



## **Mayor and Cabinet**

Above type the name of the Committee / Mayor and Cabinet / Full Council

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### **COVID related contract extensions**

**Date:** 24 March 2021

**Key decision:** Yes

**Class:** Part 1

**Ward(s) affected:** All wards

**Contributors:** Executive Director for Community Services, Director of Integrated Commissioning, Director of Public Health

### **Outline and recommendations**

COVID-19 has created exceptional circumstances and has affected numerous procurements and contracts. Regulation 72 of the Public Contracts Regulations 2015 as amended by the Public Procurement (Amendment etc.) (EU Exit) Regulations 2020 allows contracting authorities to modify contracts during their term provided that certain criteria has been met. One such criteria is that contracts may be modified where this has been brought about by circumstances which a diligent contracting authority could not have foreseen. This supports unforeseen circumstances such as COVID-19. In order to authorise any changes to a contract, a report must be written detailing the circumstances and providing an explanation as to why the change is required as well as explicitly detailing how COVID-19 has specifically affected the contract in question.

This report includes requests for the approval of COVID-19 related contract variations / extensions as set out in the table and appendices in this report.

It is recommended that each contract is discussed and approved on an individual basis, taking into account the unique circumstances of COVID-19.

## Timeline of engagement and decision-making

*Contract Extensions due to Covid 19-Related Delays to Commissioning Timelines (Mayor and Cabinet 9th July 2020)*

*Lewisham Borough Based Board 9<sup>th</sup> March 2021*

### 1. Summary

This report describes for Mayor & Cabinet a number of health and social care contracts for which the provider market has been impacted by the COVID-19 pandemic, and recommends extension of these contracts to allow for robust reprocurement.

### 2. Recommendations

This report recommends that Mayor and Cabinet approves extension of the following contracts:

#### 2.1 Sexual and Reproductive Health (SRH)

- 2.1.1 SRH Clinic Services with Lewisham and Greenwich for an additional year from March 2022 to March 2023 at a cost of up to £2,644,903
- 2.1.2 LSL Tripartite for Sexual Health Commissioning, for an additional 2 years from April 1st 2021 to 31st March 2023 at a total cost of £186,470
- 2.1.3 Access to Sexual Health London (SHL) online sexual and reproductive health services via an access agreement with The City of London, for a further year from 1st April 2022 to March 2023 at an estimated cost £679,731.
- 2.1.4 With Brook for the c-card condom distribution scheme for two years from 1 April 2021 to 31st March 2023 at a total cost of £72,000.

#### 2.2 Homecare

Contracts for provision of homecare with Eleanor Home Care (£6,266,960.76), Westminster Home Care (£5,387,142.07) and Care Outlook Ltd (£4,065,535.20) for a further 12 months until 31st March 2023, at an estimated total annual cost of £15,687,258

#### 2.3 Learning Disability Framework

Contracts for 29 (twenty nine) supported living services and 4 (four) registered residential care services between the Council and the organisation to the end dates as specified in Appendix 1. The total value of these contract extensions is £8,584,758.

#### 2.4 Community Equipment

To remain a member of the London Community Equipment Consortium at an annual fee of £10,500 per annum and to approve a 2 year permissible extension to the existing Lewisham call off agreement with the Mediquip Assistive Technology Limited from April 2021 until March 2023. This is the final permissible extension totalling £1,858,573 for the year, of which 25% is paid by the Council (£464,143) and the balance of 75% (£1,392,429) is paid by Southeast London Clinical Commissioning Group (SEL CCG)

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### 3. Policy Context

3.1 The procurement of Health & Care services is influenced by a range of National and Local Act(s) and Guidance(s), which outline the requirements and duties of the Local Authority and CCG, in the delivery of comprehensive health and social care provision that meets the need of the local population. These include:

#### National

- Care Act 2014
- Health and Social Care Act 2012
- Public Health Act 1986
- Health Protection (Coronavirus) Regulations 2020
- Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2013
- National Health Service Act 2006
- Mental Health Act 2007
- NHS Long Term Plan
- Improving access to mental health services by 2020

#### Local

- Corporate Strategy 2018/22
- **Open Lewisham** – a place of safety for all
- **Tackling the housing Crisis** – everyone has a decent home that is secure and affordable
- **Giving children and young people the best start in life** – every child has access to an outstanding and inspiring education and given the support they need to keep them safe, well and able to achieve their full potential
- **Delivery and defending: health, social care and support** – ensuring everyone receives the health, mental health, social care and support services they need
- **Building safer communities** – every resident feels safe and secure living here as we work together towards a borough free from the fear of crime
- Lewisham Health and Wellbeing Strategy 2013/23
- Lambeth, Southwark and Lewisham (LSL) Sexual and Reproductive Health Strategy 2019/24

3.2 In line with other councils, Lewisham Council became the lead agency for commissioning services for adults with a learning disability on 1st April 2009. The Joint Commissioning Section 75 signed in 2014 means that it leads on commissioning in respect of adult services for Mental Health, Learning Disabilities, Older Adults, Physical Disabilities and Carers.

3.3 The Care Act 2014 is the most substantial piece of legislation relating to adult social care to be implemented since 1948. It consolidated previous legislation, common law decisions and other good practice guidance. The Care Act places a wide emphasis on prevention, the provision of advice and information, changes to eligibility, funding reform and market shaping and commissioning.

3.4 The Council requires that contracts continue to be delivered in accordance with the principles laid out in Transforming Care, the Government's Concordat Programme of Action (2012) and the national plan "Building the right support" (2015) to develop community services for people with a learning disability and/or autism. These principles are:

- People should be supported to have a good and meaningful everyday life
- Care and support should be person-centred, planned, proactive and

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coordinated

- People should have choice and control over how their health and care needs are met
- People should be supported to live in the community
- People should have a choice about where and with whom they live
- People should get good care and support from mainstream NHS services
- People should be able to access specialist health and social care support in the community
- People should be able to get support to stay out of trouble
- When health needs cannot be met in the community people should be able to access high quality assessment and treatment in a hospital setting

3.5 The Framework Agreement established in 2019 links with the Council's Corporate Strategy (2018 – 2022). The Framework operates in line with the Council's commitments:

- to ensure all health and social care services are robust, responsive and working collectively to support communities and individuals
- to defend and deliver health and social care services that protect the most vulnerable in our borough:
- to ensure everyone receives the health, mental health, social care and support services they need

## 4. Background

4.1 This report presents current procurements and contracts which have been affected by the ongoing challenges presented by COVID-19, highlighting contracts which require variations/ extensions resulting from issues associated with COVID-19.

4.2 The COVID-19 pandemic has had enormous impacts across a range of services. Providers in the health and care sector are currently dealing with significant challenges in managing the response to the pandemic. As such they are not in a position to engage with procurement processes.

