

LONDON BOROUGH OF HAMMERSMITH & FULHAM

Report to: Cabinet

Date: 15/01/2024

Subject: Award of the Home Care and Independent Living Service contracts

Report of: Councillor Ben Coleman, Deputy Leader

Report author: Laura Palfreeman, Programme Lead

Responsible Director: Linda Jackson, Strategic Director of Independent Living (DASS)

SUMMARY

Hammersmith & Fulham is determined to become the best borough for Disabled people in the country. In 2015 it abolished charges for care at home for elderly and Disabled residents, the only borough to do so.

The administration's manifesto at the 2022 election pledged to improve the quality of home care so that residents have carers who are *"consistent, well trained, regular, punctual and knowledgeable about individual residents' needs"*.

The council intends radically to improve the quality of the care provided to residents both in their own home and in the borough's care homes. Our vision is of achieving "100 per cent perfection" with a new Total Quality Management approach.

In December 2022, as part of delivering the manifesto pledge, Cabinet agreed a procurement strategy for home care. The service was renamed "Home Care and Independent Living" to reflect the administration's commitment to enabling people to live at independently at home.

The borough was divided into six neighbourhoods or patches (Appendix 2), with two providers operating in each patch, making 12 contracts in all. Providers were permitted to bid for a maximum of two contracts in an open tender procedure. With significant interest from the market, the strategy was effective in securing a range of providers and value for money.

This report seeks approval to award the 12 contracts to the new providers. These will offer a Home Care and Independent Living service to over 1,520 residents.

A total of £21.4m is expected to be invested in the Home Care and Independent Living Service in 2024/25 (subject to approval of the Annual Budget for 2024/25 by Full Council in March 2024). This is some 44% more than the £14.9m allocated in 2022/23. The anticipated increase in the budget of £6.5m over the two financial years is to meet pressures from hospital discharges and to cater for an increase in the volume and acuity of residents' needs.

The funding includes the requirement for all independent living workers to be paid at the London Living Wage (LLW) as a minimum, including for their travel time between visits.

RECOMMENDATIONS

That Cabinet:

1. Notes that Appendix 1 is not for publication on the basis that it contains information relating to the financial or business affairs of any particular person (including the authority holding that information) as set out in paragraph 3 of Schedule 12A of the Local Government Act 1972 (as amended).
 2. Approves the award of 12 (twelve) contracts to 7 (seven) providers for the delivery of a Home Care and Independent Living service in Hammersmith and Fulham for an initial five-year term from 1 June 2024 until 31 May 2029, with the option to extend for up to a further period of two years for a total of seven years. The total value of this contract over the five-year term is estimated at £55.5m and over the seven-year term is estimated at £77.7m
 3. Approves an increase to the rates paid under existing bridging provision with Healthvision and Graceful Care to match their contracted rate as set out in the report giving a total value of £20.3m and £28.4m over 5 and 7 years respectively. These two providers are the only current bridging¹ providers to be awarded contracts as a result of this tender exercise.
 4. Notes the additional funding of £4.2m in 2024/25 (subject to the approval of the Budget for 2024/25 by Full Council in February 2024).
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Wards Affected: All

Our Values	Summary of how this report aligns
Building shared prosperity	Providers will be encouraged to employ local Home Care and Independent Living staff and build connections with local services and the voluntary sector. This has been set out in the Social Value commitments from successful providers.
Creating a compassionate council	By improving the overall quality, our aim is for residents to report positively about being treated with compassion and dignity. This specification is rooted in H&F's home care standards which are informed by what residents have told us about the support they want and how they want this to be provided.

¹ Bridging refers to service provision put in place when a contracted service has no capacity to provide the required service and thus "spot" provision is used. It does not refer in any way to a financial loan.

