

MUNICIPAL YEAR 2016/2017 REPORT NO. 110**MEETING TITLE AND DATE:**

Cabinet
19th October 2016

REPORT OF:

Director of Housing,
Health & Adult Social
Services

Director of Finance,
Resources & Customer
Services

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| Agenda – Part: 1 | Item: 17 |
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| <p>Subject: Refurbishment and Reprovision work of Enfield Highway Library building Wards: All Key Decision No: KD 4335</p> |
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Cabinet Members consulted:

Cllr Ayfer Orhan
Education, Children's Services & Protection

Cllr Krystle Fonyonga
Community Safety & Public Health

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1. EXECUTIVE SUMMARY

- 1.1 In accord with the Councils Library Strategy 2015-18, a procurement process has been completed for the renovation of the Enfield Highway Community Library building to create (i) a modified library service consistent with the Library Strategy, (ii) the Hub clinic for Enfield Integrated Sexual Health Community Services [Cabinet Report No. 30] for which previous Cabinet decisions have been made and (iii) the Young Person's Drug & Alcohol Treatment Service, which is currently being delivered from Folkestone Road.
- 1.2 This innovative project will bring these community based services into a community hub, operating from a refurbished landmark site.
- 1.3 The Tendering Procedure was undertaken in accordance with the principles of: 'JCT Practice Note 6 (Series 2) Main Contract Tendering Arithmetical errors; Alternative 1 is to apply' and was managed by the Council's Procurement and Commissioning Hub.
- 1.4 The financial envelope for this programme is fixed and will be covered by Capital allocations supported by revenue from the Public Health Grant.
- 1.5 The contract is for approximately eight (8) weeks with the handover to service providers over an agreed phased timeline:
 - Phase 1: Library Service (ground floor)
 - Phase 2: Integrated Sexual Health Hub Clinic (ground floor)
 - Phase 3: Young Person's Drug & Alcohol Treatment Service (first floor)

2. RECOMMENDATIONS

That Cabinet:

- 2.1 note the tender process has adhered to Corporate Procurement Procedures, EU Procurement Regulations; and
- 2.2 approve the award of the contract to the preferred Bidder as detailed in Part 2 of this Report.
- 2.3 approve the re-directing of resources and addition to the existing capital programme to be met from new borrowing noting the repayments of principle and interest will be met from the existing Public Health budgets over 7 years (as detailed in the Part 2 report).

3. BACKGROUND

3.1 Library Services:

3.1.1 The Library Development Strategy (2015 – 2018) reflects the Council's vision for libraries and places them at the heart of local communities offering in particular:

- A digital network offering Wi-Fi and improved computer facilities along with a range of digital inclusion activities
- Greater involvement by local communities in the management of library services through a variety of different and innovative models and partnerships
- Facilitated access to government services such as education, welfare reform, economic growth and well being

3.1.2 Enfield Council has considered the Department for Culture, Media and Sport (DCMS) Independent Library Report for England (2014), which states that 'local authorities should continue to have the statutory duty to provide a comprehensive and efficient service for all persons desiring to make use thereof taking into account local needs and within available resources.

3.1.3 Enfield is one of the few London councils to have made the commitment to maintain a full library service in these tough economic times and designed a strategy that will continue to deliver this service while addressing financial constraints through innovation and partnership working.

3.1.4 With its community library status, Enfield Highway Library will continue on, sharing the facility with other services to meet the needs of the community.

This report sets out the plan to remodel the building to become a multi-service site, working with other Council and partner services to provide a cluster of services aimed at the youth and young adult communities.

3.2 **Integrated Sexual Health Services:**

3.2.1 Cabinet Report No. 30 – Award of Contract for Enfield Integrated Sexual Health Community Services – presented a multi-site service provision to:

- address the demands of the population
- ensure access across the Borough
- reduce the out-of-borough spend on GUM

3.2.2 The Cabinet Report outlined the multi-site service design offering a Hub and Spoke framework which included the following identified sites and locations for sexual health services:

- Enfield Highway (Hub clinic)
- Enfield Town (Spoke clinic)
- North Middlesex University Hospital Trust site (part-time Spoke clinic)
- Bowes/Palmers Green/Arnos Grove area (part-time Spoke clinic)
- Outreach mobile clinic

3.2.3 The Hub clinic had been temporarily based at Evergreen Surgery in Edmonton from the commencement of the new contract (November 2015) to July 2016 to address service continuity and contain the out-of-borough activity for GUM. The licence agreement to occupy the Evergreen Surgery building expired 31 July 2016 with no possibility of extension. The cost of renting this facility was financially prohibitive, as detailed in Part 2 of this report.

