinet seeking permission to establish and commission a new service for local residents.

The service aim, purpose and reason for being developed is to support all of our adult residents from the age of 18 who have or are experiencing a crisis in their lives that inhibits or diminishes their ability to live an independent life outside of the adult care system. By providing early help our ambition is to support the individual in crisis back to living the life that had before the crisis or ensuring the minimum amount of intervention for the care system. It needs to be the service they need that does not prevent them from living the life they want to live.

The service does sit within the Care Act 2014 and is part of the ethos of recognising each individuals' strengths and abilities, it will be a key component with the prevention agenda for adult social care with a focus on diverting and delaying the need for long term care services and promoting independence.

The intention will be to procure a new service in 2024 and support our residents over the next four to six years. If the options to extend are taking up during the life of the contract.

The service fits well with all four strategic priorities

Priority One: Residents are supported during the current cost of living crisis. Most of the work within reablement is around supporting people through a crisis linked to poor health. However, sometimes the crisis is triggered by poor living conditions and the stresses caused by poverty. One aspect of reablement is to support people in connecting to local networks that can support an individual with advice around income maximisation, coping skills and practical support that can improve the environment they live in.

Priority Two: Residents are safe protected and supported at their most vulnerable. The core provision within the new reablement service will be that it is led by a therapist who works with 'enablers/carers' who have an agreed set of goals set by the individual receiving services to support them to regain skills they are at risk of losing so that they can return to feeling safe and able to do what they want with confidence both at home and in their community. A successful outcome is that they are no longer vulnerable.

Priority Three: Residents live healthier, happier, independent lives for longer. Each of these are the core values to achieving a successful reablement service. In supporting people to recover and to regain the relevant skills to cope with their lives and manage their futures. Enables them to reduce the need for long term care services.

Why is this service or policy development/review needed?

Priority Four: Residents prosper from good education, skills development, and sustainable employment. For the individuals recipients of the service who may have been diagnosed with a new long-term condition some of the learning for them is around adjusting and learning new skills around daily living, activities, and uses of new technologies to support their independence. There will also be opportunities for the local employment market and the impact that then has on the local economy. The values that drive the council around being a valued, safe and good employer will be threaded through our contracts with those providing services to uphold certain standards and ensure safe recruitment practices are in place alongside being a good employer who values and invests in their staff.

There are a number of elements to the Care Act 2014 that influence how the adult care and health colleagues work together to deliver equitable services for our residents as a commissioner of services and we have a role around shaping the local markets to meet the needs of our residents and communities, to uphold the duty of candour and to co-produce these services with those who can help us understand what adds value and what doesn't.

Within this context our service specification we will set out how the need to consider how to meet the diverse needs of our communities including people who identify as LGBT+, people of a black African, Asian Bangladeshi and Romanian backgrounds this is not an exhaustive listing the changing profile of the residents within Barking and Dagenham since 2011 demonstrates a need for a flexible, responsive service that supports and welcomes new communities into the borough.

Reablement is a short-term intervention aimed at helping people regain their independence for those age 18 plus. Recognising that the range, diversity, and volume of customers it will serve will be substantial. The service providers need to demonstrate (contract monitoring/learning from complaints) their workforce can and does respect, accept and embrace that each individual, has made their own life choices, hold both their own and a wide range of cultural beliefs and is able to adjust and work with that resident.

1. Community impact (this can be used to assess impact on staff although a cumulative impact should be considered).

What impacts will this service or policy development have on communities?

Look at what you know. What does your research tell you?

Please state which data sources you have used for your research in your answer below

Consider:

- National & local data sets
- Complaints
- Consultation and service monitoring information
- Voluntary and Community Organisations
- The Equality Act places a specific duty on people with 'protected characteristics'. The table below details these groups and helps you to consider the impact on these groups.

- It is Council policy to consider the impact services and policy developments could have on residents who are socio-economically disadvantaged. There is space to consider the impact below.

Data Sources:

- Census Data 2021 [Analysis of the 2021 Census](#),
- [JSNA](#)
- Annual Public Health Director Report.
- Adult Social Care Self- Assessment
- Adult Social Care Short and Long Term Data Return (ASC-SALT)

Barking and Dagenham Facts and Figures

- 2,845 adults received long-term support throughout 2021-22.
- 8,000 people work in adult social care in 2021-22.

- Contacts and Assessments to Adult Social Care
 - 6419 contacts were made with the Adult Intake Team in 2022-23, of which 26% led to an adult social care or safeguarding referral.
 - 1239 referrals to adult social care were made in 2022-23
 - 246 carer assessments were completed in 2022-23

- Safeguarding – those are risk of harm and/or abuse
 - 1511 safeguarding concerns were raised in 2022-23.
 - Of these 252 enquiries started.
 - With 90% of cases, the risk was reduced or removed following a safeguarding enquiry.