	<p>This supports the council's independent living vision, which is that people of all ages and (dis)ability have the same rights as everyone else to live in the community, with care and support that suit how they want to live and respond to their changing needs.</p>
<p>Doing things with local residents, not to them</p>	<p>Rather than being limited to schedules based on an assessment at one point in time, care staff will be expected to build relationships with residents to create care and independent living plans which are based on getting to know their needs. These plans will build on residents' strengths, work towards residents' goals and be flexible over time together with residents as their needs change.</p> <p>We will also use resident surveys and discussions with resident groups to evaluate and improve quality and performance.</p> <p>During the tendering period, providers were asked, and evaluated on, how they will implement co-production in their organisation through the life of this contract so that they are also including the resident in the design, delivery, and evaluation of services.</p>
<p>Being ruthlessly financially efficient</p>	<p>By enabling residents to live independently at home for as long as possible, the Home Care and Independent Living service will help keep residents out of hospital and prevent or delay the need for more expensive care settings such as residential or nursing accommodation.</p> <p>Having a therapeutic and preventative model of Home Care and Independent Living may mean that individual care packages can be reduced over time by agreement with the resident where appropriate. The contract requires providers to do more regular reviews and have an outcome focus.</p>
<p>Taking pride in H&F</p>	<p>We know how much H&F residents appreciate not having to pay for care at home, which means they get the support they need and not just what they can afford. We will focus on ensuring a high-quality service which residents are happy to recommend to friends and family.</p>
<p>Rising to the challenge of the climate and ecological emergency</p>	<p>Providers have committed to a number of target operating models in the social value matrix related to rising to the challenge of the climate and ecological emergency. Some commitments include local care staff recruitment, which will reduce the need for travel to the borough; and staff will have a smaller local area to cover, which will be easily accessible on foot or by bus. Other measures include reducing carbon emissions through the equipment they use and vehicle reduction.</p> <p>Providers have also agreed as part of the tender to sign up to the climate charter to reasonably support the Council in its journey regarding the important objective of becoming net zero carbon emissions by 2030.</p>

Financial Impact

The Home Care and Independent Living service is a key priority for the Council, with investment of £17.2m in 2023/24 (significantly more than the investment of £14.9m in 2022/23 and equivalent to an increase of 15%). The services are provided to an average of 1,520 residents per week with an average package size of 14 hours per week.

The additional growth funding proposed of £4.2m in 2024/25 is to meet pressures from hospital discharges and to cater for an increase in the volume and acuity of residents' needs. This funding is subject to the approval of the Budget for 2024/25 by Full Council in February 2024. If approved, the 2024/25 Home care budget will be £21.4m.

The detailed financial implications from this procurement and the impact on the Council's MTFS and Budget for 2024/25 are set out in the attached Exempt Appendix 1.

*Finance implications provided by David Hore, Finance Manager and Prakash Daryanani Head of Finance Social Care & Public Health
Verified by: Sukvinder Kalsi Director of Finance, 10 November 2023.*

Legal Implications

The Council is under a legal obligation to provide these services under the Care Act 2014. These contracts are necessary for the Council to provide these statutory functions.

This report seeks approval for the award of twelve contracts to seven providers who scored the highest in quality and price through the tendering process. The contract is due to commence on 1 June 2024 and to last for an initial period of five years with the option of extending it for a further period of two years. The total value of the contract for the first five years is £55.5m and £77.7m up to a possible seven-year term.

The approval of the increase in rates for the bridging provisions has estimated values for the first five years of £20.3m and for seven years £28.4m.

The combined estimated values for both the patch providers and former bridging care packages for the first five years is £75.8m and for seven years is £106.1m.

These are public services contracts under the Public Contracts Regulations 2015 (PCR) and therefore subject to the advertising and competition requirements set out in these regulations. These obligations were met through the tender procedure which was followed. The services were procured through an open tender procedure with providers having the option to bid for one or a maximum of two contracts of the twelve available. The highest scoring tenders were allocated the highest value contracts on a sliding scale, with the requirement of two different providers per patch as indicated in the tender documents.

