

Title of Contract

Minor Adaptations Service

Description of Service

Minor Adaptations are adaptations to the fabric of an individual's dwelling that aid independence and mobility and include items such as grab rails, stair rails and key-safes. Such provision is a statutory service covered by the Care Act 2014, with a specific requirement to ensure individuals can access such adaptations free of charge (up to a maximum cost of £1,000).

Date of contract expiry

31 March 2024

Recommended action

A further 6-month direct award to enable sufficient time to transition the service to in-house provision from 1st October 2024.

Background / History

The service has been provided by We Care Home Improvements (WECHI) since 2016 and originally formed part of the HIA contract. It was disaggregated in 2018 to enable better commissioning oversight and alignment from a commissioning perspective with the community equipment service, as they are similar in nature. The contract has been extended on multiple occasions and costs remained static at £90k for a total of 1950 jobs per annum until 2021-22. As we approached the middle of Q3 2021-22, WECHI advised that a steep increase in material costs in conjunction with an increase in referrals relating to hospital discharges, meant that the pre agreed annual job total would be reached by the end of Q3, 2021-22. Agreement was made to award a further sum of £18k to enable service provision throughout Q4.

As the contract was due to expire 31 March 2022, a request to award a new direct contract to WECHI for 1 year was made to enable service continuity whilst transition of the community equipment service was undertaken. Approval was given and negotiations took place with WECHI to implement a revised model of provision with associated increase in costs in readiness for April 1, 2023. The revised model entailed cost per job, based on data and trends from the previous year and represented a more realistic cost of providing this type of service. Whilst a predicted year end spend working to this new model was estimated at £168k, it was not possible to commit fully to this amount given the service is demand led. In 2022-23 numbers of hospital discharges to enable flow through the system have increased creating a budget pressure of circa £200k.

Current Position

An options appraisal paper was prepared in July 2023 and recommended preferred option was to transfer the service to in-house provision from 1 October 2024. The service will sit alongside community equipment as they are similar in nature.

Subsequent work to develop a mitigation plan for the budget pressure and to agree future funding of this service has taken longer than planned, and it was therefore not possible to progress to single member decision within the original timetable.

To ensure there is no break or disruption to service provision, the recommendation relating to this exemption is to directly award a further 6-month contract to WECHI to enable transition of the service to in-house provision from 1 October 2024, as per the recommendations in the options appraisal paper.

Costs from 2019 to date

19/20 - £90,000 (Block)

20/21 - £90,000 (Block)

21/22 - £140,000 (Start of payment by results)

22/23 - £230,000 (estimated)

The contract is funded through the Disabled Facilities Grant.

Rationale for Exemption

Funding decisions for 2024-25 took longer to conclude necessitating requirement for further time to safely transfer the service to in-house provision.

Risks of recommended course of action

Potential challenge from the market as providers of these types of services will be aware of the direct award end date of 31 March 2024. Short term nature of the contract and the plan to bring the service in-house from 1 October 2024 mitigate likelihood of such a challenge.

Plans for future commissioning / delivery

A detailed options appraisal has been prepared and explores procurement versus in house provision, with the recommended option for the latter. It is of note that approximately 90% of individuals who require minor adaptations are already in receipt of community equipment and therefore in house provision aligned to the community equipment service could offer improved service user experience, economies of scale, efficiencies, and value for money.