- Long Term Care Services:
 - 44% of people received homecare,
 - 21% of people received support in a care home
 - and 29% of people organised support with a direct payment.
 - We have 10 care homes for older people (65 plus)
 - 11 care homes mainly for adults with a learning disability, mental health or substance misuse issue.
 - 113 homecare providers were registered in the borough as of June 2023.
 - 13 providers are on our commissioning homecare framework.
 - 1,000 family carers received support.

- Short Term Care Services (aka reablement):

- 1,133 new clients receiving reablement type services.
 - 629 were discharged from hospital into the service.
 - 917 of these were 65 plus
 - 188 were known to have a family member who could care for them.
- 57% no longer needing care

-Customer Feedback:

- 64.5% of survey respondents in the 2022-23 Service User Survey reported being extremely or very satisfied with their care and support.

- Compared to London Authorities

- We support a higher proportion of our older residents versus the London average, impacted by high deprivation levels.
- The cost of support per person getting support in Barking and Dagenham is lower than the London average.
- Barking and Dagenham were 27th out of 32 London Boroughs in relation to successfully reablement outcomes (residents no longer needs care services).
- The London Average for reablement customers no longer needing care services was 75% for Barking and Dagenham in 2022/23 this was 57%.

Potential impacts	Positive	Neutral	Negative	What are the positive and negative impacts?	How will benefits be enhanced and negative impacts minimised or eliminated?
Local communities in general	x			+ reablement has a focus on reconnecting people to their communities. + Physical barriers no longer apply if the community is a virtual one. -Need to recognise that some individuals may appear to not have a community to connect to.	The reablement providers will be expected via the service specification/monitored to reconnect individuals to their known communities. But equally, to show innovation and introduce them to social prescribers or other community groups to connect with communities and people with a common interest that will add value to our client's future independence. Care tech and Community Networks can skill up individuals who lack access to or have a sensory impairment to connect to virtual communities. Caveat if an individual really does not want to connect to a community that is their choice. But they can be made aware of the option and given contact details.

COMMUNITY AND EQUALITY IMPACT ASSESSMENT

			+ Tackling Social Isolation and Loneliness	
Age	x		+ This is an all-age service from 18 plus	<p>ASC-SALT Return 2022/23 shows that 19% of those receiving a short-term service (aka reablement) were between the ages of 18 to 64 and 81% were 65 plus.</p> <p>There are no age restrictions or barriers in place in relation to this service.</p> <p>The expectation is that most of those who are demonstrating frailties and vulnerabilities will be elderly. And they may well be the residents who will struggle to recover without support. And hold onto the fear of becoming unwell again or having an accident. Which is where reablement will add value.</p>
Disability	x		+the reablement intervention is not about the persons disability. It is about a crisis that stops them doing something they could do previously.	<p>There are no barriers as such to reabling a person with a disability. The functional element of this service is to</p> <ul style="list-style-type: none"> - assist someone to regain the ability to do what they could do before the crisis. - Or to support the individual to regain some ability in relation to those tasks. The deterioration of the disability may prevent them returning to their previous level of ability. <p>For those who have never learnt or had the opportunity to explore their personal potential around living independently, doing daily tasks safely. There are other services designed to support this learning.</p>
Gender reassignment	x		+Reablement is a service that will benefit any adult who needs support and assistance to regain their independence and ability to self-care	<p>The 2021 census shows that LBBD has the highest proportion of trans women (0.25%), third highest proportion of trans men (0.24%) and the 5th highest proportion of people whose gender identify was different but no specific identity given (0.64%) and the 17th highest who did not answer the gender identity question (8.4%).</p> <p>Receiving reablement can be the first time an individual experiences home based personal care that is centred around encouraging people to do things for themselves. Providers need to be able to</p>