Under the Council's Contract Standing Orders, the contract is a High Value Contract ('HVC'). The competitive tendering process which was carried out complies with the requirements of CSO (Contract Standing Orders) 18.

As the award is for a contract in excess of £300,000 and a Key Decision, the report must be submitted to Committee Services for publication on the Council's website. The award decision cannot be implemented before the expiry of the call-in period.

Legal implications verified by John Sharland, Senior solicitor (Contracts and procurement), dated 11 October 2023

Background Papers Used in Preparing This Report

Cabinet report on 5 December 2022 seeking approval to commence the Home Care and Independent Living Procurement - PUBLISHED

DETAILED ANALYSIS

Proposals and Analysis of Options

1. Home care in H&F is currently delivered by three contracted providers covering North, Central and South patches in the borough. These contracts are ongoing based on performance until the new contracts can be mobilised. In addition to the contracted (patch) hours, there are a large number of packages of care delivered by bridging providers. These have accrued over the length of the current contracts when the contracted providers were not able to take the package of care or were not suitable and the numbers accelerated during the Covid-19 pandemic.
2. Approval was sought by Cabinet on 5 December 2022 to carry out a competitive tender exercise which took place over six weeks in December 2022 - January 2023 to procure new contracts that would deliver the specification for a quality home care and independent living service.
3. The tender closed on 30 January 2023 followed by independent evaluation and moderation by the evaluation panel consisting of council employees and one resident with lived experience of Home care.
4. Further clarifications were required once the tender closed to ensure providers included LLW (London Living Wage) for home care and independent living workers travel time as well as contact time in their commercial envelope.

Options

5. Do Nothing - Not recommended

This is not deemed as a viable option as the current contracts are expired and would result in Hammersmith & Fulham not having contracts in place for delivery of a home care and independent living service, leaving us to rely solely on bridging provision. Home care is a statutory service and having contracted

providers in place allows the council better management and oversight on quality and continuous improvement through contract monitoring and ensures sufficient provision to meet the demand of the local population.

6. To award a 5-year contract with the option to extend for another two years to the seven providers with the highest scores following an open tender procedure – **Recommended**

This option is recommended as it will ensure vital and long-term existing provision which can adapt to the needs of residents. It will enable the council to implement contract monitoring, getting the best quality and outcomes for residents and ensure resident involvement.

The delivery of the new service model is expected to be a key driver of meeting the administration's home care pledge of improving quality through:

- Residents having choice and control and a focus on outcomes of care
- Increased number of contracted providers over smaller geographical locations, allowing the council more choice of providers and an incentive for providers to keep quality high to continue receiving packages of care
- Flexible use of commissioned hours
- Better conditions for care staff, with fair pay, paid travel time, consistent training and career progression
- Improving performance management of the service with the introduction of the new Total Quality Management approach.

Procurement process and method

7. The Public Contracts Regulations 2015 (PCRs) apply to this procurement, as well as the council's Contract Standing Orders (CSOs) for High Value Contracts. The procurement took place through the Open Procedure in compliance with the PCRs and the CSOs. This permitted all appropriately registered service providers the opportunity to tender competitively whilst ensuring value for money for the council.
8. The Council took the position not to publish its available budget for the service and allowed the open procedure to give providers the opportunity to submit their prices at levels they thought would be competitive and sustainable. This helped avoid price setting too low or high and enabled the market to set the true cost for the service. It also meant the tender was able to generate sufficient interest from the market.
9. The tender offered service providers the opportunity to tender for a maximum of two lots across the six geographical areas, with a total of twelve contracts available. Successful bidders were allocated a patch based on their overall tender score and geographically to keep the providers locations close to each other if awarded two contracts. As per the tendering documents issued at the beginning of the procurement, no service provider will be awarded a contract covering more than two locations.