3.2.4 The temporary service delivery programme is to redirect service users to the Town Clinic (Burleigh Way) with some appointments being redirected to the Alexander Pringle HIV Clinic on the North Middlesex University Hospital site.

This is an unsustainable solution as access to the service has been reduced by 35% with appointment only service available one day per week in the eastern part of the Borough

Integrated Sexual Health Services is a mandated service.

3.3 **Young Person's Drug & Alcohol Treatment Service:**

3.3.1 This is a service for young people identified as misusing drugs or alcohol. The target group is Enfield's young people at risk (i.e. not in

education, employment or training - NEET) and other community members.

This service also delivers psychosocial support and other health improvement services for young people affected by parental and/or other family members' substance misuse.

3.3.2 It is currently delivered from 29 Folkestone Road, London N18 2ER, which is a Council property included on the 2016/17 Capital Disposal Programme to support Enfield's 2017 efficiency targets.

The property is not fit for purpose for seeing young people due to the limitations of its size and poor location. It was therefore primarily utilised for office purposes and offered a limited site to deliver a young people's substance misuse service.

3.3.3 The inclusion of the young people's substance misuse service at Enfield Highway Library affords excellent access to young people due to its anonymity and proximity to the largest college, whom remain the second largest young people's substance misuse referral services, and other educational establishments in the Borough as well as being co-located with a library and sexual health service.

The delivery of Drug and Alcohol Services has strategic relevance as part of the Government's National Drug and Alcohol strategies¹.

- 3.4 Enfield Highway Library was identified as the site for the Integrated Sexual Health Hub Clinic and Young Person's Drug & Alcohol Treatment Service as it is located in the middle of the highly populated eastern part of the Borough, close to a large education college that serves Enfield students and easily accessible via public transport and being a stand-alone building, the opening hours will not affect residents. It is also recognised as neutral territory with regards to gang culture in Enfield.
- 3.5 The initial plan, in December 2015, to commence the tender programme for the renovation works to be carried out at the site in time for an April 2016 completion was not possible due to a number of accommodation moves which needed to be resolved by the Council and the need to establish that the building could be converted to clinical use which included undertaking detailed asbestos and electrical surveys.
- 3.6 The renovation work must now move to a swift completion to enable effective service delivery to Enfield's residents.
- 3.7 **The Tender Process**
 - 3.7.1 The priorities for this tender are :

(i) Effective time management – with the re-opening of the Library service and Integrated Sexual Health clinic to take place as close to late summer 2016 as possible.

(ii) Ensuring that the strict NHS governance for clinical and infection control for the clinic was adhered to as the clinic would not open without passing inspection from Clinical Quality Commission (CQC).

3.7.2 Procurement timeline:

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| November 2015 | Approval received from the Strategic Procurement Board |
| Dec 2015 – Jan 2016 | Full asbestos and electrical surveys carried out on the building by CMCT to ensure that it was fit for purpose. |
| Feb – April 2016 | CMCT drafts: Floor plans Preliminaries Service specification Schedule of Works Pricing document Occupation of building reviewed <i>1st floor renovations (DAAT service) removed from tender</i> CMCT amend documents to accommodate the ground floor refurbishment only, due to the urgency of required location for the Library and Integrated Sexual Health Clinical Hub services |
| Published: 22 nd April 2016 | Corporate Maintenance & Construction Team (CMCT) leading on tender process: Tender goes live on a fixed price basis Five (5) Tenderers were selected from Constructionline as per PCR Rules and procedures |
| Submission Return: 6 th May 2016 @ 12pm noon | Three (3) completed submissions received One (1) Incomplete submission, therefore declined One (1) submission not received |
| | Stakeholders meeting to discuss Report |
| | Procurement process reviewed by Corporate Procurement Hub who highlighted potential anomalies with regards to conversations that took place on LTP between CMCT and one of the Bidders |

