

Procurement Title

Living Well at Home (Pseudo Dynamic Purchasing System)

Procurement Option

The proposal is for the county council to procure a Pseudo Dynamic Purchasing System (PDPS) which, based on a robust selection criterion, establishes a list of approved providers for the Living Well at Home Service.

Accepted providers will be awarded a place on the PDPS in Lots according to the services they offer. The PDPS will remain open for providers to apply to join at regular intervals throughout its lifetime.

New or Existing Provision

Existing - Current contracts:

- Intermediate Care (Reablement and Crisis) expire on 26/07/2024 and 09/08/2023.
- Hospital Aftercare expires on 30/04/2023
- Homecare Framework expires on 12/11/2023
- Roving Nights expires on 30/09/2025
- Extra Care Services with various expiry dates.

All current services in place will transfer to the successful providers over a phased transition period.

Estimated Contract Value and Funding Arrangements

The annual spend in the first year of the PDPS where all services are in place is estimated at £145m (year end 2025). The total spend over the 12 years of the PDPS is likely to be in the order of £3.2b. The potential maximum value has been calculated taking into account factors for the increasing demand for the services, in addition to inflation and National Living Wage rises. (Appendix D includes the full analysis Part II). The commissioning of services through the PDPS will be required to remain within the allocated annual revenue budget across the life of the arrangement.

Lot	Current annual value	Estimated value	Maximum value
Intermediate Care (including Roving Nights)	£12.45m		£515m
Homecare	£87.0m		£2,223b
Non-regulated services	£1.4m		£430m

Discussions are ongoing with Integrated Care Board (ICB) colleagues who have indicated that they wish to be included in this procurement. Similar discussions are ongoing regarding Blackburn with Darwen Council being able to call off the PDPS. Confirmation of the position from both partners will only be possible in January 2023.

Cabinet is asked to approve the delegated authority to the Executive Director of Adult Services and Health & Wellbeing to include Health partners and Blackburn with Darwen Council within this arrangement, including updated volumes and contract

value and the appropriate legal arrangement to be put in place once a formal decision is made. If no formal decision is made in January 2023, the county council will proceed with the procurement for Lancashire only.

Contract Duration

The Living Well at Home PDPS will be in place for an initial period of 4 years, with the option to extend twice in increments of 4 year extensions each time (a total contract length of 12 years).

Service contracts awarded as call-off contracts from the PDPS will be both spot and block contracts and can continue beyond the PDPS, ending as defined by service user needs. There will be initial periods, break points and potential extensions configured to balance stability of care and to manage performance.

Lotting

The agreement will have several lots (categories) which have been defined by the service areas covered by the agreement. These lots are:

1. Intermediate Care Services
2. Homecare Services
3. Non-regulated Services

Evaluation

Acceptance onto the PDPS will be based on the published evaluation criteria and will include:

- Standard procurement criteria that will run throughout all services/lots on the PDPS such as business standing, financial standing, technical and professional ability.
- Lot specific selection criteria focussing upon service specific requirements such as regulatory registration and rating where applicable and service specific past experience to assess capability.
- Larger number of providers would be evaluated and awarded a place on the Living Well at Home PDPS 'waiting room' which we would then call-off to meet the specific service requirements when needed.
- Call-off contracts will be awarded via many methods including further competition or in limited circumstances via direct award (for specific service/package requirements or where a statutory duty requires it). The decision to award will be based on the published criteria.

Contract Detail

The county council is proposing to establish a Pseudo Dynamic Purchasing System (PDPS), "the Living Well at Home PDPS" to enable the purchase of various services for adult service users.

The aim of the Living Well at Home PDPS is to support the delivery of the county council's vision to enable people to live as independently and healthily as possible. It will provide service users and their carers with the right level of care and support with prevention, early intervention, and the promotion of independence.

A PDPS offers the most flexible procurement solution for the provision of care and support as it allows for the admission of new and / or specialist providers to the system as the market develops, or users' needs change but still provides for standardised Terms and Conditions across all Providers. Additionally, it enables qualitative entry requirements, and supports the use of a more managed pricing structure while still allowing a competitive bidding process for the call-off process where appropriate.

In accordance with the Public Contract Regulations 2015, the county council is opting for a PDPS, to accommodate alternative rules from a standard Dynamic Purchasing System. By using the Light Touch Regime, the county council can more flexibly meet its requirements under the Care Act 2014 such as user choice and rights of service users.

Provider market engagement and stakeholder engagement has taken place; however, a planned periodical market engagement timetable needs to be created and maintained to ensure compliance with the new solution.

