

**MUNICIPAL YEAR 2019/2020 REPORT NO.**

**MEETING TITLE AND DATE:**

**REPORT OF:**  
Director of Health & Adult  
Social Care

**Agenda – Part: 1**

**Item:**

**Subject: Agreement to award contract for  
an Adult Carers Assessment & Core  
Service**

**Wards: All wards  
Key Decision No: KD4831**

**Cabinet Member consulted: Cllr Alev  
Cazimoglu**

Contact officer and telephone number: Barbara Atkinson  
E mail: Barbara.atkinson@enfield.gov.uk

**1. EXECUTIVE SUMMARY**

1.1 Following the decision to tender the Adult Carers Assessment & Core Service, approval is sought to award the contract to Enfield Carers Centre.

**2. RECOMMENDATIONS**

2.1 That the Director of Health & Adult Social Care approves the appointment of Enfield Carers Centre to provide this service.

**3. BACKGROUND**

3.1 27,624 people identified themselves as carers in the 2011 Census. With lack of self-identification it is estimated by carers UK that this figure totals 29,919 (Valuing Carers 2015). The number of carers has risen by 13% in Enfield since 2001

6,194 carers provide more than 50 hours care a week, an increase of 1,235 since the 2001 Census. 4,131 carers provide care for 20-49 hours per week, an increase of 1,178 since 2001. The remaining 17,299 carers care for under 20 hours per week, an increase of 603 since 2001.

5,635 carers in Enfield are aged 65 years or older, which is expected to rise to 6123 carers by 2020

- 3.2 The development and value of this contract recognises that carers play a very significant role in our community. Supporting carers prevents admission to and delayed discharge from hospital, admission to care homes and reduces the demand for home care support. In light of future constraints on resources available to the health and social care sector, support to carers, in their preventative role, has become ever more important.

Maintaining and supporting a carer's health and wellbeing can be one of the most significant ways of managing demand for health and social care provision. Supporting them to continue to care must be a priority in terms of cost efficiency and ensuring that carers maintain their own quality of life.

The NHS Long Term Plan 2019 recognises the critical role carers play, pledging more support for carers as well as highlighting their huge contribution to the NHS, stating: '**Carers will benefit from greater recognition and support.**'

- 3.3 It is acknowledged that caring can have a detrimental effect on carers' physical and mental health. Failure to look after the health and wellbeing of carers risks, not only the ability to continue to provide care, but also their becoming a service user themselves. **Carers UK 2018 Survey demonstrated that** carers need more support with their own health: 72% of carers responding said they had suffered mental ill health as a result of caring and 61% reported physical ill health as a result of caring.

By providing carers with advice, information, support and services the Council highlights its commitment to ensure that those who care for others are protected from inequalities and detrimental effects from their caring role. National research from Carers UK shows that carers are:

- Significantly worse off financially due to their caring role
- Almost half of all carers cut back on essentials such as food and heating to cope financially
- 2 in 5 carers have put off their own medical treatment or appointments due to their caring role
- 66% of carers state caring has negatively affected their friendships and 58% said caring negatively affected their relationships with family members
- 1 in 6 carers have given up work, or reduced their hours, in order to meet their caring responsibilities

By successfully carrying out the functions of this contract, the provider will be an inspiring and vital contributor to supporting the carer community and reducing the inequalities listed above.

- 3.4 Carers UK undertook research into emergency admissions and care and how supporting carers can reduce use of emergency treatment services. Key findings from the 'Pressure Points: carers and the NHS' report (2016) included:
- 19% of carers felt that the admission into hospital might have been prevented with better adaptations made to the home or the use of telecare and telehealth services (14%).
  - 32% of the carers surveyed cited more support for themselves in their caring role as a factor in preventing hospital admission.
- 3.5 The Care Act 2014 came into force in April 2014, it put in place significant new rights for carers in England including:
- A focus on promoting wellbeing.
  - A duty on local councils to prevent, reduce and delay need for support, including the needs of carers.
  - A right to a carer's assessment based on the appearance of need.
  - A right for carers' eligible needs to be met.
  - A duty on local councils to provide information and advice to carers in relation to their caring role and their own needs.
  - A duty on NHS bodies (NHS England, clinical commissioning groups, NHS trusts and NHS foundation trusts) to co-operate with local authorities in delivering the Care Act functions.
- 3.6 The Service will complement the new strategic commissioning for the carer community e.g. Outcome 1 "Helping People Continue Caring" of the VCS Prevention and Early Intervention suite of contracts and will deliver on the following key areas:
- Strategic Lead on development of Carer Priorities
  - Carer Assessments
  - Direct Payments
  - An early intervention service enabling more carers to avoid appropriately the need for Council or NHS services.
  - Biennial Carer Surveys
  - Improvement of carers' mental health through development of an Improving Access to Psychological Services (IAPT) accredited provision to deliver psychological support to people with low to moderate mental health issues
- 3.7 Funding for this service is provided via the Adult Social Care Budget (Better Care Fund).