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| <p>6th - 13th June 2016</p> | <p>CPR and EU procurement rules state that all communications should be sent publicly on LTP ensuring that all Bidders are aware and none are given any advantage.</p> <p>The review also highlighted that the criteria did not include Quality, which was a requirement due to the clinic being subject to Care Quality Commission (CQC) inspection.</p> |
| <p>20th - 27th June 2016</p> | <p>Subject to the review carried out, it was agreed that the clarification questions needed to be circulated to all Bidders publicly and a Quality criteria was to be added.</p> <p>As there would be a delay in the process, it was agreed to include the 1st floor renovations for the Young Person's DAAT service in the process</p> <p>In line with the Council's new way of working, Corporate Procurement Hub was given the lead on completing the process and CMCT would provide the expertise.</p> <p>CMCT amended all documents to include the renovations to the 1st floor, which included the installation of a lift to ensure the building is DDA compliant.</p> <p>Bidders informed that an Addendum will be going live on London Tenders Portal (LTP) on the 3rd July</p> |
| <p>Note: Option to choose Addendum to Invitation To Quote (ITQ) option based on:</p> <ul style="list-style-type: none"> ▪ There were no changes to the Terms & Conditions ▪ There was no change to the procedure ▪ There was no change to the pricing structure ▪ Adding the Quality criteria for evaluation previously omitted was not changing the process or T&Cs: <ul style="list-style-type: none"> • Price 60% • Quality 40% ▪ Minor changes to the Specification was not changing the process or T&Cs ▪ It was concluded that this was not a re- tender ▪ This option was discussed with and agreed by all the bidders. | |
| <p>Published</p> | <p>Corporate Procurement Hub leading on tender process:</p> |

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| 3 rd July 2016 | Addendum to ITQ with Quality criteria + clarification questions + changes to specification and additional works on LTP sent to the four (4) Bidders that had submitted and returned their tenders. |
| Submission Return: 11 th July 2016 @ 12am midnight | Two Submissions received Two Submission not received both companies sighting work commitments as the explanation |
| 13 th July 2016 | Evaluation panel meet to discuss individual scoring Panel agree that further clarifications are required in regard to specific clinical and mechanical items |
| Published 22 nd July 2016 | Clinical clarifications published and confirmation of fixed price requested |
| 29 th July 2016 | Clinical submissions scored |
| 3 rd August 2016 | Submissions reviewed with CMCT, who will be project managing the work. Agreed to contact Bidders requesting them to submit documentation to evidence some quotes for final clarification plus One (1) Bidder needed to confirm fixed price |
| Published: 12 th August 2016 | Evidence of prices quoted in submission and confirmation of Fixed price requested |
| Submission Return: 18 th August 2016 @ 4pm | Both companies submitted a response <ul style="list-style-type: none"> • Both reported issue with LTP, which resulted in one (1) Submission not received until 4.48pm • Advised by Corporate Procurement Hub to accept late submission due to issue with LTP experienced by both Bidders |
| Note: The Tender was based on JCT Minor Works Building Contract with Contractor's Design (MWD) 2001 Edition | |

3.7.3 Further details in Part 2

4. ALTERNATIVE OPTIONS CONSIDERED

4.1 There was no alternative to tendering externally as Enfield Council was unable to directly provide a building renovation service that is NHS compliant in-house

4.2 Services:

4.2.1 The Council is committed to providing a first rate Library Service and has designed an innovative and effective way to

retain more libraries than any other London borough by working in partnership with reputable and credible partners to bring vital community services that people rely on into library buildings while retaining libraries in all of our neighbourhoods.

Following the restructure of the Borough's library service Enfield Council designed a Flagship and Community infrastructure.

Enfield Highway Library will reopen as a community library aimed at the youth and young adult community.

The Council will continue to run these community libraries and library card holders will be able to use their account to access a wide range of library services. However the community library structure requires the sharing of the premises with other services and organisations to bring in income, share costs and provide added benefits to the local community.

4.2.2 It was not possible for the Sexual Health Clinic to remain at the Evergreen site (Edmonton) without the Council facing significant cost pressures (see Part 2 report).

The Evergreen clinic was open 25 hours per week, attending to circa 210 patients per week, which included a clinic for under 19s, with limited accommodation and poor IT support. This includes patients who required clinical interventions to avoid long term medical and psychological consequents from sexually transmitted disease and pregnancies.

The Enfield Highway Library site offers 60% more treatment rooms and is also consistent with the strategy previously agreed at Cabinet for delivering improved and effective Sexual Health Services to local residents.

4.2.3 The Young Person's Drug and Alcohol Treatment service is currently delivered from 29 Folkestone Road, London N18 2ER, which is a Council property included on the 2016/17 Capital Disposal Programme to support Enfield's 2017 efficiency targets.

Folkestone Road does not offer an environment to encourage young people to attend the service, which is currently being offered on a peripatetic basis. There are minimal suitable buildings in the Borough that allows for a D1 service to operate from and this new location will afford excellent access to young people due to its anonymity and proximity to the largest college and other educational establishments in the Borough.

