



Nottingham City Health and Wellbeing Board Commissioning Sub-Committee

Date: Wednesday 24 March 2021

Time: 4:00pm

Place: To be held remotely via Zoom and live-streamed to:
<https://www.youtube.com/user/NottCityCouncil>

Governance Officer: Adrian Mann **Direct Dial:** 0115 8764468

The Nottingham City Health and Wellbeing Board's Commissioning Sub-Committee is a partnership body whose role includes providing advice and guidance to the Board in relation to strategic priorities, joint commissioning and commissioned spend; performance management of the Board's commissioning plan; and taking strategic funding decisions relating to the Better Care Fund.

Agenda	Pages
1 Apologies for Absence	
2 Declarations of Interests	
3 Minutes Minutes of the meeting held on 30 September 2020, for confirmation	3 - 6
4 Integrated Assistive Technology and Dispersed Alarms Services Report of the Acting Director of Commissioning and Procurement, Nottingham City Council	7 - 20
5 Future Meeting Dates (Provisional) Wednesday 26 May 2021 at 4:00pm Wednesday 28 July 2021 at 4:00pm Wednesday 29 September 2021 at 4:00pm Wednesday 24 November 2021 at 4:00pm Wednesday 26 January 2022 at 4:00pm Wednesday 30 March 2022 at 4:00pm	

Councillors, co-optees, colleagues and other participants must declare all disclosable pecuniary and other interests relating to any items of business to be discussed at the meeting. If you need any advice on declaring an interest in an item on the agenda, please contact the Governance Officer shown above before the day of the meeting, if possible.

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**Nottingham City Council
Health and Wellbeing Board Commissioning Sub-Committee**

Minutes of the meeting held remotely via Zoom and live-streamed on YouTube on Wednesday 30 September 2020 from 4:05pm to 4:14pm

Membership

Present

Sarah Fleming (Chair)
Dr Manik Arora
Councillor Eunice Campbell-Clark
Councillor Adele Williams
Sarah Collis

Absent

Katy Ball
Helen Blackman
Alison Challenger
Christine Oliver
Catherine Underwood
Ceri Walters

Steve Oakley (substitute for Katy Ball)

Colleagues, partners and others in attendance:

Karla Banfield - Market Strategy and Development Manager, Nottingham City Council
Lisa Lopez - Lead Commissioning Manager, Nottingham City Council
Adrian Mann - Governance Officer, Nottingham City Council
Naomi Robinson - Senior Joint Commissioning Manager, NHS Nottingham and Nottinghamshire Clinical Commissioning Group

Call-in

Unless stated otherwise, all decisions made by the Health and Wellbeing Board: Commissioning Sub-Committee are subject to call-in. The last date for call-in is **Thursday 8 October 2020**. Decisions cannot be implemented until the next working day following this date.

1 Changes to Membership

The Committee noted that Dr Manik Arora has replaced Dr Hugh Porter as the GP Lead of the NHS Nottingham and Nottinghamshire Clinical Commissioning Group.

2 Apologies for Absence

Katy Ball - on leave
Helen Blackman - work commitments
Alison Challenger - work commitments
Christine Oliver - on leave
Catherine Underwood - technical problems
Ceri Walters - work commitments

3 Declarations of Interests

None.

4 Minutes

The Committee confirmed the minutes of the meeting held on 29 January 2020 as a correct record and they were signed by the Chair.

5 Better Care Fund National Reporting Template (Quarter 4)

This item does not contain any decisions that are eligible for call-in.

Naomi Robison, Senior Joint Commissioning Manager at NHS Nottingham and Nottinghamshire Clinical Commissioning Group, presented a report on the Better Care Fund (BCF) Reporting Template for Quarter 4 of 2019/20. The following points were discussed:

- (a) the current template, submitted to NHS England & NHS Improvement on 4 September 2020, confirms the status of continued compliance against the requirements of the BCF and provides information about the challenges, achievements and support needs in progressing the delivery. The BCF reporting requirements were paused during the Coronavirus lockdown and, in recognition of the disruption and reduced availability of resources caused by the pandemic, the resumed reporting requirements have been reduced significantly;
- (b) the reduced requirements provide essential information relevant to BCF accountability and delivery at the end of 2019/20, including confirmation that mandatory national conditions were met; information to highlight a success with integrated working; an overview of income and expenditure; and overall year-end feedback. During the period, there was particular success in the city in ensuring patient discharge from hospital at the right time, with a full assessment of home care needs. This ensured that patients were not in hospital when they did not need to be, and were supported at home in the re-enablement process;
- (c) due to the ongoing Coronavirus emergency, BCF planning for 2020/21 has been delayed. As such, the current services funded by the BCF will roll forward, until new planning guidance is released nationally.

