

PLYMOUTH CITY COUNCIL

Subject: Contract Award for the Procurement of Advocacy Services
Committee: Cabinet
Date: 11 November 2014
Cabinet Member: Councillor Tuffin
CMT Member: Carole Burgoyne (Strategic Director for People)
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Ref:

Key Decision: Yes
Part: 1

Purpose of the report:

This report summarises the recent commissioning and tender process for a re-modelled advocacy service, and makes a recommendation to award the contract to the winning provider.

The report recommends the awarding of the contract to the most economically advantageous and highest quality offer.

This service will provide high quality issue based advocacy that will encourage a culture of independence and support for people to express their own views, wishes, concerns, have their rights upheld, promote their health and wellbeing, and will safeguard vulnerable adults. It will support people to be empowered to make informed choices and decisions about their care and treatment and to take greater control over their lives

The service will meet PCC's statutory duties to commission advocacy services. The level of expenditure on these future services required a full competitive tender in accordance with the Council's Contract Standing Orders and this competitive procurement was run as a one stage process.

A separate private briefing paper is also submitted on the tender submission.

The Brilliant Co-operative Council Corporate Plan 2013/14 – 2016/17:

Caring Plymouth City Council

- **Prioritise Prevention:** By helping people secure their rights, represent their interests and thus promote independence and reduce health and social inequality
 - **Help People Take Control over their Lives and Communities:** By representing their interests and helping them obtain services they need; enable them to have choice, control and influence over how those services
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Implications for Medium Term Financial Plan and Resource Implications: Including finance, human, IT and land

In addition to all the benefits offered, the winning provider will offer financial savings. The costs and savings are detailed in the private briefing paper.

Other Implications: e.g. Child Poverty, Community Safety, Health and Safety and Risk Management:

Child Poverty: part of the service will provide advocacy support to children and young people with disabilities in transition into adult services, to fully involve them in decisions affecting their lives.

Equality and Diversity

An Equality Impact Assessment has been completed. No adverse impact was identified as a result of this however contract monitoring arrangements will continue to assess any impacts post contract award.

Recommendations and Reasons for recommended action:

That Cabinet awards the contract to the winning provider for a period of three years with the option to extend for a further three years in annual increments (Consideration of any contract extension would be subject to a future officer delegated authority decision).

The service will:

- Meet statutory duties to commission advocacy
- Raise aspiration by supporting people to be empowered, have self-esteem, and achieve economic well-being
- Help people secure their rights, represent their interests and thus promote independence and reduce health and social inequality

Alternative options considered and rejected:

The option of not awarding any contract was considered but disregarded due to both the benefits to vulnerable people of receiving advocacy services and also because there is a statutory requirement for local authorities to provide them.

Published work / information:

Equality Impact Assessment http://www.plymouth.gov.uk/eia_advocacy_services.pdf

Background papers:

None

Sign off:

Fin	PeopleF AC141 5 007	Leg	MS/2 1446	Mon Off	DVS/2 1446/ 17/10	HR		Assets		IT		Strat Proc	NA/SPU/375/C P/1014
Originating SMT Member Dave Simpkins													
Has the Cabinet Member(s) agreed the contents of the report? Yes													

I. BACKGROUND

Taking action to help people say what they want, secure their rights, represent their interests and obtain services they need, advocates and advocacy schemes work in partnership with the people they support and take their side.

Along with the current statutory requirements to deliver certain types of advocacy, the advent of the Care Act, which will come into effect on April 1st 2015, will introduce a new statutory duty for local authorities to provide advocacy services. The role of the Care Act advocate will be to support and represent individuals to facilitate their involvement in the key processes and interactions with the local authority. Initial projections are that there will be substantial demand for this service. Also, a recent Supreme Court ruling has extended the circumstances for when a person who lacks capacity under the Mental Capacity Act is subject to a deprivation of liberty (DoL), the effect of which has been an increase in demand for Independent Mental Capacity Advocacy/DoLs advocacy (another type of statutory advocacy).