COMMUNITY AND EQUALITY IMPACT ASSESSMENT

				demonstrate their adjustability to serving different clients with different needs delivering a service that satisfies the clients expectations.
Marriage and civil partnership	x		+Reablement is a service that will benefit any adult who needs support and assistance to regain their independence and ability to self-care +Opportunity to support family members to care safely	One of the aspirations for emerging in considering the design of the new service is to acknowledge that for those who are married/civil partnership or live with a partner the reablement provision is for the 'family' and there is an opportunity to work with partners/family members to support them to understand if there loved one is diagnosed with a long term condition what to expect going forward, how they can support their loved one in an enabling way, and to upskill them around caring in a safe way to keep them well, able and confident in their new role.
Pregnancy and maternity	x		+Reablement is a service that will benefit any adult who needs support and assistance to regain their independence and ability to self-care	The expectation will be older adults (65 plus) who will be recipients of the reablement service. However, if a pregnant or new parent does have a crisis that prevents them for caring for themselves then the support to do that can be provided via reablement. This is a personalised service and that is important to understand for all of these characteristics the assessment sets goals for that person and how that will be achieved. The providers will need to ensure any recovery plans balance the need for the person to be more able to do for themselves but avoiding risks to the unborn child or balancing caring for a new born.
Race (including Gypsies, Roma and Travellers)	x		+Reablement is a service that will benefit any adult who needs support and assistance to regain their independence and ability to self-care	In the ten years between the 2011 and 2021 census the shift in the ethnic mix within LBBDD had been dramatic. The borough has adjusted and adapted to changing communities and ethnic groups. Growing services that provide personal services to our residences need to reflect these changes ensuring equitable and fair access to our services. In the ten years there have been <ul style="list-style-type: none"> - 18.6% increase in non-white British residents - 16% Black African residents, the highest across England and Wales.

COMMUNITY AND EQUALITY IMPACT ASSESSMENT

					<ul style="list-style-type: none"> - 10.2% Asian Bangladeshi Residents, 4th highest in England and Wales <p>Using the ASC-SALT return for analysis around outcomes for those receiving short term services (aka reablement) by ethnicity. There are still 26% where their ethnicity has not been recorded. The following percentages have removed those from the analysis.</p> <ul style="list-style-type: none"> - 78% of service users where within the white category. - 10% within the Black category and - 9% within the Asian category. <p>Of these categories the percentages that went into the long-term care provision (which is a poor outcome for reablement)</p> <ul style="list-style-type: none"> - 25% of the Black service users ended reablement with a long term care package - 27% within the White category - 32% within the Asian category <p>The 2022/23 ASC-SALT return provides a benchmark for the new service to track take-up and outcomes for our different communities.</p> <p>Reablement providers will be encouraged to recruit locally in such a way that they can comfortably meet the needs and requirements of those they serve.</p>
Religion or belief	x			+Reablement is a service that will benefit any adult who needs support and assistance to regain their independence and ability to self-care	<p>Alongside, the shift in ethnicity changes have also occurred over the ten years between the two censuses.</p> <ul style="list-style-type: none"> - 45.4% showed a reduction in those describing themselves as Christians. - 18.8% reported as no religion static. - 24.4% a substantial increase describing themselves as Muslim. <p>Reablement providers will be encouraged to recruit locally in such a way that they can comfortably meet the needs and requirements of those they serve.</p>
Sex	x			+Reablement is a service that will benefit	Gender mix for those receiving social care in 2022/23:

COMMUNITY AND EQUALITY IMPACT ASSESSMENT

			<p>any adult who needs support and assistance to regain their independence and ability to self-care</p>	<p>Women:</p> <ul style="list-style-type: none"> - 59% all ages service users and carers - 64% were older people (65 plus) - 52% were working age (18 to 64) <p>Men</p> <ul style="list-style-type: none"> - 41% all ages - 36% were older people (65 plus) - 48% were working age (18 to 64) <p>For carers in receipt of a direct payment 71% were female and 29% were men.</p> <p>From the ASC-SALT return there is a measure looking at age and gender in relation to those still living at home 91 days after reablement this shows that:</p> <ul style="list-style-type: none"> - For all of those 65 plus 82% were still at home 91 days later. - This drops to 73% for men who are over the age of 85. - This drops to 75% for women between the age of 75 to 84. Interestingly then goes up for those over 85. <p>Reablement providers will be encouraged to recruit locally in such a way that they can comfortably meet the needs and requirements of those they serve. The combination of ethnicity, religion and gender can lead to very specific requirements from our customers that will be identified early on in the assessment process the provider should be in a position to meet their requirements. This will be monitored and evaluated at regular intervals.</p>
<p>Sexual orientation</p>	<p>x</p>		<p>+Reablement is a service that will benefit any adult who needs support and assistance to regain their independence and ability to self-care</p>	<p>89% of residents identify as straight or heterosexual, with 4% identifying as gay, lesbian, bisexual or other.</p> <p>Receiving reablement can be the first time an individual experiences home based personal care that is centred around encouraging people to do things for themselves. Providers need to be able to demonstrate their adjustability to serving different clients with different needs</p>

