



INTEGRATION JOINT BOARD

Date of Meeting	24/09/2024
Report Title	Supplementary Procurement Workplan 2024/25
Report Number	HSCP.24.066.
Lead Officer	Fiona Mitchelhill, Chief officer ACHSCP
Report Author Details	Name: Neil Stephenson Job Title: Strategic Procurement Manager Email Address: nestephenson@aberdeencity.gov.uk
Consultation Checklist Completed	Yes
Directions Required	Yes
Exempt	Yes. This report contains exempt information as described in paragraph 6 (Information relating to the financial or business affairs of any particular person (other than the authority)) and paragraph 9 (Any terms proposed or to be proposed by or to the authority in the course of negotiations for a contract for the acquisition or disposal of property or the supply of goods or services) of Part 1 of Schedule 7A of the Local Government (Scotland) Act 1973, enacted by the Local Government (Access to Information) Act 1985. This is applied in this case because, in view of the nature of the business to be transacted or in the nature of the proceedings, if members of the public were present, there would be disclosure to them of exempt information as defined in the Schedule.



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Appendices	<p>Exempt: Appendix A - Supplementary Work Plan for 2024/25 Appendix C – Procurement Business Case Appendix B – Direction to Aberdeen City Council Non Exempt: Appendix A1 - Supplementary Work Plan for 2024/25</p>
Terms of Reference	<p>6. Contracts, in so far as it relates to business services, the engagement of consultants, or external advisors for specialist advice such as administrative, accounting or legal support, where this requires authority from the IJB in respect of the Partners’ own procurement rules and Schemes of Delegation;</p>

1. Purpose of the Report

1.1 The purpose of this report is to present a Supplementary Procurement Work Plan for 2024/25 for expenditure on social care services, together with the associated procurement Business Case, for approval.

2. Recommendations

2.1. It is recommended that the Integration Joint Board

- a) Approves the **extension** for four (4) months to the current Adult Carers Support Services contracts and, also approves the recommendation to undertake a **tender**, and subsequent award of a contract or contracts, for Adult & Young Carers Support Services for five (5) years plus two additional one year extensions, as detailed in Appendices A1 and C
- b) Makes the Direction, as attached at Appendix B and instructs the Chief Officer to issue the Direction to Aberdeen City Council.



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3. Strategic Plan Context

- 3.1. This report seeks IJB approval for the social care contracts which have been commissioned under the eight Ethical Commissioning Principles: person centred care first; full involvement of people with lived experience; high quality care; human rights approach; Fair working practices; financial transparency and commercial viability; climate and circular economy; and shared accountability.

4. Summary of Key Information

- 4.1 The Integration Joint Board (IJB) directs Aberdeen City Council (ACC) to purchase and enter contracts with suppliers for the provision of services in relation to functions for which it has responsibility. ACC procures services through the Commercial and Procurement Shared Service (CPSS) in accordance with ACC's Scheme of Governance.
- 4.2 ACC Powers Delegated to Officers includes, at delegation 1 of section 7, that the Chief Officer of the Aberdeen City Integration Joint Board (also referred to and known as the Chief Officer of the Aberdeen City Health and Social Care Partnership (ACHSCP)) has delegated authority to facilitate and implement Directions issued to ACC from the IJB, in accordance with the requirements of the ACC Procurement Regulations.
- 4.3 These Regulations require the submission of an annual procurement work plan prior to the commencement of each financial year detailing all contracts to be procured by Aberdeen City Council in the coming year with a value of £50,000 or more, to relevant Boards/Committees. In the case of adult social care services, this is the IJB. The Regulations also require that procurement business cases to support items on the work plan are brought to the IJB prior to any tender being undertaken or contract awarded directly. Although the intention is that all procurement should be planned, there may be occasions, such as with this report, where this is not possible and supplementary work plans and/or business cases may be required.
- 4.4 This report presents a Supplementary Procurement Work Plan for 2024/25. A supporting procurement business case is attached at Appendix C. The work plan comprises one (1) item, recommending to extend current arrangements and then going out to tender to provide continuity of care for service users and ensure best value. As noted in the annual work plan (HSCP.24.004 point 4.4), we had planned to submit a supplementary



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workplan to the IJB in May 2024 with a business case for the Carers Support Services. This process has taken slightly longer due to the collaborative commissioning approach with all stakeholders including Children's Services colleagues. We are now ready to proceed in terms of strategic direction and following rigorous consultation.