4.3 The pandemic has also led to significant changes to services delivery models, and further time and work is needed to understand the impact of those developments.

4.4 The COVID-19 pandemic has created extenuating circumstances and has consequentially altered the way in which service delivery of some contracts occur. As a result, some contracts may require variations/extensions in order to continue to carry out service delivery, or provide feasible changes to occur to enable procurements to take place.

4.5 A classification system has been designed and applied to these contracts, highlighting the current status of each individual contract and applicable extension circumstances. The eight classification typologies can be seen in Table 1 below. These classifications are useful in highlighting the circumstances of each contract and aid the identification of any actions needed to facilitate variations/extensions or M&C papers, as appropriate.

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Table 1

Classification Type	Details
A	Time elapsed to undertake full procurement, contract extension/variation needed
B	Currently unfavourable market conditions necessitate contract extension/variation
C	Extension/variation required but permissible extensions have been exhausted
D	Extension/variation required (specific issues)
E	Contract permitted extension(s)
F	No extension needed, service due to end
G	Procurement planning currently underway but new service not expected to be in place within 12 months
H	Procurement planning currently underway and new service to be in place within 12 months

4.6 The report sets out which category each contract falls into.

## 5 COVID-19 Contract Extension Information and Governance Procedures

5.1.1 COVID-19 has created exceptional circumstances and has affected numerous procurements. Regulation 72 enables modifications of contracts due to unforeseen circumstances such as COVID-19. In order to authorise any changes to a contract, a report must be written detailing the circumstances and providing an explanation as to why the change is required as well as explicitly detailing how COVID-19 has specifically affected the contract in question.

5.2 The main body paragraphs in this report set out why modifications are required to numerous contracts and how COVID-19 has affected those services.

## 6 Service impacts and contract extensions

### 6.1 Contract extensions for sexual and reproductive health and HIV services

#### Tripartite for LSL SRH commissioning

6.1.1 Lambeth, Southwark and Lewisham (LSL) have been jointly commissioning sexual health services since April 2016. A specialist commissioning team, based at Lambeth Council, carries out a range of commissioning functions on behalf of the three boroughs. Lambeth enters into contracts on Lewisham and Southwark's behalf for the provision of agreed services.

6.1.2 The current contract for LSL Joint Commissioning of Sexual Health Services will come to an end on 31st March 2021, and was for a total value of £74,698 for services in 2020/21.

6.1.3 These arrangements are normally reviewed annually. This year due to the impact of Covid-19 there has not been capacity to undertake the usual review and associated governance process and as such it is proposed that the contract is extended. The value for this year is increased to reflect additional work which will be undertaken this year on engagement and procurement of core Sexual Health Contracts (details of which are set out in this report).

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- 6.1.4 This report recommends that Mayor and Cabinet agrees that LB Lewisham enters into a further Tripartite Agreement for sexual and reproductive health commissioning with Lambeth and Southwark from April 1st 2021 to 31st March 2023 at a total cost of £186,470.
- 6.1.5 The extension of the joint LSL commissioning arrangement will allow for robust procurement and oversight of sexual health services against our shared LSL Sexual Health strategy and in line with the London Sexual Health Transformation Programme.

### **Sexual and Reproductive Health Services at Lewisham and Greenwich Trust (LGT)**

- 6.1.6 Lewisham Council currently holds a contract for integrated sexual and reproductive health (SRH) services with Lewisham and Greenwich Trust. The contract was awarded for a period of 5 years from April 2017 until end of March 2022, which includes permitted extensions. The service provides a comprehensive set of SRH services for contraception, testing and treatment of sexually transmitted infections (STIs), including HIV testing and diagnosis. In 2020 routine access to pre-exposure prophylaxis (PrEP) for those assessed to be at risk of contracting HIV was also launched in SRH clinics.
- 6.1.7 The current service model was commissioned as a result of London-wide collaboration on the transformation and reconfiguration of sexual health services across the Capital to support future affordability and sustainability of provision. It supports open access for sexual health across London through the use of an integrated sexual health tariff (ISHT) and promotes the use of online services for asymptomatic STI testing activity to create additional clinical capacity for focus on complex demand.
- 6.1.8 Lewisham is part of pan-London reciprocal agreements through the London Sexual Health Transformation Programme which enable Lewisham residents to access services at other hospital trusts through other boroughs contracts, and for residents of other boroughs to access services at Lewisham and Greenwich Trust through our contract, enabling patient choice and standardising service and costs across London.
- 6.1.9 The current contract is due to end on 31<sup>st</sup> March 2022. Due to the scale and complex nature of this contract any new contract would need to be awarded by December 2021 to allow for the mobilisation. To allow for a full tender process to comply with the Council's Contract Procedure Rules, and to provide bidders with sufficient time to respond to the opportunity, officers would need to go out to tender in Spring 2021.
- 6.1.10 The London Sexual Health Programme are engaging with commissioners from across London and there appears to be little appetite for re-tendering contracts that have similar contractual timelines / end dates. Furthermore, the ongoing COVID-19 situation is likely to limit the market of suitable providers who would bid for this service at present.
- 6.1.11 It is proposed that Mayor and Cabinet authorise officers to extend this contract with LGT for a period of 12 months, commencing on 1<sup>st</sup> April 2022 at a cost of up to £2,644,903. The rationale for asking for an extension for this contract is the need to fully understand the impact of Covid-19 on demand for sexual and reproductive health services, and how the changes to services made in response to Covid-19 have impacted on existing health inequalities.
- 6.1.12 Prior to making any significant change there is a need to undertake comprehensive needs assessment and consultation with patients and clinicians and this is not possible at this time. Initial analysis has been carried out of service data but with limited insight from patients and clinicians, to determine appropriate service model or levels are for a post-COVID world and make a reasonable market assessment.
- 6.1.13 There is an opportunity, through extending this contract for 12 months, to work with the wider sexual and reproductive Health system to improve services and make them more

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efficient. The London Sexual Health Transformation Programme have engaged with clinicians, hospital trusts and commissioners and from across London and they have advised that going out to tender now has the potential to destabilise the local, subregional and regional sexual health system. Furthermore, there is very limited market of suitable providers who could bid for this service.