COMMUNITY AND EQUALITY IMPACT ASSESSMENT	
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					<p>delivering a service that satisfies the clients expectations.</p>
Socio-economic Disadvantage	x			<p>+Reablement is a service that will benefit any adult who needs support and assistance to regain their independence and ability to self-care</p>	<p>There are deprived areas within LBBB and many residents are on low incomes with limited access to resources.</p> <p>Reablement is covered within the Care Act as a free service up to six weeks. The purpose as already stated is to support recovery back to an independent live outside of the care system. However, the remit is not exclusively around 'physical reablement' it is a dynamic service and will be able to look at skilling someone up to living a healthy life on a restricted budget and connecting the person to additional support services that can provide advice, assistance on financial matters alongside supporting the person back into employment or consider educational opportunities.</p>
Any community issues identified for this location?					<p>An area of interest in relation to reablement is support to family carers the early opportunity to invest in upskilling them but for those without this support they could already be or may have the potential to be socially isolated/lonely reablement could be involved in (re)connecting people to other services and networks.</p> <p>Usefully the ASC-SALT return 2022/23 identified the known networks of support for service users that year:</p> <ul style="list-style-type: none"> - 50% of those receiving reablement did not have a family carer. - 17% had a family carer. - 33% not known.

2. Consultation.

Provide details of what steps you have taken or plan to take to consult the whole community or specific groups affected by the service or policy development e.g. on-line consultation, focus groups, consultation with representative groups.

If you have already undertaken some consultation, please include:

- Any potential problems or issues raised by the consultation
- What actions will be taken to mitigate these concerns

Going forward with the design and development of a new service will involve the voices of many different interested stakeholders. Early work has taken place to tap into and talk directly to local care providers through a prevention workshop in November 2023, a short survey to test readiness for reablement and a small invitation for expressions of interest to work on one of the pilots – this specifically asked the providers about the understanding of reablement and innovations for service design. Meeting staff internally via team meetings face to face, and small groups of operational managers to pick up on their knowledge and experiences and what they believe would help achieve successful outcomes for our residents.

Forward Plan:

A programme of engagement is about to commence with service users ‘accessing the current pilot’, and those formally receiving crisis support from the old service. Those providing feedback will be asked to if they would be willing to work with us on designing and procuring the new service.

One of the pilot providers has been commissioned to do four half day training events with family carers within that process feedback will be sort on their views and experiences of the service to their loved one and to them.

Learning to date from the events that have taking place – interestingly thou separate the views of homecare providers are very similar to those of adult social care staff:

- There is a believe that a reablement service is needed and will add value.
- Recognition that when our residents are in hospital they are at risk of deconditioning and more likely to leave hospital still unwell. Is there anything we can do whilst the resident is in hospital.
- Certainly, interested in seeing what the different experiences and outcomes will be from the two different delivery models.
- Small things that they have felt strongly about and need to be considered in more detail:
 - Do not constrain the potential for reablement visits by placing a ‘tight time band on the visit’ – the risk is the enabler comes in and completes the tasks that the residents need to do for themselves.
 - Use technologies, aids, and adaptations to support the person in the tasks they need to do or simply provide confidence that they can be safe and live independently.
 - An important one the need for physio many believe that reablement fails because the community physio will take at least six week to be allocated and the reablement service has been concluded/closed. Embed physio into the service.

Provide details of what steps you have taken or plan to take to consult the whole community or specific groups affected by the service or policy development e.g. on-line consultation, focus groups, consultation with representative groups.

If you have already undertaken some consultation, please include:

- Any potential problems or issues raised by the consultation
- What actions will be taken to mitigate these concerns

- Less confident about this a recognition that night care could mean someone goes home from hospital rather than a residential care home – but how to do this is the challenge to unpick.
- Recognising that someone getting less care at the end of reablement is a positive outcome for all.
- Looking at this a 'family reablement' and actively working with the family carer early on.
- Interested in how to tackle social isolation and do more around responding when someone starts to fall over.

Generally, in the last eighteen months a lot of other engagements with different stakeholders has taken place that can inform this EIA within the context of providing a personal care service to residents accessing social care. These are:

- Homecare Survey of service users and families conducted May – July 2023
- Providers focus group – 17 July 2023 Attendees: 8 providers from a range of care home, home care and support living settings.
- Meeting with B&D Collective representatives – 18 July 2023 Attendees: 4 community and voluntary sector providers
- F2F LBBB Framework provider meeting with survey September 2023 (Hybrid)

SPOT monthly homecare customer check. Summary of customer feedback:

- Our biggest positive impacts are on improving the quality of life and feelings of safety, with the need for meaningful social contact and a sense of people spending their time well.
- Timeliness of care visits and being informed about changes to visiting times is sometimes an issue.
- The need for clear, accurate and easy to understand information and advice has been highlighted as an area of improvement by service users who need support and carers.
- Communication between staff and residents has also been highlighted as an area in need of improvement, particularly in relation to hospital discharge.
- There needs to be more emphasis on prevention and community awareness of safeguarding issues.
- People value staff who care, listen and understand the customers.
- As a result of the interviews with people being discharged from hospital, new information for clients has been produced and is given to people at the point of discharge from hospital and new information aimed at carers has been developed.