10. The tender submissions were evaluated with a weighting of 60% quality, which included 10% of the score allocated for social value, and 40% price to emphasise the priority we are placing on improving the quality of the service at an affordable cost. The technical envelope assessment was independently evaluated by council staff from Adult Social Care commissioning, social care, brokerage and quality assurance. In addition, a resident in Hammersmith & Fulham who uses home care agreed to take part in the evaluation process by evaluating the quality question of all the qualifying tenders and was part of the moderation process for this question.
11. The scores were then moderated during a series of moderation meetings which were chaired by the procurement category lead. During the technical envelope moderation meetings, the evaluators agreed to a consensus score for each supplier and the tender feedback.
12. The contracts are to be an initial term of five years, with the council being entitled at its absolute discretion to extend the contract term for a further period or periods of up to two years, making a maximum total contract period of seven years.
13. A Contracts Notice was published on the UK's Find a Tender Service (FTS), on 14 December 2022. The opportunity was published on CapitalEsourcing (project 21289), the procurement portal used by the council on the same day, with a closing date of 12pm on 30 January 2023.
14. Over 100 providers initially registered an interest with thirty-seven (37) providers submitting a tender by the closing date and thirty one (31) providers passing the Qualification Envelope. Due to the high number of submissions the technical evaluation and moderation timetables needed to be extended to allow sufficient time to read and score the submissions. Six (6) submissions then failed in the Technical envelope by scoring below a 2 on at least one of their questions. As per the Invitation to Tender (ITT) the council stipulated that they would reject and not take forward any Quote which scored 0 or 1 on any criteria. This left twenty-five (25) submissions which were taken through to the evaluation of the commercial envelope. During the commercial envelope clarifications, one provider withdrew their submission, resulting in twenty-four (24) submissions going through the commercial evaluation.

Technical evaluation weighting:

Technical questions areas and respective weightings	
Question area	Weighting
Service Delivery	15%
Quality Assurance	12.5%
Co-production methods	12.5%
Knowledge and understanding	10%
Workforce development	15%
Safeguarding adults	10%
Mobilisation	8.3%
Social Value (split into a qualitative question 50% and quantitative	16.7%

questionnaire 50%)	
Total	100%

Social Value scoring:

15. It is a requirement that all contracts let by the council with a value above £100,000 have a minimum Social Value offer of 10% of the contract value. As the twelve contracts are all for different values based on commissioned hours in the geographical location, a nominal contract value was used for the purpose of evaluating if this criterion was met. This was stated as £10.3m for one contract, and £20.6m for two contracts. If a tenderer failed to meet the minimum value for one contract, they were given a score of 0.

Social Value Quantitative submission scoring	
Tenderer	Social value quantitative score (out of 5.01%)
Tenderer E	5.01
Tenderer A	3.31
Healthvision	2.36
Tenderer Q	2.22
Tenderer D	2.16
Tenderer H	1.92
London Care Ltd	1.50
De Vere Care Partnership LTD	1.31
AHS Franchise Partners (operating as Avant healthcare)	1.29
Graceful Care Ltd	1.13
Tenderer R	1.01
Tenderer V	0.94
Tenderer U	0.92
Tenderer P	0.86
Tenderer L	0.70
Tenderer S	0.67
Tenderer I	0.56
Tenderer N	0.55
Unique Personnel (UK) LTD	0.54
Tenderer J	0.36
Tenderer C	0.00
Tenderer T	0.00
Tenderer X	0.00
Tenderer Y	0.00
Tenderer F (withdrawn)	0.00

16. The highest value commitments from the winning tenderers are as follows:

- More local people in employment
- More opportunities for people facing additional barriers to employment
- Improved employability for young people

17. Social Value commitments will be monitored through our internal social value lead and the contract manager will be responsible to address any shortfalls and address them as part of the contract monitoring process.