- 3.8 The Procurement and Commissioning Hub advised on the processes for tender advertisements, service documentation, evaluation and final report.
- 3.9 The start date for the contract will be 1<sup>st</sup> April 2020. The contract will run for 3+2+1 years.

#### **4. ALTERNATIVE OPTIONS CONSIDERED**

- 4.1 There were no alternative options to tendering externally, as the Council is currently unable to provide such an extensive specialist service.

#### **5. REASONS FOR RECOMMENDATIONS**

- 5.1 This Service will ensure that the Council meets its statutory requirements for Carers within Enfield.

#### **6. COMMENTS FROM OTHER DEPARTMENTS**

##### **6.1 Financial Implications**

Financial Implications are shown within Part 2 of this report.

##### **6.2 Legal Implications**

6.2.1. The content of this report constitutes a Key Decision and this item has been included in the Key Decision List reference: KD4831. Once approved the decision to proceed will be subject to the usual five-day call-in period.

6.2.2. The Council, under s.111 Local Government Act 1972 has power to do anything which is calculated to facilitate, or is conducive or incidental to, the discharge of any of its functions. The Council also has a general power of competence under s.1(1) Localism Act 2011 to do anything that individuals generally may do, provided it is not prohibited by legislation and subject to Public Law principles.

6.2.3. The Council must comply with all requirements of its Constitution and Contract Procedure Rules (CPRs). This contract is subject to Public Contracts Regulations 2015 (PCRs 2015), EU Treaty Principles and the Council's CPRs.

6.2.4. Under section 1 of the Care Act 2014 the Council has a general duty to promote individual well-being and under section 10(2), the duty to assess carers. After assessing what the needs of a carer are, the Council must consider whether the needs meet the eligibility criteria for a provision of service (section 13(1) of the Care Act 2014). The

minimum eligibility criteria are set out in the Care and Support (Eligibility Criteria) Regulations 2015. Sections 18-20 of the Care Act 2014 impose a duty on the Council to meet eligible needs. Neither the Care Act 104 nor the Care and Support (Eligibility Criteria) Regulation 2015 specify the type of support that the Council must provide to meet eligible needs. This contract seeks to provide support to the carers to allow the Council to meet its statutory duties under the Care Act 2014.

6.2.5. The contract's value is above the 'Light Touch Regime (LTR) threshold for services (social care and health). The LTR specifies that any contract 'whole life' value which is set to exceed the LTR threshold (£589,148) must be competitively tendered in accordance with the PCRs 2015 (Ss.74-76 PCRs 2015). The Procurement & Commissioning Hub has confirmed that a compliant procurement process has been undertaken.

6.2.6. The terms of the contract procured must be in a form approved by the Director of Law and Governance.

### **6.3 Procurement Implications**

6.4.1 Any procurement must be undertaken in accordance with the Councils Contract Procedure Rules (CPR's) and the Public Contracts Regulations (2015).

6.4.2 The award of the contract, including evidence of authority to award, promoting to the Councils Contract Register, and the uploading of executed contracts must be undertaken on the London Tenders Portal including future management of the contract.

6.4.3 All awarded projects must be promoted to Contracts Finder to comply with the Government's transparency requirements.

6.4.4 The procurement was carried out under the Light Touch Regime of the EU regulations.

6.4.5 The procurement was placed on the London Tenders Portal and 3 bids were received. 1 bid did not pass the minimum standard both on finance and contract examples. The remaining two bids were evaluated under the published criteria within the tender.

6.4.6 Given the value of this contract the CPR's state that a nominated contract owner should be provided on the LTP, to manage the contract and ensure that the records on the LTP contract register are up to date for extensions etc.

6.4.7 It is expected that reviews of the extensions take place in good time to allow for a procurement should the extension not be taken.

***Imps provided by C E Reilly 19/03/2020***

## **7. KEY RISKS**

- 7.1 The competitive nature of the tender process may have resulted in a change of service provider. TUPE information was included within tender documentation to enable alternative arrangements should there be a change to delivery.

## **8. IMPACT ON COUNCIL PRIORITIES – CREATING A LIFETIME OF OPPORTUNITIES IN ENFIELD**

### **8.1 Sustain strong and healthy communities**

- 8.1.1 The Service will provide specialist support that enables Carers, to maintain their independence, achieve their potential and assist them in contributing to the local community and workforce.

### **8.2 Build our local economy to create a thriving place**

- 8.2.1 The Service will provide Carers with the opportunity to maintain access to education and the workforce, thereby reducing inequality and enabling opportunities for training and employment.

## **9. EQUALITIES IMPACT IMPLICATIONS**

- 9.1 This Service will comply with diversity and equal opportunities requirements.

## **10. PERFORMANCE AND DATA IMPLICATIONS**

- 10.1 This Service will ensure the Council meets statutory requirements under the Care Act 2014. Quarterly reports will be provided to the Council by the Service, to enable monitoring of requested outcomes.

## **11. PUBLIC HEALTH IMPLICATIONS**

- 11.1 The Service will help ensure that the physical health and mental wellbeing of service users is addressed and maintained.

### **Background Papers**

No background papers are included in this report.