Resolved to approve the Better Care Fund Reporting Template return to NHS England & NHS Improvement for Quarter 4 of 2019/20.

- **Reasons for the decision**

To confirm continued compliance against the requirements of the BCF and establish the challenges, achievements and support needs in progressing delivery. This will inform the BCF Plan, which will build on the achievements to date to ensure joint prioritisation of resources, avoidance of duplication, flexibility across organisational boundaries and targeting investment to meet shared priorities by taking a whole system perspective.

- **Other options considered**

To do nothing: this option is rejected because it is a national requirement for the Local Authority and Clinical Commissioning Group to review the BCF quarterly

Health and Wellbeing Board Commissioning Sub-Committee – 30.09.20

reporting templates and make a signed-off return to NHS England & NHS Improvement.

6 Future Meeting Dates

Resolved to meet in the following dates:

- **Wednesday 25 November 2020 at 4:00pm**

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**Health and Wellbeing Board: Commissioning Sub-Committee
24 March 2021**

	Report for Resolution
Title:	Integrated Assistive Technology Service
Lead officer(s):	Steve Oakley, Acting Director of Commissioning and Procurement
Author and contact details for further information:	Anna Coltman, Commissioning Officer anna.coltman@nottinghamcity.gov.uk
Brief summary:	The Integrated Assistive Technology (AT) Service and the Dispersed Alarms Service are both provided by Nottingham City Homes (NCH). The current contractual arrangements for these services end on 31 March 2021. These services provide support to citizens to remain living independently in their own home or in the community. This report requests approval to continue service provision with new contractual arrangements with NCH in place from April 2021.
Is any of the report exempt from publication?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is this an Executive decision?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Executive decisions are subject to call-in, unless otherwise stated here.
Recommendation to the Health and Wellbeing Board: Commissioning Sub-Committee:	
<p>The Health and Wellbeing Board Commissioning Sub-Committee is asked to:</p> <ol style="list-style-type: none"> 1. Endorse Nottingham City Council as the lead commissioner of the Integrated Assistive Technology Service and the Dispersed Alarms Service. 2. Approve the award of the Integrated Assistive Technology contract to Nottingham City Homes as a wholly-owned subsidiary of the Council, through 'Teckal' arrangements. This is a 3-year contract with an annual value of £434,400 and a total value of £1,303,200. 3. Approve the award of the Dispersed Alarms contract to Nottingham City Homes as a wholly-owned subsidiary of the Council, through 'Teckal' arrangements. This is a 3-year contract with an annual value of £17,940 and a total value of £53,820 	

4. Delegate approval to the Acting Director of Commissioning and Procurement to award and sign the contracts for these services.

5. Approve the spend associated with this decision subject to the joint approval of the 2021/22 Better Care Fund Plan as detailed in Section 4 of the report.

Contribution to Joint Health and Wellbeing Strategy

Health and Wellbeing Strategy aims and outcomes	Summary of contribution to the Strategy
Aim: To increase healthy life expectancy in Nottingham and make us one of the healthiest big cities	The key outcomes for the Integrated AT Service and the Dispersed Alarms Service continue to be that:
Aim: To reduce inequalities in health by targeting the neighbourhoods with the lowest levels of healthy life expectancy	<ul style="list-style-type: none"> • citizens are enabled to remain living independently in their own home, safely, for as long as possible; • moves into residential care are prevented or delayed; and • unnecessary hospital admissions are avoided. <p>The service can also contribute to meeting additional outcomes including:</p> <ul style="list-style-type: none"> • improved outcomes for people with a learning disability, e.g. enabled to live more independently of facilitates a move from residential care to supported living; • improved outcomes for people admitted into hospital following accidents and falls; • carers and families are supported in their caring role; • delaying the journey into social care and health for many elderly and vulnerable people through the provision of a prevention service. This keeps them safe and independent in their homes for longer and compliments and supports any necessary social care interventions; • using Assistive Technologies to facilitate and widen access to, and choice of alternative forms of support provided by health services, community services and the voluntary
Outcome 1: Children and adults in Nottingham adopt and maintain healthy lifestyles	
Outcome 2: Children and adults in Nottingham will have positive mental wellbeing and those with long-term mental health problems will have good physical health	
Outcome 3: There will be a healthy culture in Nottingham in which citizens are supported and empowered to live healthy lives and manage ill health well	
Outcome 4: Nottingham's environment will be sustainable – supporting and enabling its citizens to have good health and wellbeing	