- 6.1.14 There is an expectation from NHS Trusts from NHSE and CCGs that procurement will not be carried out during Covid as NHS Trusts and other health partners have limited capacity due to the additional demands placed on them in delivering the Covid response, and in managing services in a Covid safe way.
- 6.1.15 The contract is paid on tariff activity. Lewisham ISHT activity at LGT was £2,196,121 for 18/19 and £2,255,146 for 19/20. Overall projected costs for 20/21 including growth, Agenda for Change pay rises and the introduction of new PrEP service was £2,657,000, actual end year projection is £435,333 less due to covid-19.
- 6.1.16 To end 2021/2022 the contract is forecast to have cost a total of £12,200,600, the proposed extension will cost up to £2,644,903 (approximately 22% of the total contract value). The aggregate cost of the contract with the extension would be £14,845,503. Note that there may be additional ring-fenced grant made available for specific services eg. PrEP or uplifts to costs for Agenda for Change pay rises, and these would be passed on to the provider through the contract as appropriate.

#### **Continued access to SHL Online Sexual and Reproductive health services via access agreement with City of London**

- 6.1.17 Lewisham residents have had access to STI Testing and some treatments via a pan-London E-service since July 2018. Approval to join this agreement was originally granted for a period of 2 years at an estimated cost of £426,150.
- 6.1.18 As part of Covid-19 business continuity measures access to the e-service was uncapped in March 2020, and online contraception has been enabled for a 6 month period from February 2021.
- 6.1.19 Mayor and Cabinet previously agreed to extend Lewisham access to the pan-London E-service from July 2020 until March 2022 to enable a longer-term review of how this service complements the wider sexual health system which has changed and will continue to change as a result of coronavirus.
- 6.1.20 This report now recommends a further extension for a period of 1 year from April 2022 to March 2023 to bring the review of access to the e-service in line with wider sexual and reproductive health recommissioning which has been delayed due to the impact of covid-19.
- 6.1.21 This proposal will ensure continuity of access to a wide range of services online, providing choice to people about how they access services, and to manage demand in clinics to ensure there is capacity to meet more complex clinical needs.
- 6.1.22 Payment is on activity and total costs of services accessed via the e-service are forecast to be £679,731 for 2021/22.

#### **Brook 'C-Card' condom distribution scheme**

- 6.1.23 Lewisham currently contributes £36,000 per annum towards a condom distribution scheme which is provided by Brook through a contract with Lambeth Council. Condoms are provided free of charge to young people under the age of 25. The current contract comes to an end on 31<sup>st</sup> March 2021.
- 6.1.24 The 'C-Card' service was due to be reviewed alongside other sexual health services for

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young people across LSL for recommissioning for March 2021. These service contracts (Compass in Lewisham) have all been extended due to the uncertainty around delivery models and demand caused by Covid-19.

- 6.1.25 Lambeth Council are proposing to extend their contract with Brook for C-Card for a period of two years to ensure continuity of the condom distribution service alongside other sexual health services provided in pharmacies. It is proposed that Lewisham also extend their involvement with this project to maximise opportunities for young people to access sexual health services and to bring recommissioning in line with the wider review and recommissioning of Sexual health services set out earlier in this report. This report recommends that Lewisham continues to contribute £36,000 per annum for an extension to this contract for two years from 1 April 2021 to 31st March 2023 (24 months) at a total cost of £72,000.

## 6.2 Homecare services

- 6.2.1 On 9<sup>th</sup> December 2015, Mayor and Cabinet (Contracts) agreed to award the Home Care Contracts to 4 different Providers for a period of 2 years (April 16 – March 18) plus agreement to a one year extension (till March 19). The Contracts were further extended until March 2021. In 2018 Mayor and Cabinet agreed to extend only three of the Home Care contracts for an additional year. The Homecare Lead Provider contract for Neighbourhood 1 was not extended, due to ongoing quality issues. The services for that provider were consequently divided among the other 3 main providers by geographical area.
- 6.2.2 The reasons for the request to extend the contract dates have been linked with a detailed options appraisal and Business Case for the future delivery of an integrated home care service in Lewisham. On 30<sup>th</sup> October 2019, Mayor and Cabinet agreed a further 1 year contract extension to ensure there was adequate time for all partners, stakeholders, providers and service users to be fully involved in the co-production of the future delivery model for Home Care in Lewisham.
- 6.2.3 On 11<sup>th</sup> March 2020 Mayor and Cabinet agreed to procure Neighbourhood Lead Providers (Home Care) subject to a further report being brought back to Mayor and Cabinet in July 2020 detailing the new model for Home Care and setting out the full procurement process for approval.
- 6.2.4 However this area of development work has been suspended as Officers and Providers are currently reacting to the demands of the Covid-19 pandemic, ensuring that the current contracted services continue to be delivered. Also, the social distancing restrictions imposed on the general population means that it has not been possible to arrange face to face co-production events with stakeholders which such a development would require and the overall impact on the NHS has meant that the clinical teams who would ordinarily be part of that development work have been redeployed as part of the wider NHS response to the pandemic.
- 6.2.5 On 9<sup>th</sup> July 2020 Mayor and Cabinet agreed to extend a number of contracts for a range of Adult Integrated Commissioned services where re-procurement had been unable to proceed because of the impact of Covid-19 response and recovery process. As part of this, all three Lead Providers for Home Care had their contracts extended for a further year until 31<sup>st</sup> March 2022.

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- 6.2.6 To meet the deadline for delivery to this even further extended date would have required procurement through the period of the recent 'Covid wave 3' which has not been feasible as all partners have yet again had to focus effort on service delivery, service sustainability and testing and vaccination of staff to contain the spread of the virus and protect both clients and staff. Therefore, the market has not had the capacity to respond without diverting attention away from these primary responsibilities and will not be able to do so for the foreseeable future due to the continuing impact of Covid-19
- 6.2.7 Approval is therefore now requested to extend the contract for a further 12 months until 31<sup>st</sup> March 2023 to ensure there is adequate time for all partners, stakeholders, providers and service users to be fully involved in the co-production of the future delivery model for Home Care in Lewisham. This will also ensure continuity of care is in place for the service users accessing these services. If these services are not extended, there is a risk of significant increase in the service users inappropriately attending Primary and Secondary Care services. The estimated annual value of all 3 contracts in 2022/23 is £15,687,258.