Final scoring

18. A summary of the scores awarded to the tenders who passed the qualification and technical envelope following moderation is shown in the table below. Five of the highest scoring six providers were eligible for two contracts. The sixth fell short of the social value requirements for two contracts so were only eligible for one contract, as such the seventh highest scoring provider was allocated the final contract to meet the twelve contracts available.

Compilation of Technical and Commercial scoring			
Tenderer	Weighted score for price envelope	Weighted score for technical envelope	Total score
Graceful Care	38.21%	37.53%	75.74%
AHS Franchise Partners	35.60%	39.78%	75.38%
Healthvision	32.51%	41.85%	74.36%
Unique Personnel (UK) Ltd	40.00%	33.53%	73.53%
London Care Ltd	33.38%	39.99%	73.37%
Haven Care	39.11%	34.19%	73.30%
De Vere Care Partnership LTD	32.93%	39.81%	72.74%
Tenderer H	35.60%	36.91%	72.51%
Tenderer U	38.13%	33.92%	72.05%
Tenderer N	36.87%	34.74%	71.61%
Tenderer P	30.67%	40.35%	71.02%
Tenderer Q	33.54%	37.41%	70.95%
Tenderer V	33.66%	36.14%	69.80%
Tenderer A	33.48%	36.30%	69.78%
Tenderer D	28.30%	40.45%	68.75%
Tenderer E	31.58%	37.01%	68.59%
Tenderer I	29.65%	38.75%	68.40%
Tenderer C	33.41%	33.49%	66.90%
Tenderer T	36.31%	30.20%	66.51%
Tenderer R	36.22%	30.21%	66.43%
Tenderer S	39.74%	26.37%	66.11%
Tenderer J	36.31%	28.06%	62.11%
Tenderer Y	27.92%	34.00%	61.92%
Tenderer X	27.87%	31.19%	59.06%

19. On the basis of the most economically advantageous tenders (MEAT) i.e. the tenders with the highest total percentage awarded to 2 decimal places, it is recommended that the contracts be awarded as follows:

Contract	Patch	Provider
Contract 1	North 1, A (N1, A)	Healthvision
Contract 2	North 1, B (N1, B)	Unique Personnel UK Ltd

Contract 3	North 2, A (N2, A)	Healthvision
Contract 4	North 2, B (N2, B)	De Vere Care Partnership Ltd
Contract 5	Central 1, A (C1, A)	Graceful Care
Contract 6	Central 1, B (C1 B)	AHS Franchise Partners (operating as Avant healthcare)
Contract 7	Central 2, A (C2, A)	Graceful Care
Contract 8	Central 2, B (C2, B)	AHS Franchise Partners (operating as Avant healthcare)
Contract 9	South 1, A (S1, A)	London Care Ltd
Contract 10	South 1, B (S1, B)	Haven Care
Contract 11	South 2, A (S2, A)	London Care Ltd
Contract 12	South 2, B (S2, B)	Haven Care

Contract price

20. The contract price for the transfer of the incumbent (contract) hours is estimated at £55.547m for the five-year contract and £77.775m over a possible seven-year term.

Contract mobilisation

21. As part of their submission tenderers were required to provide a detailed mobilisation plan detailing the measures they will implement when the contract is awarded. These mobilisation plans will be implemented and monitored in close partnership with the incoming and exiting providers.
22. Following the contract awards a project group will be formed where officers from adult social care commissioning and operations teams will work closely and meet regularly with representatives from the new providers to ensure the milestones and key dates included in their mobilisation plan are achieved and there is a seamless transfer of residents to the new services.