	<p>sector; and</p> <ul style="list-style-type: none"> citizens are more able to understand and manage their own health and care needs through the use of AT. <p>Outcome measures will be monitored and reviewed through the life of the contract to ensure that they are sufficient to demonstrate that the needs of service users are being met and that the outcomes of the service are being achieved.</p>
<p>How mental health and wellbeing is being championed in line with the Health and Wellbeing Board’s aspiration to give equal value to mental and physical health</p>	
<p>Citizens with an assessed mental health need, including cognitive impairment or Dementia, will have access to the equipment and on-call support available through this service. The equipment has the potential to enable these citizens to live more independently at home and to support carers in their caring role.</p>	

<p>Reason for the decision:</p>	<p>The existing contractual arrangements end on 31 March 2021 and a decision is required to continue the services.</p>												
<p>Total value of the decision:</p>	<p>£1,357,020</p>												
<p>Financial implications and comments:</p>	<p>The total cost of the decisions outlined in this report is £1,357,000 for the 3-year proposed contract duration based on the revised service specifications, or £452,000 per annum.</p> <p>Providing there are no changes to the current levels of grant funding received, the annual funding envelope to support the proposals contained within this report are detailed in Table 1 below.</p> <table border="1" data-bbox="485 1597 1390 2007"> <thead> <tr> <th colspan="2" data-bbox="485 1597 1390 1682"> <p>TABLE 1 – ANNUAL FUNDING FOR ASSISTIVE TECHNOLOGY SERVICE INC DISPERSED ALARMS</p> </th> </tr> <tr> <th data-bbox="485 1682 1201 1771"> <p>BETTER CARE FUND (BCF) FUNDING:</p> </th> <th data-bbox="1201 1682 1390 1771"> <p>2021/22 £m</p> </th> </tr> </thead> <tbody> <tr> <td data-bbox="485 1771 1201 1827"> <p>Assistive Technology Service</p> </td> <td data-bbox="1201 1771 1390 1827"> <p>0.334</p> </td> </tr> <tr> <td data-bbox="485 1827 1201 1883"> <p>Dispersed Alarm Service</p> </td> <td data-bbox="1201 1827 1390 1883"> <p>0.018</p> </td> </tr> <tr> <td data-bbox="485 1883 1201 1939"> <p>Sub Total</p> </td> <td data-bbox="1201 1883 1390 1939"> <p>0.352</p> </td> </tr> <tr> <td data-bbox="485 1939 1201 2007"> <p>DISABLED FACILITIES GRANT (DFG) CAPITAL FUNDING:</p> </td> <td data-bbox="1201 1939 1390 2007"> <p></p> </td> </tr> </tbody> </table>	<p>TABLE 1 – ANNUAL FUNDING FOR ASSISTIVE TECHNOLOGY SERVICE INC DISPERSED ALARMS</p>		<p>BETTER CARE FUND (BCF) FUNDING:</p>	<p>2021/22 £m</p>	<p>Assistive Technology Service</p>	<p>0.334</p>	<p>Dispersed Alarm Service</p>	<p>0.018</p>	<p>Sub Total</p>	<p>0.352</p>	<p>DISABLED FACILITIES GRANT (DFG) CAPITAL FUNDING:</p>	<p></p>
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	<table border="1"> <tr> <td data-bbox="485 192 1203 248">Assistive Technology Service</td> <td data-bbox="1203 192 1394 248">0.100</td> </tr> <tr> <td data-bbox="485 248 1203 302">Total</td> <td data-bbox="1203 248 1394 302">0.452</td> </tr> </table>	Assistive Technology Service	0.100	Total	0.452
Assistive Technology Service	0.100				
Total	0.452				
<p>Procurement implications and comments (including where relevant social</p>	<p>Whilst this decision contains an element of capital related expenditure to be offset by the associated DFG income, there will be no additional drawdown required from the Capital Programme nor any prudential borrowing implications.</p> <p>Whilst the contracts outlined in this decision have formed part of the BCF plan in the current and previous years, any funding allocations against BCF schemes in future years (2021/22+) will require joint approval by this Committee via the completion of the BCF plan. The annual BCF funding plan will be subject to a further report for approval once the full planning guidance has been published.</p> <p>If the level of BCF/DFG funding diminishes in future years, work will need to be undertaken jointly to identify an alternative funding source or to ascertain which BCF schemes to reduce/decommission in order to fully mitigate the financial risk to both partners.</p> <p>Recommendation 2 and 3 seeks to direct award the contracts to Nottingham City Homes (NCH). As a wholly owned subsidiary of the Council, the contracts with NCH fall under the teckal exemption (Public Contract Regulations 2015) which means that a full procurement tender exercise is not required where it is considered that the arrangement offers best value to the Council.</p> <p>Value for money will continue to be delivered by procuring services that meet the needs of local people through the most economic, efficient and effective means. The service delivery options including the managed key performance indicators supporting BCF targets alongside the recommendations for the use of teckal arrangements outlined above will support the delivery of value for money. The Dispersed Alarms service will also be subject to annual reviews with the outcomes for citizens to be monitored closely through contract reporting and service user feedback surveys.</p> <p>Advice provided by Hayley Mason (Strategic Finance Business Partner) on 15 March 2021.</p> <p>The decisions in this report relate to the proposed award of contracts to Nottingham City Homes for the delivery of Assistive Technology and Dispersed alarms services from April 2021. It is considered that delivery by Nottingham City Council represents value for money and the proposed awards will</p>				