### 6.3 Learning Disability Framework

- 6.3.1 Following the award of Lewisham's Learning Disability Framework Agreement in June 2019 officers began the process of recommissioning contracts awarded under the previous Framework beginning with 13 supported living services which were reprocured through a mini competition process (coded as LDF1) . Recommendations for the award of contracts from this procurement exercise were agreed at Mayor & Cabinet on 5 February 2020 (*Report titled 'Framework Agreement for Services to Adults with Learning Dis abilities – Call off supported living contracts'*).
- 6.3.2 Prior to the completion of LDF1 officers had secured approval from Mayor and Cabinet on 11 December 2019 to commence the second phase of reprocurement of Framework contracts which was due to start in April 2020 (*Report titled: Request for permission to re-procure contracts for Supported Living and Residential Care services through call off from the Framework'*). However, it was not possible to proceed with this second phase (coded LDF2), due to the national public health emergency which then arose caused by the pandemic as Council Officers and service providers needed to focus on dealing with the current emergency situation.
- 6.3.3 As it was not possible to predict how long the impact of the pandemic would be felt, and how long government restrictions would be in place, it was necessary for officers to request an extension to the contracts included in LDF2 and all other existing contracts on the Framework, as the delay in going ahead with phase 2 meant a consequent delay in the further planned phases of recommissioning contracts under the Framework. A report requesting these contract extensions was presented to and agreed by the Executive Director, Community Services, on 9 June 2020. (*Report titled: 'Learning Disability Services – Request for Specific Contract Extensions'*)
- 6.3.4 The delayed reprocurement of Phase 2 of the recommissioning programme (LDF2) was planned to start in January 2021. However, with the introduction of further lockdown measures by government, and the significant increase of covid incidence in the community and within services covered by this report, it would not be safe to proceed with procurement at the current time as both providers and council officers need to focus on the health and wellbeing of vulnerable service users and staff and ensure the safe management of current provision. Therefore it is necessary to delay proceeding until the procurement process can be managed safely for all concerned and until providers recover sufficiently and have capacity to tender.

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- 6.3.5 In addition, in adhering to national lockdown restrictions, face to face consultation and meetings with affected service users and family members is not yet possible. A reliance on virtual communication methods would limit people's ability to fully engage in the procurement process, specifically within the evaluation phase in which service users and their families have a key role.
- 6.3.6 The delay to phase 2 of the reprocurement programme means a consequent delay to the further planned phases of reprocurement of Learning Disability Framework contracts (completed in 5 phases in total). Therefore it is necessary not just to extend the contracts covered in phase 2 but all those subsequently affected.
- 6.3.7 During this extension period, providers will use the Council's funding to continue to deliver services in line with contract requirements. Officers will continue to ensure that contracts deliver best value to the Council and continue to meet the needs of service users through extending choice, control, quality, community engagement and person centred approaches in line with people's needs, backgrounds and identity.
- 6.3.8 The contracts are subject to regular monitoring with oversight from commissioners. The Integrated Commissioning Quality Assurance Framework (QAF) requires the provider to evidence their practice against a range of key performance indicators. This is undertaken as a self-assessment and performance report submitted by the provider on a quarterly basis to evidence their service provision. Officers will continue to proactively monitor all service provision and address areas of non-compliance
- 6.3.9 A review of performance has also been undertaken of the contracts covered by this report; this has been done through evaluating data from key performance indicators and quality outcomes. There are no general concerns about the quality of provision within services nor that this cannot be maintained during the extension period. Where there are specific concerns these will be addressed on an individual service basis.
- 6.3.10 There has been no suspension of, or reduction in, service delivery of the supported living and residential care contracts covered by this report and providers have continued to be paid at agreed contractual levels.
- 6.3.11 The support provided continues to be person centred, focussing on the specific individual needs and outcome of people receiving care and support with the aim of delivering good quality support in the face of the Covid-19 crisis. The current performance of the learning disability framework is steady and satisfactory. Key performance indicators overall are currently at "Good" with a high proportion of targets being fully met.
- 6.3.12 Guidance has been given to providers by Commissioners to enable service continuity during the outbreak with additional operational support as necessary so that providers will be in a better position for recovery.
- 6.3.13 Family carers and people with learning disabilities have been kept informed about the proposed extension to the current arrangements.
- 6.3.14 In summary, extending the contracts for learning disabilities services will offer a period of continued stability to the social care market, will provide certainty to providers in maintaining service provision, including the ability to recruit staff to maintain safe staffing levels as necessary, and ensure people supported under these Framework contracts have stable and safe service provision.

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## 6.4 Community Equipment Services

- 6.4.1 Community Equipment is a statutory service that Local Authorities in England must provide to meet the assessed eligible needs of service users who are ordinarily resident in their area.
- 6.4.2 The London Borough of Lewisham have been members of the London Community Equipment Consortium since 2012 following Mayor and Cabinet's agreement to join at the February 2012 meeting. The Consortium consists of 21 London Boroughs with an annual average net expenditure of £32million per annum and is the largest Community Equipment Consortium in the UK and Europe.
- 6.4.3 The Royal Borough of Kensington and Chelsea have hosted the London Community Equipment Consortium since its inception in 2010. The Consortium operates under a framework agreement and the current contract was procured in 2016 through Hammersmith & Fulham as part of the Tri-Borough arrangements. The framework agreement was awarded to the incumbent provider Medequip, for a period of four years from April 2017 with an option to extend for up to 2 years (till 2023). Once Hammersmith and Fulham have completed their Governance process for the extension, the framework agreement will be novated over to the Royal Borough of Kensington and Chelsea as they are the lead authority. The Council will then be able to extend its call off contract with Medequip, subject to Mayor and Cabinet approval.
- 6.4.4 On 25<sup>th</sup> October 2018 the Adult Joint Strategic Commissioning Group agreed to remain in the London Community Equipment Consortium and abide by the Consortium Committee Decision regarding any further contract extension. The Consortium subsequently agreed to extend the framework agreement with Medequip until March 2022 and as a result the consortium members extended their call-off contracts with Medequip with procurement planned to commence in 2021.
- 6.4.5 However, due to the current pandemic which impacted on officer availability and the ability of the market to respond to any tender process, the London Consortium Board has advised that it does not feel it appropriate to proceed with procurement at this time. Under the Consortium constitution, a clear mandate from Consortium members is required to proceed with this decision with a simple majority vote. Procurement 'surgeries' with officers from member councils have signposted the probability that there will be majority agreement for the decision to extend the framework agreement with Medequip. This report is asking for agreement from members for officers to formally advise the Consortium that Lewisham (a) wish to remain members of the Consortium and (b) Lewisham Council agrees that the Consortium can extend the framework agreement if the majority quorum is reached and (c) as a result the Council will extend its call off contract with medequip.
- 6.4.6 The community equipment market is a complex and challenging environment nationally. An extension of up to two years, would allow the Consortium the time to maximise the opportunities available to it to carry out a comprehensive commissioning review, and to ensure that the future Community Equipment service meets the needs of the London Borough of Lewisham residents, for both children and adults and for both health and social care services.
- 6.4.7 The recommendation to approve a two-year extension, would enable the Consortium to maximise the opportunities available to it, by developing a forward-thinking approach to the specification and delivery of its outcomes, future proofing the service as much as it can for the next contract period, and realising the potential benefits of emerging technologies and digitalisation benefits.