Details regarding reopening and evaluation of new applications to the Living Well at Home PDPS known as Rounds will be carried out periodically.

The PDPS will be used to commission the following Services:

Lot1: Intermediate Care Services

Intermediate Care

The new Intermediate Care Service will have two component parts as these focus on the needs of the person at that point in time and may require a different approach dependent upon whether the person is in urgent need or whether there is time to plan the provision and support required. This service will encompass the current Reablement and Crisis Services under one Lot of the PDPS. For the purposes of this report, this Lot will also include the Roving Nights Service.

Lot 2: Home Care Services

Homecare is the delivery of a range of personal care and support services to individuals in their own homes, comprising of personal care and support services provided in response to the assessed needs of an individual.

Lot 3: Non-regulated Services

The county council currently offers a number of non-regulated supports which are all contracted separately. A more efficient way of contracting such supports would be via the production of a Non-Regulated lot within the PDPS which would provide a more flexible approach to procuring these services, over a longer period of time.

It is anticipated that the lot for non-regulated support will initially focus on four service areas but will expand to include further services:

1. Hospital Aftercare
2. Home Help
3. Learning Disability/Mental Health support
4. Support Services

Hospital Aftercare – Short Term Support Service at Home

The PDPS will initially concentrate on the procurement of the Hospital Aftercare service from this Non-Regulated lot, and work will continue to establish what other services could be commissioned under this lot and how they might be delivered.

The county council will be strongly endorsing providers to take account of the implementation of the Foundation Living Wage (FLW) on all lots where relevant.

Admission onto the Living Well at PDPS

There will be a published staged evaluation process to gain entry on to the Living Well at Home PDPS.

There will be clear minimum criteria involving mandatory county council and public procurement exclusion criteria applied at stage 1 (entry onto the PDPS).

There will be a further evaluation criterion focused on individual lot requirements, this will include regulator registration (CQC) and a minimum rating of 'Good'/'Outstanding' as applicable for regulated lots (Homecare and Intermediate Care Services) and/or an assessment of past experience of delivering a similar service (those whose ratings drop to 'Requires Improvement' after successfully getting on to the PDPS, will have commissioning activity suspended pending improvements being made).'

Applicants who pass the above criteria will be added to the relevant lot of the approved list of Living Well at Home providers and will have the opportunity to bid to deliver services during Stage 2 (the call-off stage).

Price

Lot 1: Intermediate Care Services

Please see attached Appendix B Intermediate Care Pricing Options paper (Part II).

Applicants will be required to submit a price for the required services at call off which will be evaluated and awarded in accordance with the published award criteria.

Lot 2: Homecare Services

Please see attached Appendix C Homecare Pricing Options paper (Part II).

When applying to be on the PDPS, applicants will agree to deliver the required services at an hourly rate set by the county council.

Lot 3: Non-regulated Services

Please see attached Appendix B Non-Regulated Services Pricing Options paper (Part II).

Applicants will be required to submit a price for the required services at call-off which will be evaluated and awarded in accordance with the published award criteria.

Pricing and terms and conditions will be reviewed annually to ensure they remain fit for purpose or following any legislative changes necessitating a need to review and / or revise the PDPS arrangements.

Awarding Services from the PDPS (stage 2 call-off stage)

Services will be commissioned in several ways; this may be arranged on an individual service user basis (spot basis), on a block purchasing basis (purchase a volume of services or hours at once).

The method of awarding the service/contract at the 'call-off' stage may be done in a number of pre-determined ways and a schedule of proposed 'call-off' processes will be published.

All services within the scope of this PDPS will be commissioned via the PDPS providers, commissioning outside of the PDPS will only be permitted in exceptional circumstances which is to be determined prior to publication.

Benefits / savings

There are no cashable savings identified for this contract, however the use of the PDPS will support the achievement of identified savings for other Adult Services projects. Non-cashable savings for the PDPS will include :

1. Improved quality of care,
2. Greater levels of user choice,
3. A more stable market,
4. Reduces the need for very expensive off-framework placements

Required Contract Extensions

The below contracts have been identified as requiring extension to bring them in line with the PDPS (See *Appendix E Contract Extensions*). Cabinet is asked to approve the below extensions.

<u>Contract</u>	<u>Start</u>	<u>End</u>	<u>Current Annual Contract Value</u>
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Crisis Central	09/08/2017	08/08/2023	£2,500,000
Crisis East	26/07/2017	25/07/2023	£1,310,000
Hospital Aftercare Central & North	01/05/2018	30/04/2023	£1,400,000

Procurement Title

Provision of Technology Enabled Care Service (TEC)

Procurement Option

Open competitive procedure.

