

Item No.	Classification: Open	Date: 4 July 2014	Decision Taker: Cabinet Member for Adult Care, Arts and Culture
Report title:		Gateway 3 – Extension Approval: Contract extension and variation for home care services	
Ward(s) or groups affected:		All	
From:		Strategic Director of Children’s and Adults’ Services.	

RECOMMENDATIONS

1. That the cabinet member for Adult Care, Arts and Culture approves the contract extension of the home care demand led contract with Mi Homecare Ltd, for a period of one year from 1 August 2014 (with a six month break clause) to 31 July 2015.
2. That the cabinet member for Adult Care, Arts and Culture approves the contract extension of the home care demand led contract with London Care Ltd, for a period of one year from 1 August 2014 (with a six month break clause) to 31 July 2015.
3. That the cabinet member for Adult Care, Arts and Culture approves a variation to the contracts with London Care Ltd and Mi Homecare Ltd that includes payment by the council to the contractors to pay home care workers for their travel time.
4. That the cabinet member for Adult Care, Arts and Culture approves a variation to the contracts with London Care Ltd and Mi Homecare Ltd to include a requirement that providers offer all home care workers a guaranteed level of working hours each week as an alternative to zero hours contracts by the end of October 2014.
5. That the cabinet member for Adult Care, Arts and Culture notes that the estimated annual variation of the contract value for MiHomecare is £6.983m, making a total estimated contract value for the four years of this contract £15.992m and that the estimated annual variation of the contract value for London Care Ltd is £2.625m, making a total estimated contract value for the four years of this contract £7.758m

BACKGROUND INFORMATION

6. In January 2011 cabinet approved the award of home care service contracts as below

Contract	Supplier Name
Universal Contract 1	London Care
Universal Contract 2	Enara Community Care (now MiHomecare)

7. Under the strong leader powers, the leader of the council delegated to the cabinet member for health and adult social care approval of contract extensions.

The contract award report made provision for two single year (1 + 1) extensions at the end of the initial contract term subject to satisfactory performance and ongoing demand for services.

8. The services delivered under these contracts are subject to robust monitoring and review including regulatory compliance monitoring by the Care Quality Commissioning (CQC) and day to day monitoring of service quality and delivery by the Children's and Adults Quality and Contracting teams, which is also reviewed on a monthly basis.
9. In addition Cabinet receives annual reports which summarise the performance of these contracts which to date have met the council's requirements and the next performance report for the third contract year (June 2013 to July 2014) will be reported to cabinet later this year.
10. The council has developed a strong partnership with providers focused on working together to continually improve the quality and consistency of home care delivery. Both providers have worked with the council and wider stakeholders through a Task and Finish Group to develop a Vision and Values for Home Care Services and the Task and Finish Group made recommendations to Cabinet in relation to the feasibility of implementing the principles set out in the Unison Ethical Care Charter.
11. Cabinet agreed in November 2013 a commitment to implement the principles of the Ethical Care Charter and since then work has been ongoing with providers and this report sets out recommendations for a variation to existing contracts that will deliver further progress to fully implement the principles of the charter, in particular the following key commitments:
 - I. to pay home care workers for their travel time; and
 - II. to ensuring home care workers are offered a level of guaranteed hours of work as opposed to zero hours contracts, if they choose to.
12. This report recommends the extension of the current contracts for a 12 month period to ensure the Council continues to meet its statutory responsibilities and ensure:
 - I. continuity of care for existing service users,
 - II. allow time to seek Cabinet's agreement of a commissioning strategy; and
 - III. to allow sufficient time to deliver robust re-commissioning and procurement for new service arrangements.
13. A separate report due to be considered by Cabinet in July 2014 sets out the key aspects of the commissioning strategy and future approach to home care services consistent with *Better Care, Better Quality of Life* – the Council and CCG's Vision for Integration that was agreed by the Health and Wellbeing Board in March 2014.

KEY ISSUES FOR CONSIDERATION

Key Aspects of Proposed Variation

14. The gateway 2 report approved initial contracts for a period of 3 years up to 27 June 2014. The contract award made provision to extend for up to 2 years (1 + 1) at the end of the initial term of the contract subject to satisfaction with each

supplier's performance and demand for services and a short 1 month extension was agreed by the Strategic Director of Children's and Adults' services for the period 27 June to 31 July 2014 to allow all aspects of the extension and variation proposed within this report to be fully considered.

15. The variation proposed in this report are summarised as follows:
- An extension of the contract duration for a period of 12 months
 - A variation to introduce a contractual requirement for MiHomecare Ltd and London Care Ltd to pay home care workers for their travel time
 - A variation to introduce a contractual requirement for MiHomecare Ltd and London Care Ltd to offer home care workers a level of guaranteed hours as an alternative to zero hours contracts
16. As demand led contracts, the estimated contract value (for the full five years) set out in the gateway 2 cabinet report provided a potential contract value of up to £30.7 million for each contract. The actual level of spend for each contract for the first three years to July 2014 is set out below.
17. Since the contracts were awarded, with more people being supported to remain in their own homes in the community, use of home care services has continued to increase as the level of residential placements and nursing has decreased. In 2011-12 these contracts supported 783 people and by 31 March 2014 almost 880 people were being supported.
18. The spend in 2013-14 provides a reliable *estimate* of future activity on which to base the **estimated* value of the contract variations