Total Quality Management

23. The award of the Home Care and Independent Living service has coincided with H&F's new commitment to "100 perfection" in our home care and care homes. We will introduce a system of Total Quality Management in the delivery of this new service. This will entail a shift from how the current home care contracts are seen and managed by H&F to a culture where "perfect" home care is seen as H&F's business as usual.
24. We will be guided by the 7 principles of Total Quality Management in our quest for perfection in quality of our home care and independent living service, as follows:

- **Resident Focus:** The primary focus of quality management is to meet residents' requirements and to strive to exceed residents' expectations.
 - **Leadership:** Leaders at all levels establish unity of purpose and direction and create conditions in which staff are engaged in achieving the organisation's quality objectives.
 - **Engagement of staff:** Competent, empowered and engaged staff at all levels throughout our organisation will be essential in order for us to create and deliver a perfect home care and independent living service. This is a culture change and as such we are committed to training our staff on TQM and understanding what that means for their roles and expectation on them.
 - **Process Approach:** Consistent and predictable results are achieved more effectively and efficiently when activities are understood and managed as interrelated processes that function as a coherent system.
 - **Culture of ongoing Improvement:** We will ensure we continually focus on learning and improving the quality of our home care and independent living service.
 - **Evidence-based Decision-making:** Decisions based on the analysis and evaluation of data and information are more likely to produce desired results there for we will carefully analyse what providers, resident and independent living worker tell us to ensure we get things right the first time. Resident will tell us when we have got it right and if there has been a marked shift in the quality of the home care and independent living service we deliver.
 - **Relationship Management:** For sustained success, we will ensure we regularly engage the right personnel from our contracted providers at strategic and operational levels
25. The journey to and sustaining the delivery of perfect home care will hinge on the ongoing improvement principle of Total Quality Management. Total Quality Management focuses on meeting residents' needs, so we will involve our residents much more in assessing quality. The feedback we receive through more regular reporting on the Key Performance Indicators for the service, the resident and carer surveys, the resident reference support group, and observation of independent living workers on duty will help us know if we are delivering perfect home care and if not what needs to improve.
26. The path to delivering perfect home care will be transitional and characterised by having the right infrastructure in place to enable this. To get there we are reviewing how we monitor the care to ensure there is a greater focus on measuring outcomes for residents rather than counting widgets. The question we will continually ask ourselves will be, "Is the Home Care and Independent Living service improving the quality of our residents' lives?".

27. We will undertake much more focused announced and unannounced visits which will enable us to sample evidence randomly to assure ourselves. The checks and testing of provider quality standards will include a focus on the London Living Wage, travel time pay, training matrices, training certificates, staff supervision agendas, the complaints log, whistleblowing, standards of recording, resident files and staff employment checks.

Reasons for Decision

28. Local Authorities have a statutory duty to ensure the delivery of home care to adults assessed as eligible under the Care Act 2014. In H&F, the resident is not charged for home care at the point of need. The council is also committed to supporting residents with independent living, enabling them to live their lives with greater choice and control to achieve their maximum potential.
29. Following an open tender procedure process it is proposed the contracts will be awarded to the providers who submitted the most economically advantageous tenders (MEAT).
30. By awarding a five-year contract with the option to extend for a further two years will ensure that the following adult social care priorities are achieved:
- To provide care and support to adults that enables them to remain in their home for as long as possible and prevent the need for more intrusive types of care such as care homes and residential accommodation.
 - To provide a range of care at home which supports independent living and improves on the quality of the service residents currently receive.
 - To improve the quality of home care we provide so that residents have home care and independent living workers who are consistent, well trained, regular, punctual and knowledgeable about individual residents' needs.
 - To ensure a more flexible and resident-centred home care service, with a focus on resident outcomes.
31. Healthvision and Graceful Care who were successful in the tendering exercise have existing bridging packages of care in the borough. These bridging packages will have their hourly rate amended to match the rate they have submitted as part of the tender.

This is to ensure:

- Parity of all their care packages.
- The bridging packages are sustainable.
- The provider has a single tier of remuneration for their home care and independent living workers.
- The council's contractual requirement of home care and independent living workers being paid the London Living Wage (LLW) for contact (visit) time and travel time between visits, as a minimum.

