

Finance and Resources

10am, Tuesday, 30 April 2024

Health and Social Care Contract Extension Report

Executive/routine
Wards

1. Recommendations

1.1 It is recommended that the Finance and Resources Committee:

Approve the extension of the Health and Social Care contracts outlined in 4.1.

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Health and Social Care Contract Extension Report

2. Executive Summary

- 2.1 This report sets out the current Edinburgh Health and Social Care Partnership (EHSCP) commissioning activity and how these impact on contractual arrangements including the requirement to waive the requirement of Contract Standing Orders to allow contracts to be extended at the expiry of the current contract duration.
- 2.2 All the services covered in this report are commissioned by Edinburgh Integration Joint Board and procured by the Council.

3. Background

- 3.1 On 6 December 2021 the Scottish Government published “Preparing to Transition Towards a National Care Service for Scotland: SPPN 7/2021”. This Scottish Procurement Policy Note advises public bodies involved in the commissioning of social care services of the actions they can and should take in preparation for the transition to a National Care Service in Scotland. Integration Joint Boards are asked to review strategic commissioning plans and to consider the impact of decisions on resources and the social care market and consider the use of contract modifications or extensions where feasible to enable the collective focus to be on implementation. This review is now in progress and a number of contractual arrangements have been recommended, following consideration by the Health and Social Care Partnership Procurement Board, for extension.
- 3.2 This paper sets out, on a service-by-service basis, the proposed contractual arrangements and recommended extensions with supporting rationale. All services in question are commissioned by the Edinburgh Integration Joint Board. Due to the nature of this organisation, the associated contractual arrangements sit with the City of Edinburgh Council.
- 3.3 Systems and processes across commissioning, procurement and contracting teams have been reviewed and amended to ensure that expiring contracts are identified at an earlier stage. This in turn will support improvements in control and, where applicable, that extensions are actioned timeously.

4. Main report

4.1 The contractual arrangements covered by this paper, annual values, contract end dates and recommendations are summarised in the table below:

Contract	Value 2023/24 Value (£m)	Value 2024/25 (£m)	Contract End Date	Recommendation - contracts to be extended until
Essential Care Home Support (Scottish Care)	0.06	0.06	31.03.2024	31.03.2025
Edinburgh Alcohol and Drug Partnership – Hubs	2.37	1.19	30.09.24	31.03.2025
Aids for Daily Living Equipment Supply & Services	5.86	3.9	31.05.24	30.11.24

4.2 These are discussed individually in paragraphs 4.4 to 4.14 below.

4.3 All providers delivering the contracts within this paper have been consulted and are content with the recommended extensions.

Essential Care Home Support (Scottish Care)

4.4 An Independent Sector Lead is required to support the Edinburgh Health and Social Care Partnership. Across Scotland this is provided to Partnerships by Scottish Care. There are no other organisations currently able to provide this service.

4.5 Scottish Care are providing support relating to residential care, and homebased care provision with service improvements and development being key to their work plan. Additionally, they provide an integral role in our Power of Attorney, Herbert Protocol and John's campaigns. They are also represented on the IJB Strategic Planning Group, and has the interests of older people, and people with dementia at the heart of their work plan, whilst ensuring the independent sector is well represented across multi agency discussions for care homes and care at home.

4.6 In line with all third sector spend this contract was subject to the Edinburgh Health and Social Care Partnership's Savings Recovery Programme which has delayed formal request to extend.

4.7 It is recommended that this post is extended for a further period of 12 months to 31 March 2025.

Edinburgh Alcohol and Drug Partnership (EADP) – Hubs

- 4.8 The EADP Hub contracts are the core voluntary sector services offering support to adults with problematic drug and alcohol use.

Contract reference	Current provider	Brief Contract Description	Annual value (£m)
CT0476	Turning point Scotland	Adult Community Treatment Service (NE hub)	0.87
HS0000 1224	Change Grow Live	Adult Community Treatment Service (NW, SE and SW hubs)	1.50

- 4.9 These Contracts were awarded following a competitive tendering process in April 2015. Throughout the contract, the providers have responded to additional needs within the contract (developing assertive outreach and in reach services in homeless settings, for instance) and evaluation of the service delivery is positive.

The contract duration was three years with a possible extension of two further years. This extension was exercised after a very positive review of delivery (based on widespread consultation, case file audit and review of performance data) in 2018. The contracts were further extended from 1 April 2021 to up to 30th September 2022 as a result of the Covid-19 pandemic. A further extension from October 2022 to September 2024 was added to enable systems changes which will inform the final specification. This process has been helpful but pressure on commissioning has created delays in progressing the re-procurement and a further 6 month extension is requested to enable recommissioning and any transition process which may be needed.

Aids for Daily Living Equipment Supply & Services

- 4.10 Approval is sought to extend the current contract held by Nottingham Rehab Ltd t/a NRS Healthcare for 6 months until 30th November 2024.
- 4.11 Aids for Daily Living (ADL) such as grab rails, bath seats, hoists, seating and dynamic mattresses etc. are provided to citizens, to allow them to remain living at home independently, supporting hospital discharge and preventing admission to hospital. ADL are also installed in schools, Council care homes and managed public buildings such as leisure and community centres.
- 4.12 A procurement process to re-tender the contract had been underway, however the procurement process has been paused as on 3 April 2024 NRS advised the Council that it had fallen the victim to a complex and sophisticated cyber security attack.

- 4.13 The incident has been escalated to the Council's Head of Legal, the Information Governance Manager, the Head of Commercial and Procurement Services, the Chief Finance Officer for the EIJB and the Chief Officer of the EHSCP) and the matter has also been reported to the Information Commissioner's Office (ICO) by both NRS, and the Council.
- 4.14 The extension period will allow NRS time to complete their investigation into the incident, report on the impact to their business and the Council and allow the Council to consider appropriate actions. The extension period will also provide the opportunity for the Service Area (working in consultation with Procurement, Legal and Information Governance) to further strengthen the new contract specification, in terms of IT security & cyber security incident management and reporting.

5. Next Steps

- 5.1 If the recommendations in this paper are accepted Officers from the Partnership will work with colleagues in Commercial and Procurement Services to make the appropriate contractual arrangements which take account of the recommendations in the Scottish Government's SPPN.

6. Financial impact

- 6.1 The total value of the contract extensions detailed in this report is £5.38m in financial year 2024/25.
- 6.2 Funding associated with the extension of the contracts will be directed by EIJB to the Council.

7. Stakeholder/Community Impact

- 7.1 Each of the ongoing procurement exercises has been co-produced with service users, providers and other relevant stakeholders.

8. Background reading/external references

[Preparing to Transition towards a National Care Service for Scotland SPPN 7/2021](#)

9. Appendices