5. REASONS FOR RECOMMENDATIONS

5.1 Tenderers have submitted responses as part of a thorough, transparent and fair procurement process.

- All responses have been evaluated against a specification, written by the Council's Corporate Maintenance & Construction Team (CMCT), detailing quality requirements (40%) and price (60%).
- The procurement process was managed by the Corporate Procurement Hub.
- The Evaluation Panel consisted of representation from:
 - Corporate Maintenance & Construction Team (CMCT)
Planning, Highways & Transportation
Regeneration and Environment Department
 - North Middlesex University Hospitals NHS Trust
(Contracted Sexual Health Provider)
Design and Commissioning
BEH Clinical Strategy
Estates and Facilities Department
 - Drug & Alcohol Services
Health, Housing & Adult Social Care
 - Public Health (Sexual Health)
Health, Housing & Adult Social Care

Note: representation for Assisted Services Delivery – Customer Gateway (Finance, Resources and Customer Services, being the Library Service) was not available due to annual leave and capacity.

5.2 The Bidders were asked to evidence delivering a comparable clinical environment to ensure that the premises would pass CQC inspection.

5.3 The timeline for delivery of the building works is eight (8) weeks for the library and clinic in order to reduce the gap re the continuation of the library and clinical services in the Eastern part of the Borough. In particular it is essential that any break in provision of clinical sexual health services to patients is minimised.

The timeline for the Young Person's Drug and Alcohol Treatment service will be longer than eight weeks, as the delivery for the lift is dependent on the stockist.

- 5.4 Bidders have submitted applications, provided evidence to confirm their experience in delivering the renovation works as per specification and clarification on the fixed price criteria.

6. COMMENTS OF THE DIRECTOR OF FINANCE, RESOURCES AND CUSTOMER SERVICES AND OTHER DEPARTMENTS

6.1 Financial Implications

6.1.1 Please refer to the accompanying Part 2 Report

6.2 Legal Implications

6.2.1 Section 1 of the Localism Act 2011 permits the Council to do anything that individuals generally may do provided it is not prohibited by legislation and subject to Public Law principles.

6.2.2 Furthermore, section 111 of the Local Government Act 1972 gives a local authority power to do anything (whether or not involving the expenditure, borrowing or lending of money or the acquisition or disposal of any property or rights) which is calculated to facilitate, or is conducive or incidental to, the discharge of any of its functions. The works/services proposed within this Report are incidental to the functions of the Council's departments and will ensure effective support to the Council.

6.2.3 The Council must comply with its Constitution, Contract Procedure Rules ("CPRs") and (where contract values exceed the OJEU Threshold) the Public Contracts Regulations 2015. The Council must also be mindful and adhere to the EU Treaty Principles regarding equality, fairness and transparency during procurement processes. The Council has conducted a restricted procedure and invited 5 bidders to partake in the procurement process.

6.2.4 As the contract value exceeds £250,000 this is a Key Decision and the Council must comply with its Key Decision Procedure.

6.2.5 The Council must comply with its obligations with regards to obtaining best value under the Local Government (Best Value Principles) Act 1999.

6.2.6 All legal agreements arising from the matters described in this Report must be approved in advance of contract

commencement by the Assistant Director of Legal and Governance Services. Contracts whose value exceeds £250,000 are required to be executed under seal and performance security should be obtained unless the Relevant Service Director and the Director of Finance Resources and Customer Services considers this to be unnecessary (in accordance with CPR 21).

6.3 Property Implications

6.3.1 Pursuant to Cabinet Report KD4160, which authorised the lease arrangements and properties for consideration for the Reproductive and Sexual Health (RaSH) integrated sexual health contract, this report sets out the fit out and procurement / award of contract for the refurbishment of the EHL building.

6.3.2 The lease agreement for the Enfield Highway Building will be granted for a minimum term of 7 (seven) years.

6.3.3 Property Services are to be sent the floor plans with room data for the purposes of the Asset Management System, Atrium.

6.3.4 Planning permission has been gained for the new build, Building Regulations will be adhered to as part of the infrastructure enabling and construction works. The oversight of this will fall under the Council's Contract Administrators (CA's).

6.3.5 Once the development is completed, Building Control will need to sign off on the completed development. All warranties and guarantees will be available in the event that building failure occurs. These guarantees will be assigned after practical completion occurs and held on behalf of the Council by Legal Services.

6.3.6 There should be a requirement upon the contractor at certain set dates for snagging inspections. These inspections will be organised by the Council's CA's.