This amounts to 237,205 hours across the two providers, meaning a total of 853,451 hours of care and support will be under the new contracted providers from the start of the contracts.

In addition, when we consider the current market conditions including workforce recruitment & retention, inflation, high interest rates, and the governments social care reforms the council is achieving value for money as a result of this tender exercise.

32. The reason for contracting with care providers in this market is to ensure home care and independent living providers we work with align to our values, business requirements, and that we are able to ensure continuous improvement in the quality of our home care and independent living service.

All home care and independent living providers will be required to deliver the service to the quality and standards set out in the service specification, independent of their hourly rate. All will be subject to the same level of contract monitoring and quality assurance.

33. Contract monitoring meetings will discuss the Key Performance Indicators and factors influencing them. If some of these are not meeting requirements we ask for a Performance Improvement Plan. We have more regular and enhanced monitoring. If this doesn't resolve, we can implement further contractual levers such as penalties, pausing referrals and finally we can decommission (temporary or permanent) the provider.
34. Bridging (spot) care packages are expected to decrease due to the new contracts being implemented. Providers are expected to take all care packages in their respective patches and our brokerage team will ensure all new care packages are placed with the newly contracted providers.

Equality Implications

35. A full Equalities Impact Assessment (Appendix 3) was carried out as part of the approval of the home care and independent living procurement strategy. This has been reviewed and there are no anticipated negative implications for groups with protected characteristics, under the Equality Act 2010, by the approval of the contract awards outlined in this report.

Risk Management Implications

36. This procurement is in line with the agreed procurement strategy to ensure that a high-quality service can be delivered at the best cost to taxpayers with the contract awarded to the tenderers who submitted the most economically advantageous tenders. This is in line with the Council's priority of being ruthlessly financially efficient.
37. Appropriate independent checks were made on the economic and financial standing of all tenderers, taking account of the value and length of the contract.
38. An appropriate mobilisation plan is in place with key stakeholders identified to allow for the contract to commence without disruption to the service provision.

Implications verified by: Jules Binney, Risk and Assurance manager, 11 October 2023

Climate and Ecological Emergency Implications

39. The Council has committed to making the borough net zero carbon by 2030. It aims to reduce greenhouse gas emissions throughout its supply chain by awarding contracts to suppliers with track records of reducing carbon and commitments to doing so in the future, and by working with existing suppliers to reduce emissions. The successful providers all agreed in the tender pack that they will participate / contribute where applicable within the contract. Providers have made a range of social value commitments to climate change in their questionnaire which will be monitored throughout the contract.
40. The Providers will be monitored to ensure delivery against environmental commitments outlined in their service offer. This includes the following:

Provider	Commitments
AHS Franchise Partners (operating as Avant Care)	They have green transport measures in place and have taken effective measures to reduce CO2 emissions
Healthvision	Savings in CO2 emissions, car miles saved through green transport
Graceful Care	No specific commitments made in the questionnaire but agreed to participate / contribute where applicable. Officers will revisit this point with the provider post-award.
London Care Ltd	No specific commitments made in the questionnaire but agreed to participate / contribute where applicable. Officers will revisit this point with the provider post-award.
Unique Personnel UK Ltd	Reducing miles through car sharing
De Vere Care Partnership Ltd	Invested in e-bikes and will equip offices with energy efficient materials and equipment
Haven Care	Reducing CO2 Emissions and car usage

Implications verified by Hinesh Mehta, Assistant Director for Climate Change, 10/10/2023

Procurement implications

41. The Procurement Lead from the procurement and commercial team supported the procurement process including evaluations and moderating the independent evaluators scores and comments. Providers were given opportunity to ask clarifying questions whilst the tender was open which were all responded to with

procurement oversight and legal advice where needed. The evaluators consisted of council staff and a resident with lived experience, to ensure a fair open and transparent process was conducted to reach the final moderated scores. The commercial scores were calculated after the Method Statement scores were assessed to avoid price having an influence on the scoring and the score for Quality and Price were added together to arrive at the Total Score.