Providers focus group 17 July 2023 and B&D Collective (CVS) representatives 18 July 2023

Provide details of what steps you have taken or plan to take to consult the whole community or specific groups affected by the service or policy development e.g. on-line consultation, focus groups, consultation with representative groups.

If you have already undertaken some consultation, please include:

- Any potential problems or issues raised by the consultation
- What actions will be taken to mitigate these concerns

- When agreed, it would be useful for the future ASC vision to be in service specifications and contracts we can then all work to the same goal.
- Communication is good still room for improvement. At the council. in some ways,
- There is the “join up the dots” meeting monthly whereby CVS members and key council staff attend to help problem-solve particular issues. Could a similar model be adopted in adult social care?
- Information sharing with providers is an area to improve: an example given of not receiving a copy of a social worker risk assessment.
- However, the details of new care packages are sent through swiftly.
- It is sometimes unclear which team or individual is responsible for resolving a particular issue, and it can be a struggle to get staff to take ‘ownership’ of an issue.
- Support plan detail is not always accurate on important details (e.g. postcode, next-of-kin)
- Agree that provider engagement is good.
- Several people reported a positive relationship with the Provider Quality and Improvement team: Supportive, constructive and open, whereby providers can raise issues.
- It would be useful for the LBBB quality assurance process (overseen by the PQ&I team) to be set out clearly in service specifications and contracts.
- A long-term issue for some providers in relation to picking up new clients. Fair distribution/opportunities.
- On prevention: It would be useful to start forecasting the level and type of need in future. People agreed that care needs are more complex now than in past years, impacted by mental health issues: needs should be identified at an early stage.
- On information and advice: Info and advice on financial assessments is an area to improve. LBBB should make it clearer to service users at an early stage what is charged for.
- Could a named Social Workers be matched to groups of CVS organisations as a ‘main point-of-contact’?
- Feedback that if we expect providers to act in quick and responsive ways, we also have to have admin processes that are quick and responsive – e.g. so providers get paid quickly.
- Overall sense that commissioning is moving / should move away from competition towards collaboration, fully utilising the expertise of the CVS and working in equal partnership.

How well does health and social care work together?

- There is scope for improvement to improve joint working on hospital discharge planning.
- Shared care records are helpful, but we need to ensure both in relation to hospital discharge and GP’s.

Provide details of what steps you have taken or plan to take to consult the whole community or specific groups affected by the service or policy development e.g. on-line consultation, focus groups, consultation with representative groups.

If you have already undertaken some consultation, please include:

- Any potential problems or issues raised by the consultation
- What actions will be taken to mitigate these concerns

- There are good opportunities for care workers to get more involved in certain clinical tasks that could help reduce pressure on the health system.
- Training on the 'significant 7' so care workers can better spot when someone is seriously unwell.
- There is also good practice. One example given was a great relationship with local GP, who started weekly video calls over Covid and has maintained that since then. This has reduced pressure on GPs needing face-to-face appointments and helps keep residents out of hospital.

What feedback do you hear from service users about what is good and not so good about social care at the council?

- Overall, communication with services users is an area to improve.
- With new homecare care packages, service users and families are not always aware who the provider is and when support is going to start.
- A common query providers hear from service users is: "who is the one person I can contact at the council?". Often people are unclear who to contact, and things like having a mental health issue, LD, autism or a language barrier can make it much harder to find the right person to speak to. Solution: be explicit and clear on who a person can contact in the event of questions or problems.
- The importance of being listened to comes out strongly from service users. Some feedback centres around people wanting to be heard and not feeling listened to or believed.

We are trying to develop a future 'vision' for adult social care. What do you think this should say?

- Employ staff who listen and who care.
- Have clear communication on what to expect and who to contact.
- More co-production, connecting with and listening to providers, service users and care workers and co-designing social care together: We are all working towards the same vision and goal.
- Work with providers as equal partners to innovate.
- Tap into provider expertise to plan and deliver care in innovative ways, benefitting LBBB and providing new business opportunities for providers.
- Work towards the same vision

3. Monitoring and Review

How will you review community and equality impact once the service or policy has been implemented?

*These actions should be developed using the information gathered in **Section 1 and 2** and should be picked up in your departmental/service business plans.*

Action	By when?	By who?
SPOT checks of reablement service users conducted	Monthly	By volunteers
Reablement workers will be given the opportunity to regularly meet co-workers to share best practice and limit potential isolation.	6 monthly	Provider forum
Provider contract management and quality assurance review of provider performance	Monthly	Provider Quality and Improvement Team/Contract Management
Dashboard Data Review and Ad Hoc Performance Reports delving into protected characteristics held within our care management system	Ad Hoc	BI/Performance Lead for Lead Commissioner

4. Next steps

It is important the information gathered is used to inform any Council reports that are presented to Cabinet or appropriate committees. This will allow Members to be furnished with all the facts in relation to the impact their decisions will have on different equality groups and the wider community.