Procurement of a single provider or consortium to deliver the required services. Lancashire County Council (the Authority) wish to procure the TEC Service which will establish an all age, integrated telecare, telehealth, remote health monitoring, falls lifting service and intelligent medication monitoring (universal) service

Discussions are ongoing with Integrated Care Board (ICB) colleagues who have indicated that they wish to be included in this procurement. Confirmation of this position will only be possible in January 2023. Cabinet is asked to approve the delegated authority to the Executive Director of Adult Services and Health & Wellbeing to include Health partners within this arrangement, including updated volumes and contract value and the appropriate legal arrangement to be put in place once a formal decision is made by the ICB.

New or Existing Provision

Existing Telecare Service contract will expire on 31st October 2023.

Existing Integrated Home Response and Falls Lifting Service will expire 31st March 2023, the intention is to extend the falls contract till 31st October 2023 to align with the commencement of the new Technology Enable Care Service.

Estimated Contract Value and Funding Arrangements

The Authority's total estimated value for telecare service is expected to rise and is likely to be in the order of £3m - £8m per annum (estimated £21m-56m for 7 years) and is funded through the Better Care Fund.

The above figures are estimates, as the Authority moves from a free service for clients to a chargeable service on 1st January 2023. Although at present there are 16,626 service users in receipt of this service, it is assumed that there will be a 30 – 50% reduction due to the introduction of charges (based on the experiences in Trafford and Birmingham respectively). It is estimated that a reduced number of 9,600 users (40% reduction) will opt into the new chargeable Technology Enabled Care Service.

As stated above discussions are ongoing with Integrated Care Board (ICB) colleagues who have indicated that they wish to be included in this procurement. Confirmation of this position will only be possible in January 2023. Cabinet is asked to approve the delegated authority to the Executive Director of Adult Services and Health & Wellbeing to include Health partners within this arrangement, including updated volumes and contract value and the appropriate legal arrangement to be put in place once a formal decision is made by the ICB.

Contract Duration

It is intended that the contract will remain in effect for 5 years as an initial period and will include break points, there will also be potential extensions of up to a maximum of 2 years.

Lotting

This Service will be procured as one combined Service, lotting is not applicable. Interested suppliers may bid in any, or as many bidding model(s) as they wish, this can include as an individual organisation, consortia or subcontracting arrangement.

Evaluation

Quality Criteria 60%	Financial Criteria 40%
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Social Value will account for 10% of the quality criteria. The objectives will be focused on promoting equity and fairness and will require the Provider to ensure people, irrespective of illness, disability or age, are supported to:

- Improve their physical and mental health;
- Support families and carers in their choice of health and social care to help them maintain their independence; and
- Protect our most vulnerable children and adults from avoidable harm.

Contract Detail

Telecare is an important means by which people can be supported to live independently in their own homes in lieu of traditional care support (such as care at home). Work is underway to develop our traditional analogue service into a digital technology enabled care (TEC) offer that will become all age, preventive, proactive and fully integrated with remote health monitoring and electronic care records.

The world in which we operate has changed significantly since the service was first commissioned in 2015 and Lancashire County Council (The Authority) intends to transform its traditional analogue telecare service into a TEC Service, fit for the digital future. It is an ambitious commission that will introduce new and innovative technologies and digital approaches which enhance the experience and the outcomes for our service users. Moving from analogue to digital TEC is much more than a simple replacement, it is an opportunity for a fundamental redesign of our existing telecare offer.

Our current telecare service acts as a reactive alarm response service to over 16,000 older people, with limited integration to other health and social care services. This commission will significantly widen the scope of this service.

The new service will be an integrated telecare, telehealth, remote health monitoring, falls lifting and intelligent medication monitoring service. The Authority will lead the procurement and the intention is for ICB will have access to the service delivered by the contracted provider.

It is an exciting commission that will see the development of a service that monitors our resident's environment, their behaviour, falls and physiology through

one alarm receiving centre, and provide both a clinical and non-clinical support offer when the technology indicates a problem.

As the Authority moves from a free service for clients to one that is chargeable, it is assumed that there will be a 30 – 50% reduction in the number of people using the service (based on the experiences in Trafford and Birmingham respectively). It is estimated that a reduced number of 9,600 users (40% reduction) will opt into the new tiered service. Based on the current weekly service cost of £6.58 per service user, the anticipated savings are anticipated to be £3.7million each year.