<p>value implications):</p>	<p>enable continuity of services to vulnerable citizens. As a wholly owned subsidiary of the Council, NCH may be awarded this funding directly under contracts, in accordance with the Council's Financial Regulations and Contract Procedure Rules (2.6.10 and 2.6.11)</p> <p>Advice provided by Jo Pettifor (Category Manager – Strategy and People) on 19 February 2021.</p>
<p>Other implications and comments, including legal, risk management, crime and disorder:</p>	<p>Legal comments:</p> <p>In accordance with the Council's Constitution, the Council when buying services is permitted to enter into arrangements with one of its subsidiary companies if it meets certain criteria under the procurement regime provided under the Public Contract Regulations 2015, known as the 'teckal exemption'.</p> <p>Arrangements falling under the teckal exemption are excluded from the requirements to seek quotation or tenders under the Council's Contract Procedure Rules, provided a contract is put in place and the arrangement is considered to offer best value to the Council.</p> <p>It is understood that the arrangement with NCH, a wholly owned subsidiary of the Council that is deeded to fall within the teckal exemption, not only offers well managed services to the Council for Assisted Technology and Dispersed Alarms and service users, but in light of a difficult market and financial constraints upon the Council, it is also considered value for money to the Council.</p> <p>It is also understood that the services will be remodelled to ensure broader opportunities will be open to the Council and its citizens under the Contracts that will be established.</p> <p>Advice provided by Dionne Screatton, Solicitor.</p>
<p>Equalities implications and comments:</p>	<p>An Equalities Impact Assessment is currently being undertaken.</p>
<p>Published documents referred to in the report:</p>	<p>None</p>
<p>Background papers relied upon in writing the report:</p>	<p>None.</p>

Other options considered and rejected:

1. Do nothing. This was rejected as the current contracts are ending and new arrangements are required.
2. Seek to review service provision and explore alternative models. This was rejected for the Integrated AT Service as the contract has been subject to review in the previous term of the contract which resulted in a contract variation to reduce the contract value. Any further changes to deliver efficiencies would risk destabilising the current service model provided by NCH. The Dispersed Alarms contract has been subject to a review of service provision resulting in a change to service model.
3. Extending the contracts for a further year. This was rejected as the contract is ending with no option for extension and a decision is required to put in place a new arrangements. New contracts will allow commissioners to work with the Provider to explore opportunities for achieving better value for money, to review and remodel the service and to explore broader range of equipment choices for citizens. Commissioners will also initiate development work with NCH to create an outcomes focussed service model and align the service with NCC's draft Digital Strategy. This development work will form part of the annual reviews.
4. Tender the services through an open and competitive tender process. The current services are considered to be delivering value for money for Nottingham City Council. NCH as housing provider and alarm service provider have infrastructure, systems and processes in place which any new provider would need time and funding to establish. There are not felt to be other providers who could deliver the same service within Nottingham. NCH is a wholly owned subsidiary, direct awards are permissible through 'Teckal' provisions of the Procurement Regulations.

**Health and Wellbeing Board Commissioning Sub-Committee
24 March 2021**

Subject:	Assistive Technology Contracts
Report Author and Contact Details	Anna Coltman, Commissioning Officer anna.coltman@nottinghamcity.gov.uk
Portfolio Holder(s):	Councillor Adele Williams, Portfolio Holder for Adult Care and Local Transport
Other colleagues who have provided input:	Dionne Screatton, Solicitor Jo Pettifor, Procurement Category Manager Hayley Mason, Strategic Finance Business Partner
Key Decision: Yes	
Criteria for Key Decision:	
(a) <input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> Income <input type="checkbox"/> Savings of £1,000,000 or more taking account of the overall impact of the decision	
and/or	
(b) Significant impact on communities living or working in two or more wards in the City or impact on staffing or service delivery <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Type of expenditure: <input checked="" type="checkbox"/> Revenue <input checked="" type="checkbox"/> Capital	
Total value of the decision: £1,357,020	
Wards affected: All	
Date of consultation with Portfolio Holder(s): N/A	
Relevant Council Plan Key Theme:	
Nottingham People	<input checked="" type="checkbox"/>
Living in Nottingham	<input type="checkbox"/>
Growing Nottingham	<input type="checkbox"/>
Respect for Nottingham	<input type="checkbox"/>
Serving Nottingham Better	<input type="checkbox"/>
Summary of issues (including benefits to citizens/service users):	
<p>The Integrated Assistive Technology (AT) Service and the Dispersed Alarms Service are both provided by Nottingham City Homes (NCH). The current contractual arrangements for these services end on 31 March 2021.</p> <p>These services provide support to citizens to remain living independently in their own home or in the community. The Integrated AT service provides a staffing resource for the maintenance of alarms, training and evaluation and development activities. It also provides for the 24-hour monitoring and response service, delivered through</p>	

Nottingham on Call. A new service model for the Dispersed Alarms is intended to support the most vulnerable citizens by facilitating hospital discharges and providing a range of equipment for citizens with a reablement plan.

This report requests approval to continue service provision with new contractual arrangements with NCH in place from April 2021.

Recommendation(s):

1. To endorse Nottingham City Council (NCC) as the lead commissioner of the Integrated Assistive Technology Service and the Dispersed Alarms Service.

2. To approve the award of the Integrated Assistive Technology contract to Nottingham City Homes as a wholly-owned subsidiary of the Council, through 'Teckal' arrangements. This is a 3-year contract with an annual value of £434,400 and a total value of £1,303,200.

3. To approve the award of the Dispersed Alarms contract to Nottingham City Homes as a wholly-owned subsidiary of the Council, through 'Teckal' arrangements. This is a 3-year contract with an annual value of £17,940 and a total value of £53,820.

4. To delegate approval to the Acting Director of Commissioning and Procurement to award and sign the contracts for these services.

5. To approve the spend associated with this decision, subject to the joint approval of the 2021/22 Better Care Fund Plan as detailed in Section 4 of the report.