4.5 Whilst this expenditure signifies an additional investment, the risks of not making this investment reduce the ACHSCP's opportunity to continue to offer the highest quality services and, subsequently, the achievement of outcomes for individuals.

4.6 Links with Strategic Commissioning

The procurement of works, goods and services is driven by strategic aims. The ACHSCP has established a Strategic Commissioning and Procurement Board (SCPB) to create a clearer link between the programmes of work, the associated budgets, and the procurement work plan and outcomes, in line with the Commissioning Cycle. Throughout the year, the SCPB has considered the items on this Supplementary/Annual Procurement Work Plan and determined that the services are required to support the delivery of strategic intentions.

5. Implications for IJB

5.1. Equalities, Fairer Scotland, and Health Inequality

As noted in the Business Case, an Inequalities Impact Assessment (IIA) is being carried out by the Programme Management Team. Currently, there are no specific equality or health implications from this report. Nor is there any direct implication for our Fairer Scotland Duty.

5.2. Financial

The estimated contract value is based on current and future need in line with the Carers' Strategy and we have allowed an annual 3% notional for each year of the contract to accommodate any national increase including the Real Living Wage (RLW). Notwithstanding the provision for a notional 3% rise in expenditure each year, spend against the contract will not exceed the relevant budget made available by the Integration Joint Board each year, unless agreed by all relevant parties.

The funding for these services is received directly from the Scottish Government to allow the Partnership to meet the statutory requirement under



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the Carers (Scotland) Act 2016. Although the business case recommends a contract length of five years plus two optional one-year extensions, the funding from Scottish Government is agreed annually. There will be provision in the contract to amend the value and level of service should the planned funding change.

5.3. Workforce

There are no direct workforce implications arising from the recommendations of this report.

5.4. Legal

The procurement of care and support services is a complex area, it is given special consideration under procurement legislation, with specific statutory guidance and best practice guidance issued by the Scottish Government. Because of this special consideration, there is a discrete team within the CPSS to support and manage the commissioning, procurement and contract management of care and support services, and the Work Plan for these services is presented separately to other reports. The Business Case has been considered and no risk significant enough to warrant a halt to proceeding has been identified.

5.5. Unpaid Carers

The services are to support unpaid carers and there would be implications for this group if the recommendations are not approved. Without these services there is a risk that unpaid carers would be unable to continue in their caring role which in turn would lead to a greater reliance on statutory social care services.

5.6. Information Governance

- All personal data required by all parties (including NHSG, where appropriate) in respect to contractual arrangements will be managed within Aberdeen City Council's existing procedures and guidelines. Where commissioned services work between ACC and NHSG, input will be sought from the Data Protection Officers (DPOs) of all partners to assure best practice is assured. Contract templates are reviewed and approved by Aberdeen City Council's Legal Services annually and before any contract is entered into the signing process. There are no direct information governance implications arising from the recommendations other than what will be managed through contract monitoring once contract are agreed.