Two key objectives of introducing a charge are to recover closer to the actual costs of providing the service and to give service users a choice of service levels appropriate to their personal needs. The new TEC offer will be based on a new three-tiered model allowing users a choice of service and associated weekly cost.

It is intended that the new service will commence on 1st November 2023.

Procurement Title

Contract for the Provision of Mental Health Rehabilitation Service

Procurement Option

Above Threshold - Open Tender Procedure compliant with the Public Contracts Regulations 2015

New or Existing Provision

Mental Health Rehabilitation is an existing service currently being delivered within supported living, residential and nursing placements under a framework agreement which ended on 30th November 2022. This procurement is for continuation of elements of the service in new bespoke supported living settings.

- New accommodation, sourced by the Positive Living Outcomes Team and service provision due summer 2023.
- This gap in service provision was approved by the relevant Head of Service in order to allow an effective review of the future arrangements.

Estimated Contract Value and Funding Arrangements

- Level of Current Spending on Mental Health Rehab. (Gross, excl. Health Income) £2.5m per annum
- Estimated Annual Contract Value: £1.74m per annum, based on an estimated average cost of £60,000 per year for a placement multiplied by a total capacity of 29 placements, leaving sufficient budget within current financial envelope.
- Estimated Total Contract Value: £13.9m over recommended 8yr contract period)
- Funding arrangements: Funding split 50/50 with the Integrated Care Board*

*Informal arrangement in place to simplify the 'who pays' arrangements of determining liability for payment following assessment under section 117 *MHA 1983)

Contract Duration

An initial period of 3 years with an option to extend the contract beyond the initial term for any period(s) up to a maximum of a further 5 years.

Lotting

3 Mental Health Rehabilitation Services specific buildings with a total capacity for 29 placements:

Lot 1 – Mental Health Rehabilitation Services – Preston. Capacity: **5 placements**

Lot 2 – Mental Health Rehabilitation Services – Burnley. Capacity: **12 placements**

Lot 3 – Mental Health Rehabilitation Services – Heysham. Capacity: **12 placements**

The tender documents will set out what restrictions will be placed on the number of lots for which a single provider can bid.

Evaluation

Quality Criteria 60%

Financial Criteria 40%

Of which Social Value referred to in the Service Specification will form 10% of the quality criteria and will focus on recruiting from the local community and supporting the local economy.

Contract Detail

Mental Health Rehabilitation Services is an intermediate short-term service of up to 2 years, for adults with needs in relation to their mental health. The focus of the Service will be firmly on promoting rehabilitation and recovery in a supported housing setting. It will provide specialist time-limited support, which will lead to individuals making choices, taking control, progressing to independent living, social inclusion and wellbeing. The Mental Health Rehabilitation Service is a cost-effective and 'least restrictive' way of reducing hospital stays, avoiding admissions to mental health wards and reducing residential and nursing placements. This will support people to live more independently in the community to aid recovery and support community participation.

The service will be provided to people with care and support needs who:

- Meet the national eligibility threshold for care and support as set out in the Care and Support (Eligibility Criteria) Regulations 2014 for the Care Act 2014; and where the health and social care needs are best met by mental health rehabilitation; and
- Are deemed to be ordinarily resident within the administrative area of Lancashire County Council.

Proposed approach

- Initial capacity for up to 29 placements in Lancashire. Demand will be monitored* and should the budget allow, approval for further capacity may be sought.
- Tenderers will submit a single rate to cover Background support, 1 to 1 hours, Waking Nights, and a sleep-in rate.

***A Housing Needs Assessment (Housing LIN) was undertaken which forecast a need for 57 placements for Mental Health Rehabilitation.**

Procurement Title

Smokefree Lancashire – Tobacco Dependency Service

Procurement Option

Open Tender

New or Existing Provision

Existing Provision

Estimated Contract Value and Funding Arrangements

The contract per annum is £2,360,997 per annum
 (£1,561,222 service delivery and £799,115 treatment).

The contract overall value is £16,526,979
 (£2,360,997 x 7 years)

Contract Duration

Initial period of 3 years with 2 extensions of 2 years each

Total duration including extensions – 7 years

This will align with Smokefree 2030.

Lotting

There will be no lotting for this contract.

A previous decision was made to amalgamate the service into one Lancashire wide contract to make efficiencies.

Evaluation**Quality Criteria 70%****Social Value 10%****Financial Criteria 20%**

Quality is weighted at 70% as the price to deliver the services is more or less known – it is not anticipated that cost will be a determining factor.