Take some time to summarise your findings below. This can then be added to your report template for sign off by the Strategy Team at the consultation stage of the report cycle.

Implications/ Customer Impact

Currently with winter funding from the DHSC LBBB has been able to set up two different methods for delivering a reablement service. The learning from these will inform the potential service design and be reflected in the options put forward to Cabinet when seeking approval to procure and develop a longer-term service for reablement. Feedback already received primarily from internal staff and providers has already added ideas and concepts that will be embedded into the new service.

However, the voice and views of our customers have not yet been picked up. This is purely a matter of timing the first pilot started 8 weeks ago. We are now starting to plan a series customer engagement. LBBB performance team will randomly select a range of customers with different characteristics for us to approach with an initial survey. Within the survey LBBB will be looking to recruit interested customers to work with commissioning and procurement to feed into the design of the new service and to take part in the selection process for a new provider. We are also considering different methods to approach residents who are not receiving social care services or received reablement under the old model of care that we now want to replace to understand their expectations and/or experiences.

There is also an opportunity to create a data flow that can track from referral, acceptance, service start and end – alongside initial outcomes and longer term impact of the service on different cohorts of residents at the moment some of that information is shared in the above analysis.

Clearly from reviewing the data above we have a baseline that enables us to consider if we need any targeted actions to increase awareness and opportunities to access this new provision. Or inform areas that may need action to address any issues or a deep dive to understand the reason for some of the outcomes being seen within our data set. The higher percentage of Asians going onto long term care and not being successfully reabled would be one area to investigate and understand better.

What hasn't been explored within this assessment are the opportunities around social value and around investment in the local economy by having new provider(s) that will be expected to 'employ locally', ensure that they reflect the diverse mix of our communities, work to the same standards and values that the council employs and importantly work in partnership with community networks and the community and voluntary sector organisations referring customers to them and encouraging greater usage of local resources designed to provide our residents with opportunities to connect with each other and lead active, healthy and happy lives. This will be an active part of the procurement process and this EIA will inform potential providers of our expectations in these areas.

CABINET**16 April 2024**

Title: Travelodge Hotel, Yew Tree Avenue, Dagenham - Development Agreement	
Report of the Cabinet Member for Regeneration and Economic Development	
Open Report with Exempt Appendix 1 (relevant legislation: paragraph 3 of Part I of Schedule 12A of the Local Government Act 1972 as amended)	For Decision
Wards Affected: Eastbrook	Key Decision: Yes
Report Author: Matt Seaton – Senior Development Manager, Be First	Contact Details: Tel: 07543 501000 E-mail: matt.seaton@befirst.london
Accountable Director: David Harley - Interim Development Director, Be First	
Accountable Executive Team Director: Jo Moore, Strategic Director of Resources	
<p>Summary</p> <p>Cabinet in March 2018 approved the acquisition of land at Yew Tree Avenue, Dagenham and the funding of the development of a 78 bed Travelodge hotel with ground floor retail unit. The development was completed and the hotel has been trading successfully. However whilst a letting was made for the retail space, the tenant defaulted and never commenced trading.</p> <p>The report proposes to enter a Development Agreement with Travelodge (TL) for the conversion of the vacant ground floor retail into 15 additional hotel rooms. This would require a capital contribution from the Council for Travelodge’s development costs. In exchange Travelodge will enter an Agreement for Lease for the additional space, subsequently paying a rent on the same terms as the existing hotel. The proposal will generate an increased return for the Council over and above the loan cost, create a more marketable asset and deliver additional hotel rooms. Management of the asset with a single tenant will also be easier. The Council would have the option to sell the asset at a later date to realise the benefit of this uplift.</p> <p>Details of the proposed financials are set out in Appendix 1, which is in the exempt section of the agenda as it contains commercially confidential information (relevant legislation: paragraph 3 of Part I of Schedule 12A of the Local Government Act 1972) and the public interest in maintaining the exemption outweighs the public interest in disclosing the information.</p> <p>The construction risk will lie with the developer and the funds would be paid on a staged basis, so interest costs are minimised. The cost of the works will be capped at the point of commencement of the works. The draw down period will be relatively short, but the Council will have to fund the loan facility until completion at which point the rent will be paid by TL that will cover the loan. The proposal would require a change of use planning</p>	

application and the agreement requires LBBD to secure the necessary planning approvals and these costs are rolled up into the overall capital investment proposed.