42. The procurement process was carried out on CapitalEsourcing and a full audit trail is available on the portal.
43. Following award the contracts will need to be added to the contract register, contract notices issued, and contract managers assigned to ensure safe and effective delivery of the contracts.

Implications verified by: Sophie Uddin Procurement Category Lead, 13 October 2023

Digital Services Implications

44. IT (Information and Technology) Implications: There are no new IT implications resulting from this report. However, Home care providers will need to use the electronic monitoring system CM2000 which is already in place. This system monitors the actual visits which have taken place by home care and independent living workers scanning a tag in the resident's home. The system is used for finance and contract monitoring purposes. The digital services team completed an options analysis of the systems available to meet the requirements of the service and CM2000 was the recommended option. The current CM2000 contract was extended to June 2024 to allow for the consideration of options, and the service now intends to go out to procurement.
45. Information Management Implications: A Privacy Impact Assessment was completed as part of the Home Care and Independent Living procurement strategy.
46. The contracts arising from this report will need to include H&F's data protection and processing schedule. This is compliant with the General Data Protection Regulation (GDPR). The suppliers will be expected to have a GDPR policy in place and all staff will be expected to have received GDPR training.

Implications completed by: Karen Barry, Strategic Relationship Manager, Tel: 020 8753 3481 October 10, 2023

Local Economy and Social Value

47. The MEAT providers have committed to a minimum 10% social value of the overall contract value which meets the Council's minimum requirement. For the purpose of this contract a nominal contract value was put in as £10.3m for one contract and £20.6m for two contracts. Providers needed a minimum

commitment of £2.6m to qualify for two contracts and £1.3m for one contract. Their social value commitments are set out below:

Provider	Social value commitments (£000,000)
Graceful Care Ltd	4.4
AHS Franchise Partners	5
HEALTHVISION	9.2
Unique Personnel (UK) Ltd	2
London Care LTD	5.8
Haven Care	2.7
De Vere Care Partnership LTD	5.1

48. It is recommended that commissioners and contract managers will work with the Council's Social Value Officer to develop a delivery plan with the contractor. Each provider will be required to report on their targets through an agreed method for effective monitoring and will be responsible for developing plans to meet their agreed targets.
49. It is recommended that Commissioners will work closely with Legal Services to ensure appropriate social value clauses are included in the contract, so that the Council can enforce its right to compensation if social value commitments are not delivered.

Completed by: Laura Palfreeman, 18 October 2023

Verified by: Oliur Rahman, Head of Employment and Skills 18th October 2023

Consultation

50. We hosted a number of events for residents to hear from residents about what works well in home care, what requires improvement and what they want from home care services. This information was used to develop the service specification to ensure it captures the key requirements that matter to our residents.
51. The Home Care Quality Leads were regularly visiting residents and shadowing home care and independent living workers on visits to get further feedback from residents about the quality and impact of their home care service.
52. A Hammersmith & Fulham resident who uses home care services agreed to take part in the evaluation process and independently evaluated the quality question of the tenders submitted. The resident also took part in the moderation process to agree the score for this question.
53. There will be further co-production opportunities for residents throughout the development and implementation of the service. Providers were evaluated on their plans to incorporate co-production with residents using their service to develop the service and drive improvements. They have all committed to implementing co-production in their organisational decision making processes down to individual care and support planning. In addition, the resident voice will be vital in monitoring the quality of services and contract monitoring through:

- Peer review groups to help monitor quality and performance of service providers,
- Resident questionnaires to feedback on their experience and satisfaction
- Home care and independent living workers questionnaires

LIST OF APPENDICES

Appendix 1 – Exempt Financial Implications

Appendix 2 – New geographical patches for contracts

Appendix 3 – Equality Impact Assessment

Appendix 4 – Quality Improvements in Home Care and Independent Living Service