As this commission involves a system wide service that will be required to integrate with wider partners, including the NHS, a greater emphasis has been placed on quality. We need to ensure that a provider can deliver on additional requirements involved.

Social Value Objectives:

1. *Promote training and employment opportunities for the people of Lancashire.*
2. *Raise the living standards of local residents.*
3. *Build capacity and sustainability of the voluntary and community sector.*
4. *Promote equity and fairness.*
5. *Promote environmental sustainability.*

Contract Detail

The procurement is being conducted under PCR 2015 using the Open Procedure.

The Smokefree Lancashire Tobacco Dependency Service is due for re-commission. The main objective is to support smokers in Lancashire to quit smoking. There are approximately 134,164 smokers in Lancashire. Smoking is a major contributor to health inequalities and disproportionately affects those disadvantaged by poverty. People on low incomes start smoking at an early age and tend to be more heavily addicted spending up to 15% of their weekly income on tobacco.

In Lancashire smoking prevalence varies significantly. In 2020 smoking prevalence was estimated to be 22.8% in Burnley and 22.7% in West Lancashire, nearly double the national average of 12.1%.

The service will support all smokers aged 12 years and over to quit. The service will be universally accessible across Lancashire but will target areas and priority population groups with high smoking prevalence. It will work with 5-6% of the smoking population annually and will support a minimum of 50% of service users to quit.

The service will offer a combination of behavioural support, nicotine replacement therapy and access to e-cigarettes. The addition of e-cigarettes to the service offer follows evidence from NICE (National Institute of Care Excellence) and OHID (Office for Health Improvement and Disparities) (Office for Health Improvement and Disparities) and service user consultation which suggests that they are an effective quit aid that are much safer than smoking and offer an opportunity to engage more smokers and achieve a higher number of quits.

The provider will deliver a specialist clinical service. This will support the NHS CORE20PLUS5 and NHS Long Term plan agenda targets.

Aside from treatment, there will be a focus on prevention, promotion, and harm reduction which will contribute towards the national ambition of Smokefree 2030, aiming for all areas to have a smoking prevalence of 5% or less. The service will contribute to the public health strategies including Healthy Hearts, Better Start in Life and Healthier Minds. The service will work with family hubs to support staff who are in contact with pregnant and post-partum women, children and families. Smokefree Lancashire will deliver an outreach model which target specific cohorts of people. For example, routine and manual workers in workplaces, social housing, and homelessness. Smokefree places will also target new mothers in partnership with health visitors and education settings in areas of high prevalence. It will work with schools to reduce the uptake of smoking and vaping.

The service go live date is expected to be in October 2023.

Procurement Title

A601(M) Maintenance Project

Procurement Option

Open Procedure compliant with the Public Contract Regulations 2015

New or Existing Provision

New one-off works project

Estimated Annual Contract Value and Funding Arrangements

The estimated value of the contract is £4.6m which will be funded from the Highways Capital budget.

Contract Duration

The contract will be let for period of approximately 12 months, commencing circa April 2023.

Lots

As a single principal contractor is desirable, this project has not been lotted into smaller packages of works.

Evaluation

The Contract will be established by evaluating contractors against the following criteria:

Stage 1: Selection Stage (Pass/Fail)

Mandatory and discretionary grounds to ascertain suppliers' financial, technical capability and ability to demonstrate their experience in operating in compliance with industry standards. The Authority will use the PAS-91-2013-A1-2017 industry standard selection questionnaire. Each tenderer must pass this stage before proceeding to stage 2.

Stage 2: Award Stage

The tender bids will be evaluated on.

- 60% price
- 40% technical, quality, and social value

The highest scoring tenderer will be awarded the works contract.

Contract Detail

The A601(M) is a 1.3 mile (2.1km) Special Road in Lancashire, it is a key road from M6 junction 35, linking the M6 to the A6, providing access to the Truck Haven located on the junction of the A601(M) and A6, as well as Carnforth itself. The A601(M) also forms part of the official M6 motorway diversion route between junctions 35 and 36.

The works for this contract will comprise of essential maintenance to four bridges, namely Higher North Road, Brewer's Barn East and West, and Elpha bridges. This essential maintenance will include new vehicle restraint parapets and string-course units, and work to the bearings. The maintenance to be carried out varies depending on the requirements of each bridge.

The works will be designed in-house by the Authority's Engineers who will supervise a single principal contractor to deliver this project. The NEC4 Engineering and Construction Contract (ECC), Option A (activity schedule) with amendments to suit this project will also be used.