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5.7. Environmental Impacts

- The business case presented here will deliver care and support to vulnerable people. Whilst travel by car or public transport to provide care and support will have a negative impact on the environment, it is necessary for the services if they wish to fully carry out their statutory duties. The use of technology, such as eHealth, will be considered wherever face-to-face care and support is not required to balance the environmental impact. Any provider who submits a bid on a tender must respond to carbon reduction questions which are scored. All contracts will include clauses on carbon reduction and circular economy which are monitored through quarterly and annual contract monitoring along with business continuity and emergency response planning
- A full Environmental Impact Assessment (EIA) is not required for the direct or indirect implications of the recommendations of this report, as they do not fall within either Schedule 1 or Schedule 2 outlined in the Town and Country Planning (Environmental Impact Assessment) (Scotland) Regulations 2017.
- There is no direct environmental, net zero, and climate change impacts from the recommendations of this report. The recommendations relate to existing services rather than new or additional services. Where a service provider may change as a direct or indirect result of the recommendations of this report, any positive or negative climate change impacts will be captured through the ongoing contract monitoring.
- Commissioned services are key to the Partnership meeting its statutory climate change duties and the Commissioning team are collaborating closely with the ACHSCP Climate change team to develop and implement strategies to identify and reduce GHG emissions and other climate change impacts in support of the Partnership's net zero and climate change adaptation goals.

5.8. Sustainability

- The provision of social care services is key to the sustainable development of Aberdeen City Communities by providing the right care infrastructure for those with care needs. The commissioning of these services through both collaborative and competitive approaches ensures the best value for money and supporting organisational sustainability. While social and economic



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factors are weighted higher than environmental, considerable work is planned to progress the identification and reduction of climate and environmental impacts as highlighted under 5.7

- All contracted providers must adhere to the Fair Work First dimensions notably the Real Living Wage and providing staff with an effective voice. Additionally, all providers who submit a bid on a tender must respond to questions on community benefits, which are scored, where there is an expectation that providers demonstrate a positive impact on people, communities, and the environment. The potential for environmental impact is noted at 5.7, however the social benefits to in-person participation in social care settings is thought to outweigh this. Outcomes on sustainability will be monitored through quarterly and annual contract monitoring

6. Management of Risk

6.1. Identified risks(s)

- a) If the recommendations are not approved, there is a risk that denying both statutory and non-statutory services to vulnerable people will result in a high risk to safety and to life. The IJB has no or low tolerance for risks relating to patient/client safety and service quality.
- b) If the recommendations are not approved, there is a medium to high risk of reputational damage. The IJB will accept medium to high risks to reputation where the decision being proposed has significant benefits for the organisation's strategic priorities. Such decisions will be explained clearly and transparently to the public. In this case, the proposals in this report fit in with the organisation's strategic priorities so non-approval will require considerable work with providers, service users, their families, and the media
- c) If the recommendations are approved, there is a risk that contractual requirements are not met resulting in best value concerns. This is usually related to staff and staffing concerns. The IJB has medium to high tolerance for risks relating to service redesign or improvement where, as much risk as possible has been mitigated. By maintaining formal contractual arrangements and robust processes to monitor contracts with external organisations the IJB has assurance not only that it is getting best value but also that this expenditure is aligned to their strategic priorities and is reviewed regularly



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6.2. Link to risks on strategic or operational risk register:

These proposals are linked to **Risks 1 & 7** on the Strategic Risk Register

Risk 1: Description of Risk: Cause: The commissioning of services from third sector and independent providers (eg General Practice and other primary care services) requires all stakeholders to work collaboratively to meet the needs of local people.

- Event: Potential failure of commissioned services to continue to deliver on their contract
- Consequence: There is a gap between what is required to meet the needs of local people, and services that are available.
- Consequences: to the individual include not having the right level of care delivered locally, by suitably trained staff.
- Consequences: ability of other commissioned services to cope with the unexpected increased in demand.
- Consequences to the partnership includes an inability to meet people's needs for health and care and the additional financial burden of seeking that care in an alternative setting.

Risk 7: Description of Risk: Cause: The ongoing recruitment and retention of staff

- Event: Insufficient staff to provide patients/clients with services required
- Consequence: Potential loss of life and unmet health and social care needs, leading to severe reputational damage.

All risks associated with commissioned services, including risks 1 & 7, will be mitigated primarily through collaborative working and relationship management encouraging dialogue to meet challenges together

Neil Stephenson 9th August 2024