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It would allow time for work to be completed on:

- service specification re-design,
- defining generic global equipment catalogue (approximately 900 items),
- shaping of the procurement process,
- ongoing market engagement,
- service user engagement to understand their needs and to design the service user evaluation questions and panel for the tender process
- sufficient time to complete procurement governance processes and mobilisation time, post contract award

6.4.8 The Consortium Team have developed their own Brexit risk log and are working with Medequip and have developed an Equipment Business Continuity Plan (BCP) that will sit alongside the operational BCP. The Equipment BCP includes a review of Medequip's supply chain resilience and its mitigations, which will then be overlaid with the clinical risk assessment of key items of equipment and close technical equivalents and the clinical mitigations that will be used.

6.4.9 Due to the size of the Consortium, it has been recognised that the mobilisation period required for a contract of this size will take approximately 9 months. This includes the logistics operation and transfer to a new IT ordering system and training of over 4,000 prescribers across the member borough's Health and Social Care Teams.

## **7 Financial implications**

### **7.1 Sexual and Reproductive Health Services**

7.1.1 This report recommends that Mayor and Cabinet agrees that LB Lewisham enters into a further Tripartite Agreement for sexual and reproductive health commissioning with Lambeth and Southwark from April 1st 2021 to 31st March 2023 at a total cost of £186,470.

7.1.2 This report also recommends that Mayor and Cabinet authorise officers to extend the contract for Integrated Sexual Health Services with LGT for a period of 12 months, commencing on 1<sup>st</sup> April 2022 at a cost of up to £2,644,903.

7.1.3 This report also recommends that Mayor and Cabinet authorise officers to extend access through the City of London to the E-Service contract with Sexual Health London for a period of 1 year from April 2022-March 2023. Payment is on activity and total costs of services accessed via the e-service are forecast to be £679,731 for 2021/22.

7.1.4 This report also recommends that Mayor and Cabinet agree that Lewisham continues to contribute £36,000 per annum towards the Brook C-Card Condom distribution scheme through a contract with Lambeth Council for an extension period of two years from 1 April 2021 to 31st March 2023 (24 months) at a total cost of £72,000.

7.1.5 These services are funded from the ringfenced Public Health grant, and proposed expenditure is within allocated budgets.

### **7.2 Homecare Services**

7.2.1. This report seeks approval to further extend the three lead provider framework contracts for 12 months from the currently agreed extension period of 1st April 2022

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until 31<sup>st</sup> March 2023.

- 7.2.2. The estimated cost of the extension based on current level of activity is £15,687,258 (£6,266,960.76 to Eleanor Care, £5,387,142.07 to Westminster Care, and £4,065,535.20 to Care Outlook) with current rates inflated to anticipated 22/23 rates. Rates will be increased annually in April 2021 and April 2022 to reflect the new rate of London Living Wage.
- 7.2.3 The contracts are funded from within the adult social care domiciliary care budget, supplemented by allocations from the Improved Better Care Fund to reflect faster discharges from hospital.
- 7.2.4 Appendix 2 sets out the yearly cost per agency.

### **7.3 Learning Disability Framework**

- 7.3.1 The total contract values for the learning disabilities contracts for financial year ending 2020/21 is circa £8,230,225.90 from the existing budget. The proposed contract extension will be under existing terms and conditions.
- 7.3.2 Under the terms of the Framework Agreement providers are required to remunerate their staff at rates equal to or above the London Living Wage as standard terms and conditions of employment. Framework terms & conditions require providers to maintain the London Living Wage for the lifetime of the Contract including any extension. The value of contract extension are therefore subject to adjustment if there are changes in the London Living Wage subject to the Council's decision on these matters.
- 7.3.3 The delay in the procurement programme will impact on the timeframe for the realisation of any anticipated savings through the programme (c £50K has been saved in the first phase of the programme – LDF1). However, the extension period does not prevent officers seeking negotiations on contract price where applicable during this period.
- 7.3.4 Appendix 1 sets out in detail the maximum cost of each extension by provider.

### **7.4 Community Equipment**

- 7.4.1 The indicative pan London total annual contract value (based on current service activity) is £32m.
- 7.4.2 The total gross projected spend in 20-21 for Lewisham is £1,856,573 for the year of which 25% is paid by the Council (£464,143) and the balance of 75% (£1,392,429) is paid by SEL CCG. Activity levels in one year are no guarantee of activity in another year as equipment is a demand led service, and the long term impact of Covid on people's health, and thus the demand for equipment, remains to be seen.
- 7.4.3 The Lewisham spend is inclusive of £10.5k for the annual licence fee (TCES ) and £9.5k for the Consortium membership fees which fund the Consortium Team costs. The children's spend is a combination of health and social care expenditure.
- 7.4.4 The extension proposal has been offered under the existing terms of the contract. These include a "gainshare" project for recycled equipment whereby each borough receives 90% of the equipment purchase cost back as a credit when the equipment is recycled. The KPI for this is currently at 70%: any increase in collections from current levels will contribute to the financial performance of the service and contribute to offsetting the inflationary increase and any other cost pressure. The RPI uplift for 21/22 is 1.7% calculated as the average RPI rate over the 12 months, between November 2019 and

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October 2020, based on published rates and Treasury forecasts published on 18<sup>th</sup> November 2020.

- 7.4.5 The Consortium Team are also developing a business case for the additional resource and legal costs required to support the procurement process and contract mobilisation. In line with the main contract, these will be split equally between the Consortium members and offsets the costs of boroughs resourcing these costs individually.
- 7.4.6 The activity fees have been fixed for the last four years and the approach of the Consortium recognises an increase in costs beyond the Council's control relating to shortages of goods and fuel, the potential impact of the Ultra Low Emission Zone (ULEZ), increases in the Congestion charges that have been set by the Mayor of London's office, and any increases in local parking charges.

## 8 Legal implications

- 8.1 The Council's Constitution contains requirements about how to procure and manage contracts. These are in the Contract Procedure Rules (Constitution Part IV), some of which are requirements based on the procurement Regulations (Public Contracts Regulations 2015 as amended by the Public Procurement (Amendment etc.) (EU Exit) Regulations 2020) with which the Council must comply.

### **Tripartite for LSL SRH commissioning**

- 8.2 The Council, Lambeth and Southwark entered into a tripartite agreement in 2016 for jointly commissioned services. Lambeth procure and hold the contracts for those services and the Council and Southwark make a financial contribution to the running of the joint commissioning team and for the costs in relation to contracts entered into by Lambeth for the provision of services to Lewisham. Under the Regulations the Contracting Authority may enter into a contract with another Contracting Authority without carrying out a competitive procurement process where the Contract establishes or implements co-operation between contracting authorities provided that the aim is to ensure that the public services they have to perform are provided with a view to achieving objectives they have in common; the implementation of that co-operation is governed solely by considerations relating to the public interest; and the participating contracting authorities perform on the open market less than 20% of the activities concerned by the co-operation. These criteria are met.