1 Reasons for recommendations

- 1.1 The Integrated Assistive Technology (AT) Service and the Dispersed Alarms Service are commissioned by Nottingham City Council (NCC) with the Nottingham and Nottinghamshire Clinical Commissioning Group (CCG). NCC acts as lead commissioner for these services, which are funded through the Better Care Fund (BCF).
- 1.2 The contractual arrangements for these services end on 31 March 2021. Other options considered do not allow NCC to continue with existing services in such a way that provides continuity of service for citizens and value for money for NCC. These options are outlined in further detail in Section 3.
- 1.3 Approval is requested to continue to award contracts to Nottingham City Homes (NCH) because NCH is a wholly-owned subsidiary of the Council and therefore covered by the exemption provisions of the UK Procurement Regulations, allowing for a direct award. The current services are considered to be delivering value for money for NCC because NCH have well-established infrastructure and processes, good relationships with citizens and tenants across the City and have developed

strong partnership arrangements with City Council commissioners and social care teams.

- 1.4 Under these new contractual arrangements, the Integrated AT Service will continue to deliver the existing service within the existing available funding for a 3-year term. The Dispersed Alarms service will also be subject to a 3-year contract term, and will be subject to a new service model that will target support to facilitate hospital discharge and support citizens with a social care reablement plan.
- 1.5 The key outcomes for the Integrated AT Service and the Dispersed Alarms Service continue to be that:
 - citizens are enabled to remain living independently in their own home, safely, for as long as possible;
 - moves into residential care are prevented or delayed; and
 - unnecessary hospital admissions are avoided.
- 1.6 The value contained within this report is reflective of the new service specifications and the proposals which are outlined in the Executive Board report on 19 January 2021.

2 Background (including outcomes of consultation)

- 2.1 Assistive Technology (Telecare and Telehealth) has been operational in Nottingham since 2007. In June 2015, the Health and Wellbeing Commissioning Executive Group endorsed the Strategic Vision of the Assistive Technology work stream, including the creation of a single integrated service.
- 2.2 From April 2015, the budgets for the Telecare and Telehealth Services were contained within the BCF AT work stream.
- 2.3 In October 2018, the Integrated AT service was subject to a contract variation, resulting in reductions to the staffing and equipment elements of the budget. As a result, NCH stopped delivering the Telehealth service and services that were planned including Telemedicine, as well as reducing their staffing resource.
- 2.4 The Dispersed Alarms service was commissioned in 2012 and in 2019/20 additional capacity was added to the contract. Analysis of usage in 2019/20 indicated that there was underutilisation of this contract including the additional capacity. The new service model will target support to facilitate hospital discharge and support citizens with a social care reablement plan.

3 Other options considered in making recommendations

1. Do nothing. This was rejected as the current contracts are ending and new arrangements are required.

2. Seek to review service provision and explore alternative models. This was rejected for the Integrated AT Service as the contract has been subject to review in the previous term of the contract that resulted in a contract variation to reduce the contract value. Any further changes to deliver efficiencies would risk destabilising the current service model provided by NCH. The Dispersed Alarms contract has been subject to a review of service provision resulting in a change to service model.

3. Extending the contracts for a further year. This was rejected as the contract is ending with no option for extension and a decision is required to put in place a new arrangements. New contracts will allow commissioners to work with the Provider to explore opportunities for achieving better value for money, to review and remodel the service and to explore broader range of equipment choices for citizens. Commissioners will also initiate development work with NCH to create an outcomes focussed service model and align the service with NCC’s draft Digital Strategy. This development work will form part of the annual reviews.

4. Tender the services through an open and competitive tender process. The current services are considered to be delivering value for money for NCC. NCH as housing provider and alarm service provider have infrastructure, systems and processes in place which any new provider would need time and funding to establish. There are not felt to be other providers who could deliver the same service within Nottingham. NCH is a wholly owned subsidiary, direct awards are permissible through ‘Teckal’ provisions of the Procurement Regulations.

4 Finance colleague comments (including implications and value for money)

4.1 The total cost of the decisions outlined in this report is **£1,357,000** for the 3 year proposed contract duration based on the revised service specifications, or **£452,000 per annum**.

4.2 Providing there are no changes to the current levels of grant funding received, the annual funding envelope to support the proposals contained within this report are detailed in **Table 1** below.