Recommendations

The Cabinet is recommended to:

- (i) Approve the entering into of a Development Agreement with Travelodge in respect of the conversion of the vacant ground floor retail space at the Dagenham East site into 15 additional hotel rooms (Option 1), in line with the terms set out in Appendix 1 to the report;
- (ii) Authorise the Strategic Director of Resources, in consultation with the Cabinet Member for Finance, Growth and Core Services and the Cabinet Member for Regeneration and Economic Development, to agree final terms for the Development Agreement (including the capital contribution), the agreement for lease and the new lease; and
- (iii) Delegate authority to the Head of Legal to execute all the legal agreements, contracts, and other documents on behalf of the Council in order to implement the arrangements.

Reason(s)

The proposal will address a vacant retail unit by providing additional hotel bedrooms as well as providing additional rental income for the Council from the scheme.

1. Introduction and Background

- 1.1 The site at Yew Tree Avenue was acquired by LBBD in March 2018. LBBD entered a development agreement with Berkeley Square Developments for the development of the site and provided funding for the scheme (Minute 114, 20 March 2018 refers).
- 1.2 The completed property comprises a modern 78 room hotel and a ground floor retail space of 4,500ft². There are 28 customer car parking spaces. The hotel element is let on a fully repairing and insuring basis to Travelodge on a 25-year lease from 8th November 2019.

2. Proposals and Issues

- 2.1 A tenant held a lease of the ground floor retail unit on a 15-year lease effective from 2nd December 2021. Despite signing the lease and carrying out minor fit out works the tenant did not open the premises for business and had fallen behind in rent. An agreement was made for the tenant to surrender the lease in exchange for the repayment of the outstanding rent.
- 2.2 The Council now has the option to seek to relet the unit for retail use however there is also an option proposed by Travelodge whereby the Council enter into a Development Agreement with Travelodge for the conversion of the vacant ground floor retail into 15 additional hotel rooms. The Council would provide the capital

contribution for Travelodge’s development costs. The sum would be held on account with withdraws subject to certificates of value (of the work completed) provided by an independent surveyor.

- 2.3 The Council would enter an agreement for lease with Travelodge for the additional space at an agreed rent. As the full scope of works have not been costed Be First will need authority to negotiate a reasonable variation to the capital contribution and if necessary, an overage clause to increase the rent in equal measure. Although there is an impact on rent margin due to the additional borrowing at a higher rate than that secured at the time the original hotel was constructed, the long-term income increases.
- 2.4 Appendix 1 sets out the financial implications of the proposal and the key alternative option.

3. Options Appraisal

3.1 Option 1: Enter into a Development Agreement with Travelodge for the conversion of ground floor retail space into additional hotel rooms.

Letting Agent’s Strettons has brokered a deal for Travelodge to take the retail space and convert it into 15 additional hotel rooms based on the terms in Appendix 1.

A development agreement would be entered whereby Travelodge appoint the architects and contractors and carry out the works. The Council would provide the capital contribution for Travelodge’s development costs. The agreed sum will be held in an escrow account and withdrawable subject to certificates of value (of the work carried out) from an independent surveyor.

The development agreement will be combined with an Agreement for Lease (AFL) between the Council and Travelodge for the new hotel rooms. The level of capital contribution and the agreed rent will be subject to change as it will be dependent on the quoted works from the appointed architects and contractors. A condition precedent to the AFL is that Be First secures planning permission for the change of use which is expected to take up to 6 months.

Based on the quoted figures, this option will see the market rent of the property significantly increase. Additionally, the market value could also increase by having the entire site leased to Travelodge Plc as a single entity rather than different occupiers and lease lengths (known in valuing terms as compressing the yield).

Further valuations would need to be carried out but considering Travelodge’s RPI rent review in November 2024, the increased rent and a compressed yield, the asset value could increase.

Associated fees for Option 1 are included in Appendix 1. The main risks associated with Option 1 are:

Overage on Capital Contribution	As the negotiations are in early stages the scope of works has not been costed and so the final capital contribution figure may vary. This risk of variation will be mitigated by agreeing an overage
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	clause between the parties. Be First will require authority to negotiate a reasonable capital contribution and overage clause.
Lease to single occupier:	Having a lease to a single entity can present risk to income if the tenant falls into liquidation or administration. However, having a lease to a secure covenant compresses the yield compared to a multi-let scheme where the quality of covenant varies. A single let FRI (Full repairing and insuring) property also reduces landlord liability and administrative expenses.
Travelodge & Hotel occupiers	During COVID -19 Travelodge entered a CVA (Company Voluntary Arrangement) with the subject property being designated a 'Category 2' site. A payment plan was implemented during this period and Travelodge are now paying rent in accordance with their lease. Although the quality of covenant is considered strong this demonstrated the risks and weaknesses of the TL covenant. However, Travelodge's can still be considered a reasonable covenant when compared with potential retail occupiers such as the current retail occupier who accumulated significant arrears.

