

CABINET - 1 MAY 2018

AWARD OF CONTRACT TO CARERS' TRUST URGENT ACTION BY THE CHIEF EXECUTIVE

REPORT OF THE DIRECTOR OF ADULTS AND COMMUNITIES

PART A

Purpose of the Report

1. The purpose of this report is to advise the Cabinet of urgent action taken by the Chief Executive, following consultation with the Leader and Deputy Leader of the Council, in respect of the award of a contract to the Carers' Trust to provide a discharge response and home care bridging service to the Council (Discharge Response Team [DRT]).

Recommendation

2. That the Cabinet notes the urgent action taken by the Chief Executive to award a contract to the Carers' Trust for the provision of a discharge response and home care bridging service in line with Contract Procedure Rule 6 (b) (ii) (Exceptions).

Reason for Recommendation

- 3. Urgent action was taken on the 29 March 2018 by the Chief Executive to ensure that the contract was in place by 2 April 2018.
- 4. The discharge response and home care bridging service enables the timely discharge from hospital for Leicestershire residents by providing additional capacity in the event of short-term delays in starting packages of home care on discharge from hospital.

Timetable for Decisions (including Scrutiny)

5. The contract commenced on 2 April 2018 and will run until 31 March 2019.

Resource Implications

6. The contract has been awarded for one year, the value being approximately £310,000. This is below the EU procurement threshold for this type of service but greater than £182,302, which is the maximum that a Chief Officer can authorise under Rule 6 (b) (i). It is intended that the funds for the DRT

contract will come out of the improved Better Care Fund (iBCF) for 2018/19 and that, by the end of 2018/19, robust contingency arrangements for short-term care delays will be in place.

7. The Director of Corporate Resources and the Director of Law and Governance have been consulted in the preparation of this report.

<u>Circulation under the Local Issues Alert Procedure</u>

8. None.

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PART B

Background

- 9. The DRT helps to ensure that people can return home in a timely manner following treatment in hospital, thus avoiding delayed transfers of care. Until 2017 this service was commissioned and funded through a contract between University Hospitals of Leicester (UHL) and the Carers' Trust. UHL notified the Council part-way through 2017 that it could no longer fund the service. The Council wished DRT to continue as it is integral to its Help to Live at Home service, providing additional capacity in the event of short-term delays in starting packages of home care on discharge from hospital. It was therefore agreed that for 2017/18, UHL would continue to contract with Carers' Trust to provide the DRT service and the Council would use iBCF monies to reimburse UHL.
- 10. For the DRT service to continue in 2018/19 the Council needed to enter into a contract directly with the Carers' Trust.
- 11. As this was not established until mid-March, it was not possible to submit a report to the Cabinet before the contract needed to be in place.
- 12. Rule 6 of the Council's Contract Procedure Rules provides that the Executive (the Cabinet) may agree an exception where it is satisfied that it is justified and that in urgent cases the Chief Executive, after consulting the Leader or Deputy Leader, may agree to the exception subject to a report being made to the next Cabinet meeting.
- 13. In order for the service to continue from 2 April the Chief Executive agreed that an exception be made to award the contract to the Carers' Trust to provide a discharge response and homecare bridging service to the Council.

Equality and Human Rights Implications

14. There are no equality or human rights implications arising from the recommendations in this report. The contract will ensure that eligible service users are able to access appropriate home care short-term bridging services following discharge from hospital, prior to commencement of a Help to Live at Home package of care or other appropriate provision.

Background Papers

None.