TABLE 1 – ANNUAL FUNDING FOR ASSISTIVE TECHNOLOGY SERVICE INC DISPERSED ALARMS	
	2021/22 £m
BETTER CARE FUND (BCF) FUNDING:	
Assistive Technology Service	0.334
Dispersed Alarm Service	0.018
Sub Total	0.352
DISABLED FACILITIES GRANT (DFG) CAPITAL FUNDING:	
Assistive Technology Service	0.100
Total	0.452

- 4.3 Whilst this decision contains an element of capital related expenditure to be offset by the associated DFG income, there will be no additional drawdown required from the Capital Programme nor any prudential borrowing implications.
- 4.4 Whilst the contracts outlined in this decision have formed part of the BCF plan in the current and previous years, any funding allocations against BCF schemes in future years (2021/22+) will require joint approval by this Committee via the completion of the BCF plan. **The annual BCF funding plan will be subject to a further report for approval once the full planning guidance has been published.**
- 4.5 If the level of BCF/DFG funding diminishes in future years, work will need to be undertaken jointly to identify an alternative funding source or to ascertain which BCF schemes to reduce/decommission in order to fully mitigate the financial risk to both partners.
- 4.6 Recommendation 2 and 3 seeks to direct award the contracts to NCH. As a wholly-owned subsidiary of the Council, the contracts with NCH fall under the teckal exemption (Public Contract Regulations 2015), which means that a full procurement tender exercise is not required where it is considered that the arrangement offers best value to the Council.
- 4.7 Value for money will continue to be delivered by procuring services that meet the needs of local people through the most economic, efficient and effective means. The service delivery options including the managed key performance indicators supporting BCF targets alongside the recommendations for the use of teckal arrangements outlined above will support the delivery of value for money. The Dispersed Alarms service will also be subject to annual reviews with the outcomes for citizens to be monitored closely through contract reporting and service user feedback surveys.

Advice provided by Hayley Mason (Strategic Finance Business Partner) on 15 March 2021

5 Legal and Procurement colleague comments (including risk management issues, and legal, Crime and Disorder Act and procurement implications)

Procurement comments:

The decisions in this report relate to the proposed award of contracts to NCH for the delivery of Assistive Technology and Dispersed alarms services from April 2021. It is considered that delivery by Nottingham City Council represents value for money and the proposed awards will enable continuity of services to vulnerable citizens. As a wholly owned subsidiary of the Council, NCH may be awarded this funding directly under contracts, in accordance with the Council's Financial Regulations and Contract Procedure Rules (2.6.10 and 2.6.11).

Advice provided by Jo Pettifor (Category Manager – Strategy and People) on 19 February 2021.

Legal comments:

In accordance with the Council's Constitution, the Council when buying services is permitted to enter into arrangements with one of its subsidiary companies if it meets certain criteria under the procurement regime provided under the Public Contract Regulations 2015, known as the 'teckal exemption'.

Arrangements falling under the teckal exemption are excluded from the requirements to seek quotation or tenders under the Council's Contract Procedure Rules, provided a contract is put in place and the arrangement is considered to offer best value to the Council.

It is understood that the arrangement with NCH, a wholly owned subsidiary of the Council that is deemed to fall within the teckal exemption, not only offers well managed services to the Council for Assisted Technology and Dispersed Alarms and service users, but in light of a difficult market and financial constraints upon the Council, it is also considered value for money to the Council.

It is also understood that the services will be remodelled to ensure broader opportunities will be open to the Council and its citizens under the Contracts that will be established.

Advice provided by Dionne Screamon (Solicitor).

6 HR colleague comments (including implications)

Not applicable.

7 Strategic Assets & Property colleague comments (for decisions relating to all property assets and associated infrastructure)

Not applicable.

8 Social value considerations

8.1 The service adds social value in Nottingham by:

- Promoting social inclusion for service users and the representation of service users as positive contributors to the life of the city.
- Preventing costs to other services such as health, including emergency health services.
- Enabling people to remain independent in the community and reducing the need for long term community support, hospital admission or other outcomes such as long-term residential care.
- Employing from the local community as much as possible.
- Utilising environmentally sustainable working practices wherever possible.

9 Regard to the NHS Constitution

Not applicable.

10 Equality Impact Assessment (EIA)

10.1 An EIA is currently being undertaken.

11 List of background papers relied upon in writing this report (not including published documents or confidential or exempt information)

None.

12 Published documents referred to in this report

None.

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