## **Decision Register Entry**

## Single Member Cabinet Decision

Executive Forward Plan Reference

E 3460

## Hygge Park and Sulis Down Support Provider Procurement

Decision maker/s	Cllr Alison Born, Cabinet Member for Adult Services
The Issue	Proposal to commission one specialist provider of core support across two new supported living schemes for individuals with a learning disability and/or autism and Care Act 2014 eligible support needs.
Decision Date	26th June 2023
The decision	The Cabinet Member agrees that:
	1.1 The proposed commissioning of specialist care and support across two supported living schemes for adults with a learning disability and/or autism aged 18-64 can go ahead
	1.2 Any annual decision-making regarding funding arrangements for this commission will be delegated to the Director of Adult Social Care.
Rationale for decision	We have significant demand for this type of provision for this cohort, and this is expected to rise by 8.7% by 2030 (PANSI data).
	Expected benefits:
	The benefits of the proposed approach for people are:
	<ul> <li>Homes with own front doors and the associated scope for learning greater independent living skills</li> </ul>
	Homes built to a high quality in the local area
	Improved outcomes and experience for people
	<ul> <li>Involvement of people with lived experience to co-design their services.</li> </ul>
	The benefits of the proposed approach for our providers are:
	<ul> <li>This tender will set a clear foundation and marker for our supply market on our future commissioning intentions for working age adults, and our approach to market development and shaping</li> </ul>
	This opportunity is likely be very attractive as a bidding opportunity across both schemes and would offer good foundation to in-reach into B&NES for potential new

providers.

The benefits of the proposed approach for the Council and ICB are:

- This aligns with our strategic direction to move away from spot purchased care and develop more robust commissioning arrangements and a sustainable market of care within B&NES.
- Efficiency gains by undertaking one procurement exercise
- Supports potential to grow the provider market by encouraging new providers to the area with an attractive contract value
- Good supplier relationship management we want to ensure proactive market engagement and management to ensure quality of care and support for people in B&NES

## Financial and budget implications

This procurement is about commissioning strategically using revenue funding which we already spend on packages from the following budget codes: KJK08 (Learning Disability Pooled Budget); KJB35 (Learning Disability Budget); KHB40 (Autism Spectrum Disorder Budget).

A greater number of existing clients, above the 10 these services will provide, have been identified and have expressed a wish to move. A sample of the costs of which are illustrated below, and which would cover the cost of any new service.

Comparison of current package costs with indicative package costs using a representative sample of packages from the potential candidates (covering a mixed level of need) shows potential cost savings of approximately £2,700 per week (£140,500 per annum). This equates to a potential saving of £983,586.24 over the full 7-year contract term. The calculations are detailed below, and include additional 1:1 hours above the proposed core contract as is currently purchased for each person's care and support.

	Current package cost	Indicative package cost
Annual	£1,140,237.80	£999,725.48
7-year Contract Term	£7,981,664.60	£6,998,078.36

Potential saving over contract term

£983,586.24

The estimated total expenditure will be met from existing spend within the approved purchasing budgets and should provide an overall reduction in existing spend. This is because the identified existing packages will be provided at a lower cost, providing better value for money and delivering both cash savings and cost avoidance.

The illustrative figures assume full service delivery from the start, but we

	would only pay as people entered the service so the first year's cost and potential savings are likely to be tapered.
	As B&NES will have the nomination rights for referrals, we can use the provision in full for our own residents and commission away from spot purchasing placements elsewhere.
Issues considered	Social Inclusion; Customer Focus; Equality (age, race, disability, religion/belief, gender, sexual orientation); Corporate; Other Legal Considerations
Consultation undertaken	Ward Councillor; Cabinet colleagues; Staff; Service Users; Section 151 Finance Officer; Chief Executive; Monitoring Officer
How consultation was carried out	Focus groups with people with learning disabilities and/or Autism in day service settings was undertaken by the Housing team. This reflected the importance of addressing loneliness and proximity to community resources (such as shops and leisure facilities).
	Discussions have been had with Social Workers in HCRG Care Group to share proposals and consider appropriate referrals.
	The proposals were presented to Cllr Alison Born and Cllr Kevin Guy who approved the proposal to be added to the Forward Plan.
	The proposals were presented to Senior Council Officers including the Chief Executive and Section 151 Officer at the Strategic Leadership Team meeting, and final approvals were sought over email from the Section 151 Officer and Monitoring Officer (as well as Cllr Born) for the report to be published.
Other options	Do nothing
considered	We have rejected this option as to do nothing would mean reputational risk for the Council of having access to homes for people without enabling the right support for people to safely live in them. It would do nothing to address the demand for supported living in the B&NES area and would not support an improvement in our relationship with the provider market or its sustainability. It also would continue to impact on unmet need of residents who have Care Act eligible needs and place the council in a position whereby we do not have sufficient provision locally for these residents.
	Procure core support providers separately for each scheme
	We considered running two separate tenders, but this was discounted on account of:
	These schemes are due for completion in similar timeframes
	<ul> <li>Increased resource requirement for commissioners and procurement to run two overlapping tender processes</li> </ul>
	Would not allow time for co-production with people with

	lived experience
	<ul> <li>Letting two care and support contracts for two schemes also may impact the market capacity and resources to respond and result in two smaller value contracts which may not be as viable for the provider market</li> </ul>
	<ul> <li>Shorter lead in period for social care colleagues to complete all Care Act requirements such a LPOA/court deputyship if individuals lack capacity to sign a tenancy agreement.</li> </ul>
	Undertaking one tender offers efficiency in terms of managing the tender process and undertaking the evaluation and enables people with lived experience to input into the process for both schemes more meaningfully. It also ensures we would have one provider to contract manage going forwards for both schemes, offers the market a viable contract, and an opportunity for providers to grow their business and position into or within B&NES.
Declaration of interest by Cabinet Member(s) for decision:	None
Any conflict of interest declared by anyone who is consulted by a Member taking the decision:	None
Name and Signature of Decision Maker/s	Councillor Alison Born Cabinet Member for Adult Services
Date of Signature	26 June 2023

Subject to Call-in until 5 Working days have elapsed following publication of the decision