3.2 Option 2: Re-let the ground floor retail space

Re-let the retail unit in the open market. Additional incentives would be required to secure the letting. The market norm would be to apply a six months' rent free period.

The main risks associated with Option 2 are:

Lease to multiple occupiers	This option will not increase the passing rent or capital value and the opportunity to maximise income will be missed.
Retail covenant strength	It is expected the retail space will be re-let to an occupier of similar covenant strength as the previous leaseholder. The current situation of arrears and void costs evidences the risks of this strategy.

3.3 It is recommended that the Council proceed with Option 1. The increase in capital value will be a benefit to the Council if it chooses to dispose of the asset at a later date.

3.4 If the proposal is agreed it will result in a reduction of retail space in the Dagenham East area – there are already grocery stores and cafes on Rainham Road South and the 'Front plot' of the film studios is likely to have an active frontage. The hotel is a useful resource supporting the local economy. Overall the deal presents a positive for the Council. Primarily there is a clear financial benefit to the Council for agreeing this proposal, but the change of use application will need to highlight the positives and demonstrate it will not have a detrimental impact on the area. The argument is that the increase in hotel rooms increases the number of potential visitors to the area which has a knock-on effect for the neighbouring businesses. Also, although planning was originally granted for use as a retail space the incoming tenant did not commence trading so there is no effective loss. This will have to be agreed as part of the change of use planning consultation.

3.5 The implications of the additional borrowing and increase in rent have been applied in Appendix 1.

4. Consultation

- 4.1 The proposal was considered and endorsed by the Investment Panel on 20 December 2023.
- 4.2 The change of use would require planning approval which would involve public consultation.

5. Commissioning Implications

Implications completed by: Rebecca Ellsmore, Strategic Head of Place and Development

- 5.1 Inclusive Growth has considered the proposal and in particular the impact that the proposed change of use required by option one will have on the surrounding area. Given the availability of retail floorspace in close proximity, Inclusive Growth is supportive of the recommended option. It should be noted that securing change of use consent is expected to be a condition precedent of the development agreement and the fees to secure planning consent will therefore be committed at LBBB's risk.

6. Financial Implications

Implications completed by: David Dickinson, Investment Fund Manager

- 6.1 The financial implications are set out in Appendix 1, which is in the exempt section of the agenda as it contains commercially confidential information (relevant legislation: paragraph 3 of Part I of Schedule 12A of the Local Government Act 1972) and the public interest in maintaining the exemption outweighs the public interest in disclosing the information.

7. Legal Implications

Implications completed by: Dr Paul Feild Principal Governance and Standards Solicitor

- 7.1 Section 1 of the Localism Act 2011 provides a general power of competence enabling the Council to do anything individuals generally may do, therefore allowing the Council to undertake a wide range of activities. Furthermore Section 111 of the Local Government Act 1972 enables the Council to do anything which is calculated to facilitate, or is conducive to or incidental to, the discharge of any of its functions, whether or not involving expenditure, borrowing or lending money, or the acquisition or disposal of any rights or property. The aforementioned powers enable the Council to enter into the proposed arrangement with Travelodge and make the capital contribution to cover the cost of the works of conversion and other transactional expense.
- 7.2 Under section 123 of the Local Government Act 1972 the Council has the power to dispose of land it owns which includes the surrender of the existing lease and re-grant of a revised lease. One constraint is that the disposal must be for the best consideration reasonably obtainable. The proposal is to expand the hotel letting capacity which is expected to be a more effective and efficient use of the property, particularly in terms of the assessment of the current economic return of the ground

floor retail unit. The proposal outcome being that there will be a new lease to Travelodge for the ground floor once converted to 15 more hotel rooms.

8. Other Implications

- 8.1 **Risk Management** – To reduce any risks, Gowlings solicitors and Strettons surveyors will be instructed to oversee the negotiation and advise throughout. Building surveyors will also be employed to monitor expenditure.

There is a risk the change of use application may be unsuccessful. This is deemed low risk if the case for the change is fully set out. If the change of use is rejected, the Council can proceed with Option 2 which still presents a decent return. This is viewed as a low risk and Be First will bear the cost of the fees.

- 8.2 **Contractual Issues** - Gowlings solicitor will be instructed to draft the development agreement and agreement for lease. Gowlings will also carry out necessary due diligence on potential contractual issues before any agreements are entered. Any further contractual issues will be negotiated through the solicitors.

- 8.3 **Corporate Policy and Equality Impact** – An Equality Impact Assessment has been carried out for the proposal identifying neutral or positive impacts on different groups within the community.

Public Background Papers Used in the Preparation of the Report: None

List of appendices:

Appendix 1: Financial Implications (exempt document)

By virtue of paragraph(s) 3 of Part 1 of Schedule 12A
of the Local Government Act 1972.

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