This is not a Key Decision.

### **Sexual and Reproductive Health Services at Lewisham and Greenwich Trust (LGT)**

- 8.3 The Council holds a contract for integrated sexual and reproductive health (SRH) services with Lewisham and Greenwich Trust. The contract was awarded for a period of 5 years from April 2017 until end of March 2022, which includes permitted extensions. The recommendation is to extend the contract by a further year for the reasons set in this report. Rule 17 of the Council's Contract Procedure Rules allows for extensions of contracts in certain circumstances. These include necessary changes to purchase new works, services or supplies from the contractor and not included in the original procurement, or for changes to deal with unforeseen circumstances. This can only be relied on where a change of contractor would cause significant inconvenience (or substantial duplication of cost) or, a change of contractor cannot be made for economic or technical reasons. In addition, the change must not result in an increase in price of more than 50% of the total value of the contracts across their term. This price limit applies to each separate change

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however, it must not be used as a means of circumventing the procurement rules. The extension requested meets the circumstances set out in Rule 17.

This is a Key Decision and therefore needs to be included in the Key Decision Plan.

**Continued access to SHL Online Sexual and Reproductive health services via access agreement with City of London**

- 8.4 The Council has entered into a pan-London Agreement in order to access services. The City of London hold the contract for the provision of services with SHL on behalf of all participating boroughs. Under the Regulations the Contracting Authority may enter into a contract with another Contracting Authority without carrying out a competitive procurement process where the Contract establishes or implements co-operation between contracting authorities provided that the aim is to ensure that the public services they have to perform are provided with a view to achieving objectives they have in common; the implementation of that co-operation is governed solely by considerations relating to the public interest; and the participating contracting authorities perform on the open market less than 20% of the activities concerned by the co-operation. These criteria are met.

This is a Key Decision and therefore needs to be included in the Key Decision Plan.

**Brook 'C-Card' condom distribution scheme**

- 8.5 Under an agreement between the Council and Lambeth, Lambeth have procured and hold a contract for this service on the Council's behalf and the Council make a financial contribution for the costs in relation to provision of services to Lewisham. Under the Regulations the Contracting Authority may enter into a contract with another Contracting Authority without carrying out a competitive procurement process where the Contract establishes or implements co-operation between contracting authorities provided that the aim is to ensure that the public services they have to perform are provided with a view to achieving objectives they have in common; the implementation of that co-operation is governed solely by considerations relating to the public interest; and the participating contracting authorities perform on the open market less than 20% of the activities concerned by the co-operation. These criteria are met.

This is not a Key Decision.

**Homecare**

- 8.6 The Council holds 3 contracts for the provision of Home Care services with 3 different providers. The report is requesting that these 3 contracts are extended by a further year. The Contract Procedure Rules anticipate that a competitive process will usually be carried out. Where such a process is not to be followed, an exemption from Contract Procedure Rules is to be sought. The Rules say that an exemption can only be given in exceptional or unforeseen circumstances (Rule 18). When consideration is to be given as to whether an exemption should be approved, the following matters should be considered:

- the nature of the market for the services to be provided has been investigated and is such that the proposed approach is justifiable; or the contract is for services that are required in circumstances of extreme urgency; or there are other circumstances which are genuinely exceptional;
- it is in the Council's overall interest; and
- there is no breach of legislation.

The reasons for not procuring the contracts are set out in this report and fit within the exemption.

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If approved, the contractual mechanism for changing the contract will be used in order to implement the extension.

This is a Key Decision and therefore needs to be included in the Key Decision Plan.

### **Learning Disability Framework Agreement – Numerous Call-Off Contracts set out in Appendix 1**

- 8.7 The Council has entered into numerous contracts with different providers under the Learning Disabilities Framework Agreement. These are all set out in appendix 1. The recommendation is to extend all of the contracts listed in appendix 1 for the reasons set in this report. Rule 17 of the Council's Contract Procedure Rules allows for extensions of contracts in certain circumstances. These include necessary changes to purchase new works, services or supplies from the contractor and not included in the original procurement, or for changes to deal with unforeseen circumstances. This can only be relied on where a change of contractor would cause significant inconvenience (or substantial duplication of cost) or, a change of contractor cannot be made for economic or technical reasons. In addition, the change must not result in an increase in price of more than 50% of the total value of the contracts across their term. This price limit applies to each separate change however, it must not be used as a means of circumventing the procurement rules. The extensions requested meet the circumstances set out in Rule 17.

Where Rule 17 does not apply to certain contracts listed in Appendix 1, Rule 18 applies which means an exemption from the Contract Procedure Rules is to be sought. The Rules say that an exemption can only be given in exceptional or unforeseen circumstances (Rule 18). When consideration is to be given as to whether an exemption should be approved, the following matters should be considered:

- the nature of the market for the services to be provided has been investigated and is such that the proposed approach is justifiable; or the contract is for services that are required in circumstances of extreme urgency; or there are other circumstances which are genuinely exceptional;
- it is in the Council's overall interest; and
- there is no breach of legislation.

The reasons for not procuring the contracts are set out in this report and fit within the exemption.

This is a Key Decisions and therefore needs to be included in the Key Decision Plan.

### **Community Equipment**

- 8.8 The Council has a call off contract with Mediquip Assistive Technology Limited. It was entered into for a period of four years from April 2017 with an option to extend for up to 2 years. The recommendation in the report is to extend the contract with the extension period. This is a 'Permitted Extension' under the Contract Procedure Rules, being one which was clearly provided for in the original procurement and contract documents (as set out in Rule 17 of the Contracts Procedure Rules, and Regulation 72 of the Procurement Regulations 2015). The report sets out the reasons why this extension is proposed. It notes that the future of the service will be considered during the extension period.

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The extension of this contract is not a Key Decision under the Constitution because the approval to award the contract on the basis of the extension was approved at the point the contract was awarded. However, where the value of an extension to a services contract is more than £500,000, the decision on the extension is reserved to Mayor and Cabinet.