2. CURRENT SITUATION

Currently there are eight different advocacy services in Plymouth, delivered by five different providers. These service contracts are mainly client group specific, which has resulted in a more 'service led' approach to advocacy provision, those with a need that do not fit into these categories may fall out of service provision, or those that may fit into more than one client group unsure where to go.

Included in this eight are the models of independent advocacy established in legislation:

Client group	Service Description	Provider
Carers	Representational advocacy service for older carers	SEAP
Learning Disability	Specialist Advocacy Services for people with Learning Disabilities including: <ul style="list-style-type: none">• Representational Advocacy• Citizen Advocacy• Independent Mental Health Advocacy	Plymouth Highbury Trust (PHT)
Mental Health	Representational advocacy service for people with mental health issues	Plymouth Guild
Older People	Representational advocacy service for older people	Age UK Plymouth
Generic	Independent Mental Capacity Advocacy (IMCA)/DOLS	PHT
Physical & Sensory Disability	Representational Advocacy service for people with physical and sensory disabilities and long term conditions	Plymouth Guild
Mental Health	Independent Mental Health Advocacy (IMHA)	PAGES
Generic	Independent Health Complaints Advocacy Plymouth (IHCAP)	SEAP

All existing current contracts run out on 31st March, 2015

3. NEW SERVICES

In light of the above the recommendations made following reviews and consultations as part of the commissioning process are to streamline and re-model services to create:

- Single triage and assessment process
- Single approach to quality and standards and consistency in service delivery
- A system of priority based on need rather than disability type/age
- Maximise an appropriate use of volunteers and peer advocates

- All paid advocates will have or be working towards achieving an advocacy qualification
- Provider(s) to adopt the Advocacy Quality Mark
- One contract combining and replacing all current contracts to deliver the above

4. PROCUREMENT PROCESS

A competitive procurement was run as a one stage process incorporating a Tender Questionnaire followed by a Tender evaluation.

The invitation to tender document was published electronically via the Devon Procurement Portal (www.devontenders.gov.uk) in accordance with the following timeline:

Activity	Date/Target Date
Dispatch of ITT	10/7/14
Return of ITT	2/9/14
Notification of successful Tenderer	24/11/14
Contract award	5/12/14
Estimated Service Commencement	1/4/15

The Tender Questionnaire (TQ)

Required Providers to submit a TQ. Each one was assessed and scores were used to select which Providers were to be shortlisted for the next stage of the procurement.

The following sections of the TQ contained mandatory questions, the responses to which were reviewed and treated as pass or fail criteria:

Professional and Business Standing
 Financial
 Insurance
 Data Protection
 Timescales

In addition the following sections of the TQ were evaluated and awarded a score.

Section	Weighting (%)
Data Protection Policy	6
Quality Management	8
Health & Safety Policy	7
Health & Safety	6
Equality & Diversity Policy	6
Equality & Diversity	5
Safeguarding Vulnerable People Policy	10
Safeguarding Vulnerable People	9
Disputes	5
Business Capability	32
Recent Contracts/References	6

These weightings and the scoring methodology for each section were published in the documentation.

A minimum of two references were required.

The overall threshold (minimum) score for this Tenderer Questionnaire was **70.4**

A total of 6 submissions were received. Of these, all 6 passed the threshold score for the TQ and so passed to the next stage of evaluation.

5. TENDER EVALUATION METHODOLOGY

The project evaluation weightings were agreed prior to despatch of each tender documentation and were published in the ITT:

Award Criteria	Weighting (%)	Sub Criteria (%)
Financial	30	Price
Technical	70	Introduction, Purpose, Service Description, Key Tasks, and Networks & Links
		Equality & Diversity and Service User Involvement
		Referral & Access to Service, Opening Times, Response Times, Delivery Location and Key Tasks
		Staff
		Implementation
		Co-operative Council and Social Value

The completed tenders were evaluated by a team of individuals / stakeholders with various skill sets from across the business, in order to ensure both transparency and robustness.

The tenders were evaluated to identify the extent to which each tenderer had the ability, experience, and capacity to deliver the service. The technical responses were evaluated to identify how well each tenderer would meet the service specification requirements. The commercial responses were evaluated on price offered.