7. KEY RISKS

7.1 The management of quality and performance during the renovation works process, ensuring that the clinic is CQC compliant.

- This has been managed by requesting evidence of the Bidders' portfolio to ensure that the work will be to NHS standards

7.2 The work needs to be carried out within a tight timeframe

- This has been managed by asking the Bidders for Work Plans

8. IMPACT ON COUNCIL PRIORITIES

8.1 Fairness for All

The tender process has been conducted in accordance with both the Council's Contract Procedure Rules and EU Procurement Regulations. Therefore the tender process has adhered to the principles of transparency and fairness to encourage healthy competition within this specialist sector and bidders have accordingly been appropriately supported throughout the process.

8.2 Growth and Sustainability

The redesign of the library will open the service to more users whilst improving health opportunities in more appropriate and cost effective community settings.

As a result of the refurbishment, the service provider for Integrated Sexual Health services – North Middlesex University Hospital Trust – will carry out a big advertising campaign for the service announcing both Enfield Highway Library and the Town Clinic in Burleigh Way and the extended hours. This campaign will inform the residents and encourage usage, thereby reducing activity and the high costs we are currently paying to out-of-borough providers.

8.3 Strong Communities

Both the library service and Enfield's Integrated Sexual Health Community service will be community services working with the voluntary sector and other community services.

The Young Person's Drug and Alcohol Treatment service sharing location with the library and sexual health services will address one of the Borough's identified hard to reach population for testing for STIs. Substance misusers are recognised to carry out risky behaviours one of which is unprotected sexual practices. This location will provide a safe, confidential and convenient environment for young people to receive a holistic service addressing their emotional and physical needs.

The clinic sharing location with the library service will assist in removing the stigma of attending a sexual health clinic but will also enable the Library Services to continue to be provided as the Sexual Health Services provider will be responsible for opening and closing the building etc.

9. EQUALITIES IMPACT IMPLICATIONS

Equalities Impact Assessment has undertaken by both services
The findings and recommendations are still current to this process.
The renovations work will improve the equality of access to services in
the local area for all Enfield Residents.

10. PERFORMANCE MANAGEMENT IMPLICATIONS

10.1 Project and contract monitoring will be carried out by the Principal
Building Surveyor/Project Manager from CMCT.

10.2 Weekly updates will be reported to the stakeholders

11. HEALTH AND SAFETY IMPLICATIONS

The Contractor is responsible for executing H&S guidelines

12. HR IMPLICATIONS

The Contractor is responsible for executing HR guidelines

13. PUBLIC HEALTH IMPLICATIONS

The **Library** will provide a co-ordinating centre for accessing
information, advice and services. It will be better used within the
community and meet the demands of a new generation of library users
in the right location in a fit for purpose building

The **Sexual Health** Strategy addresses the need to reduce teenage
pregnancy and late detection of STIs and HIV in Enfield.

Since the transfer from NHS to LAs, the activity for GUM in Enfield has
been growing year on year, mainly through patients attending
expensive out-of-borough providers which have seen activity
increasing by up to 18% year on year.

The new model, which commenced 01 November 2015, extends hours
and increases locations, thereby increasing access to address the
needs of the residents with the expected outcome of increasing in-
borough and reducing out-of-borough activity.

The **Drug and Alcohol** Strategy (HM Government 2010) focusses on
reducing demand, restricting supply and building recovery to support
people in living drug free lives. There is a strong steer towards
increasing support for young people, especially those that are
vulnerable through early interventions, education, treatment and family
focussed support packages.

The National Alcohol Strategy (HM Government 2012) sets out one of its key aims as 'A sustained reduction in both the numbers of 11-15 year olds drinking alcohol and the amounts consumed.'

Working Together to Safeguard Children (HM Government 2015) emphasises the impact parental substance misuse and young people's substance misuse has on the outcomes experienced by families. This is also reflected in Every Child Matters where the Government made a clear commitment to 'reduce frequent use of any illicit drug amongst all young people under the age of 25'.

The delivery of drug and alcohol services supports Enfield Council in achieving the above. It contributes to the Council's Business Plan (2016/14) across all three priorities, in particular thorough early, targeted support for children, adults and families who need it and helping residents make healthier choices and having access to quality local healthcare. This is also reflected in Enfield's Children's Plan (2016 -2019) with regards to helping families to deal with challenges, embrace opportunities and stay together whenever possible and Enfield's Health and Well-Being Strategy (2014-19) through prevention and early intervention, addressing health inequalities and ensuring good quality services.

14. Background Papers

None.