### **General**

- 8.9 The Council has a public sector equality duty (the equality duty or the duty - The Equality Act 2010, or the Act). It covers the following protected characteristics: age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation. In summary, the Council must, in the exercise of its functions, have due regard to the need to:
- eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act.
  - advance equality of opportunity between people who share a protected characteristic and those who do not.
  - foster good relations between people who share a protected characteristic and those who do not.
- 8.10 It is not an absolute requirement to eliminate unlawful discrimination, harassment, victimisation or other prohibited conduct, or to promote equality of opportunity or foster good relations between persons who share a protected characteristic and those who do not. It is a duty to have due regard to the need to achieve the goals listed above. The weight to be attached to the duty will be dependent on the nature of the decision and the circumstances in which it is made. This is a matter for the decision maker, bearing in mind the issues of relevance and proportionality. The decision maker must understand the impact or likely impact of the decision on those with protected characteristics who are potentially affected by the decision. The extent of the duty will necessarily vary from case to case and due regard is such regard as is appropriate in all the circumstances.
- 8.11 The Equality and Human Rights Commission (EHRC) has issued Technical Guidance on the Public Sector Equality Duty and statutory guidance. The Council must have regard to the statutory code in so far as it relates to the duty. The Technical Guidance also covers what public authorities should do to meet the duty. This includes steps that are legally required, as well as recommended actions. The guidance does not have statutory force but nonetheless regard should be had to it, as failure to do so without compelling reason would be of evidential value. The statutory code and the technical guidance can be found on the EHRC website.
- 8.12 The EHRC has issued five guides for public authorities in England giving advice on the equality duty. The 'Essential' guide provides an overview of the equality duty requirements including the general equality duty, the specific duties and who they apply to. It covers what public authorities should do to meet the duty including steps that are legally required, as well as recommended actions. The other four documents provide more detailed guidance on key areas and advice on good practice.

## **9 Equalities implications**

- 9.1 As with many health outcomes, sexual health is patterned by socioeconomic inequalities, with those from deprived areas at greater risk of negative outcomes, such as sexually transmitted infections and unplanned pregnancy. HIV rates are much higher

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in men who have sex with men, and in Black African communities.

9.2 An Equalities Analysis Assessment (EAA) was undertaken for the LSL Sexual and Reproductive Health Strategy. The Strategy and Local Action Plan aim to reduce health inequalities and improve health outcomes. A Rapid Impact Assessment of Covid-19 is currently underway across the whole of the Sexual and Reproductive Health System across LSL.

9.3 Research shows that people with a learning disability are one of the most marginalised groups in society. In addition to being socially excluded with limited opportunities in employment, education and in using mainstream services, they also experience significant health inequalities due to limited access to health services and diagnostic overshadowing.

9.4 An EAA is not required as the decision will have no negative impact on the protected characteristics. This is an extension of already existing services and the proposed extensions will allow providers to continue to provide a consistent service. However, in extending contracts, the Council will require that contracts continue to be delivered in accordance with Equality Act 2010 and will not allow any unlawful discrimination.

9.5 In line with equalities legislation EAAs will be undertaken for future recommissioning of services.

9.6 Lewisham Council's equalities objectives are addressed in all contract documentation and form part of the criteria used in tender evaluations .

9.7 During the last Community Equipment tendering process Tenderers had to conform with equal opportunities legislation and policies as part of the tender process. The provision of community equipment supports equality and diversity by assisting people with disabilities and/or illnesses to remain independent and to make the most of life opportunities.

## **10 Climate change and environmental implications**

10.1 There are no specific environmental implications arising from this contract extension. However the Council's environmental objectives are addressed in contract documentation and form part of the criteria used in tender evaluation.

## **11 Crime and disorder implications**

11.1 There are no specific crime and disorder implications arising from the extensions in this report. However, contract compliance measures around safeguarding, assertiveness and anti-bullying initiatives are built into service specifications

## **12 Health and wellbeing implications**

12.1. This report recommends that a number of sexual health contract are extended. These services aim to improve sexual and reproductive health in Lewisham and to reduce health inequalities.

12.2 The contract extensions to the supported living services and registered residential care services will allow providers to focus on supporting the health and wellbeing of people in their services as well as that of their workforce. The impact of the pandemic has been significant for the learning disability population at both a local and national level.

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Once it is deemed safe to proceed with recommissioning services there should be no specific health and well-being implications through the process.

- 12.3 Local authorities in England have a statutory duty to plan for the Provision of certain home-based services, including the provision of disability aids and “community equipment”, to meet the assessed eligible needs of service users who are ordinarily resident in their area.
- 12.4 The provision of community equipment to eligible children and adults is vital in helping to achieve efficiency and cost-effectiveness across a range of other local authority and health authority services, and it is also important to help achieve local and health authority strategic objectives. For example, provision of the right community equipment can:
- Reduce unscheduled hospital admissions and Accident & Emergency attendance;
  - Reduce the length of hospital stay and reduce ‘bed blocking’ in hospitals, by facilitating earlier hospital discharges;
  - Reduce the costs of long-term care by avoiding the need for care home admissions;
  - Reduce the costs of long-term care by avoiding the need for paid carers, and/or by reducing the number of carers or frequency of care visits required;
  - Play a key role in the delivery of early intervention and prevention strategies, and in avoiding crisis admissions to high cost services;
  - Promote independence, safety, social inclusion, quality of life, improved end of life care;
  - Help to give elderly and disabled people control over their own lives;
  - Improve early year’s development;
  - Assist with the delivery of many quality outcomes for children and adults;
  - Support carers and parent carers

## 13 Social Value implications

- 13..1 The Public Services (Social Value) Act 2012 came into force on 31 January 2013. It is now a legal obligation in certain circumstances for local authorities and other public bodies to consider the social good that can come from the procurement of services before they embark upon it.
- 13..2 All Council tender processes require Providers to provide details of how they will deliver Social Value within contracts, and this is be scored as part of the tender process.
- 13..3 The Equipment supplier has committed to create 32 apprenticeship places during the term of the Contract, based upon at least 2 apprenticeships per depot, per year. In Lewisham, we will ensure engagement with our Economic Development Team. The supplier is an Age Positive employer and also considers apprenticeship/work experience positions for mature people who are long-term unemployed.
- 13..4 The supplier has undertaken to procure locally, wherever possible and always utilises local suppliers for: staff recruitment/training, vehicle maintenance and equipment, using 172 suppliers who are based in London

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## 14 Background papers

- **Sexual And Reproductive Health**

Title of Document	Date	File Location	Contact Officer
Sexual Health Transformation Programme	15.10.20	Governance Support	Kevin Flaherty
Award of Contract for Sexual Health Services (by single tender action)	09.02.17	Public Health	Iain McDiarmid
Mayor & Cabinet Report: Contract extensions due to Covid-19 related delays to commissioning timelines	9.7.20	Governance Support	Kevin Flaherty

- **Homecare**

Title of Document	Date	File Location	Contact Officer
Mayor & Cabinet Report: Home Care Contracts Extension	30.10.19	Governance Support	Kevin Flaherty
Mayor & Cabinet Report: Future Home Care Arrangements	11.3.20	Governance Support	Kevin Flaherty
Mayor & Cabinet Report: Contract extensions due to Covid-19 related delays to commissioning timelines	9.7.20	Governance Support	Kevin Flaherty

- **Learning Disability Framework**

Short Title of Document	Date	File Location	Contact Officer
Mayor & Cabinet Report: 'Framework Agreement for Provision of Services to Adults with Learning Disabilities	03/01/19	Joint Commissioning Team, 3 <sup>rd</sup> Floor, Laurence House	Tom Bird, Joint Commissioner
Mayor & Cabinet Report:	18/09/19	Joint Commissioning Team, 3 <sup>rd</sup> Floor,	Tom Bird, Joint Commissioner

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Learning Disabilities Services – Request for Specific Contract Extensions		Laurence House	
Mayor & Cabinet Report:  Framework Agreement for Services to Adults with Learning Disabilities – Call off supported living contracts	05/02/20	Joint Commissioning Team, 3rd Floor, Laurence House	Tom Bird, Joint Commissioner
Executive Director Decision  Learning Disability Services – Request for Specific Contract Extensions.	09/06/20	Joint Commissioning Team, 3rd Floor, Laurence House	Tom Bird, Joint Commissioner

## 15 Glossary

Term	Definition
COVID-19	‘Coronavirus disease (COVID-19) is an infectious disease caused by a newly discovered coronavirus’ (World Health Organisation).
Framework Agreement	A Framework Agreement provides an overarching agreement with potential suppliers to establish general terms and conditions governing contracts that may be awarded during the life of the Framework. It operates essentially as a list of preferred providers, who have evidenced competence and financial sustainability against a generic service specification at a competitive price.
London Living wage	means the hourly rate of pay as calculated and published annually by the Greater London Authority taking into account the higher cost of living in London and the rate of inflation

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Term	Definition
Social Value	is defined as the additional economic, social and environmental benefits that can be created when Lewisham Council purchases services outside of the organisation.
Commissioner/Commissioning	<p>A person or organisation that plans, buys and monitors the services that are needed by the people who live in the local area.</p> <p>The local council is the commissioner for Adult Social Care. NHS care is commissioned separately by local clinical commissioning groups (CCG). In many areas health and social care Commissioners work together to make sure that the right services are in place for the local population.</p>

## 16 Report author and contact

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## 17 Comments for and on behalf of the Executive Director for Corporate Resources

*Yusuf Shaibu, Group Finance Manager, Community Services Directorate*  
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## 18 Comments for and on behalf of the Director of Law, Governance and HR

*Mia Agnew, Principal Lawyer, Legal Services*  
[Mia.Agnew@lewisham.gov.uk](mailto:Mia.Agnew@lewisham.gov.uk)

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**KEY DECISION**

*Double click here and delete this rectangle if the report is not a key decision.*

**APPENDIX 1: RECOMMISSIONING PLAN FOR PHASE TWO TO PHASE FIVE OF THE LEARNING DISABILITY FRAMEWORK**

<b>Provider</b>	<b>Name of Service</b>	<b>Category of Service</b>	<b>Current Annual Contract Value (20/21)</b>	<b>New Extension Period Required</b>	<b>Value of Extension Period</b>
<b>LDF2 (Phase 2)</b>					
Aurora Options	94 Burnt Ash Hill	Residential Care	£339,573	9 months	£254,680
Aurora Options	George Lane	Residential Care	£256,195	9 months	£192,146
Lewisham Nexus Service	191c Burnt Ash Hill	Supported Living	£111,790	9 months	£83,843
Lewisham Nexus Service	Kingfisher Mews	Supported Living	£280,592	5 months	£116,914
Lewisham Nexus Service	Ratcliffe Close	Supported Living	£284,440	5 months	£118,517
PLUS	Elwis House	Residential Care	£304,647	9 months	£228,485
PLUS	Haddington Road	Supported Living	£101,878	9 months	£76,409
Three C's	25 Canadian	Supported	£232,343	9 months	£174,257

Support	Avenue	Living			
Three C's Support	53 Bargery Road	Supported Living	£185,648	9 months	£139,237
Three C's Support	59 Culverley Road	Supported Living	£227,753	9 months	£170,815
			<b>£2,324,860</b>		<b>£1,555,300</b>
<b>LDF3 (Phase 3)</b>					
Access for Living	Bellingham Road	Supported Living	£239,746	11 months	£219,767
Access for Living	Brookbank Road	Supported Living	£228,257	11 months	£209,235
Aurora Options	Jutland Road	Supported Living	£327,330	11 months	£300,052
Aurora Options	Kitto Road	Supported Living	£182,9059	11 months	£167,663
Lewisham Nexus Service	Thomas Dinwiddy Road	Supported Living	£183,878	11 months	£168,555
Three C's Support	1 & 10 Friendly Street	Supported Living	£176,042	15 months	£220,052
Three C's Support	112 Breakspears Road	Supported Living	£192,681	15 months	£240,851

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Three C's Support	133 Mayow Road	Supported Living	£238,030	15 months	£297,537
			<b>£1,768,867</b>		<b>£1,823,713</b>
<b>LDF4 (Phase 4)</b>					
Access for Living	Rosenthal Road	Supported Living	£231,636	17 months	£328,151
Access for Living	Undercliff Road	Supported Living	£235,240	17 months	£333,257
Aurora Options	Jerningham Road	Supported Living	£233,663	12 months	£233,663
Choice Support	Carholme Road	Supported Living	£201,900	12 months	£201,900
Lewisham Nexus Service	Wellmeadow Road	Supported Living	£321,745	17 months	£455,806
Lewisham Nexus Service	Westdown Road	Supported Living	£310,482	17 months	£439,849
PLUS	Baring Road	Supported Living	£176,669	12 months	£176,669
Three C's Support	Evelyn Street	Supported Living	£231,636	12 months	£231,636
Three C's	St Germans	Supported	£216,317	12 months	£216,317

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Support	Road	Living			
			<b>£2,159,288</b>		<b>£2,617,248</b>
<b>LDF5 (Phase 5)</b>					
Outlook Care	Montem Road	Supported Living	£275,913	18 months	£413,869
PLUS	Beecroft Road	Supported Living	£216,768	18 months	£325,152
PLUS	Holmbury Dene	Residential Care	£600,879	15 months	£751,098
Three C's Support	Churchley Villas	Supported Living	£327,206	12 months	£327,206
Three C's Support	St Asaphs Road	Supported Living	£350,941	18 months	£497,166
Three C's Support	122 Amblecote Road	Supported Living	£205,504	16 months	£274,005
			<b>£1,977,211</b>		<b>£2,588,497</b>
Total			<b>£8,230,226</b>		<b>£8,584,759</b>

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