Provider	Year	Spend
MiHomecare	2011-12	£2.058m
	2012-13	£3.076m
	2013-14	£3.873m
	Subtotal	2011-2014
Extension period	2014-15	£6.983m* estimated
London Care	2011-12	£1.498m
	2012-13	£1.979m
	2013-14	£1.656m
	Sub total	2011-2014
Extension period	2014-15	£2.625m* estimated

Mi homecare

19. The total value of the contract with Mi Homecare to July 2014 is £9.008m and the proposed one year extension and variation to pay travel time and offer home care worker a guaranteed level of working hours is estimated to be a further £6.983m

London care

20. The total value of the contract with London Care to June 2014 is £5.133m and the proposed one year extension and variation to pay travel time and offer home care worker a guaranteed level of working hours is estimated to be a further £2.625m

Reasons for Variation

21. Previous reports to cabinet in April 2013 and November 2013 clearly set out the potential benefits and improvements to service quality that could be achieved through valuing the home care workforce through improving their terms and conditions of employment. Full details are available in the background papers but in summary previous reports highlighted national evidence from research and best practice that illustrated:
 - Reductions in staff turnover leading to better continuity of care for users
 - Reduced provider recruitment costs
 - Improvements in the recruitment of a better skilled workforce able to support people with more complex needs
 - A more stable and valued workforce contributes to delivering more personalised and flexible user centred care
 - Broader cost benefits for Southwark's community arising from the fact that 85% of the home care workforce live in Southwark and are predominantly women.
22. The variations set out in this report are requested to ensure that home care workers are paid for their travel time between visits and that home care workers, if they choose, are offered a level guaranteed hours of employment in stead of zero hours contracts.
23. This report also seeks an extension, with associated variations set out above, to ensure continuity of service for existing users and to ensure the council can continue to meet its statutory obligations for future care needs.
24. A one year extension, with the contract variations as set out in paragraph 15 will enable cabinet to agree a commissioning strategy, a procurement plan to be developed and delivered and new contracting arrangements put in place by the end of the recommended extension period.
25. In order to protect the council's best interest, the award of the contract extensions will be subject to the agreement of the service providers to the inclusion of a six month break clause. The providers have indicated that they are agreeable to this amendment.

Future Proposals for this Service

26. A commissioning strategy setting out an approach that supports the delivery of a more integrated approach to home care services and their links with wider community support services will be presented to cabinet in July for approval. Underpinning this strategy will be the visions and values agreed by cabinet in November 2013 and the principles of an ethical care charter.

27. Subject to Cabinet's agreement of commissioning strategy Gateway 1 procurement strategy approval will be sought in the autumn to ensure the re-commissioning and award of new contracts is completed prior to the end of the extension period allowing for a smooth transition to the new arrangements.

Alternative Options Considered

28. The table below summarises the options considered.

Option considered	Issues identified
Option 1 - Single contract with one provider	Single contract would remove choice for both the council and service users, provide a degree of uncertainty for service users, as well as providing a monopoly provider situation. This could place the council at risk should quality for the remaining sole contract declines. This arrangement would also not be practical to put in place before the end of the current contract term.
Option 2 - A fully operated in house service	This arrangement would also not be practical to put in place before the end of the current contract term as the council does not currently have the infrastructure or expertise to deliver the size and scope of home care services required.
Option 3 - In house service managed by senior care workers employed by the council, but using agency home care staff	The council would employ staff to coordinate the home care service, while externally procuring staff to deliver home care on the ground (with the agencies continuing as registered providers) Again the council does not currently have the infrastructure to deliver this type of arrangement and it would also not be practical to put in place before the end of the current contract term.
Option 4 – Undertake a full procurement exercise	The council is currently developing a full procurement strategy for home care services, which will the practical delivery of which is not possible by the end of the current contract term.
Option 5 – Extend contracts without variation	The council has made a clear commitment to implement the principles of an ethical care charter. Extending the contracts on current terms and conditions and not considering the scope to vary the contracts to deliver the councils commitments' would be inconsistent with an agreed policy direction.
Option 6 Do nothing	This is not a realistic option as the council has a statutory duty to provide personal care for those with an assessed eligible need. Spot purchasing on the required scale would expose the council and vulnerable service users to risk as proper quality assurance mechanisms would not be possible to put into place. This option would also be inconsistent with an agreed policy direction

Identified risks for the extension

29. The table below summarises the main risks associated with the recommendations in this report and steps to mitigate these.

NO	Risk	Level	Mitigation
1.	Provider failure	Low	The two providers have been delivering the service in the borough for the past three years. They have also recently been subject to financial vetting by the council, and have been found to be financially viable organisations.
2.	Decline in service quality	Low	The two providers have been delivering the service in the borough for the past three years during which time there has been a steady improvement in quality. Alongside this the council has clear and rigorous mechanisms in place for monitoring service quality and contractual delivery and works closely with the Care Quality Commission who is responsible for regulatory matters.
3.	Insufficient time to develop the commissioning strategy and deliver the procurement of new contracting arrangements	Low	It is believed that one year will give the council sufficient time to deliver a full procurement and mobilisation in this area
4.	Possible risk of challenge due to the inclusion of additional requirements in the contracts	Low	<p>The variation is consistent with the Council's responsibility to achieve best value and the council has been working with the wider provider market to implement its commitment to an ethical approach to home care services to achieve better service quality and outcomes for service users.</p> <p>The remaining contract period to which these variations relate is short (ending on 31 July 2015, or earlier if the break clause is operated). All providers will have the opportunity through the re-tendering of home care services to demonstrate they can and are committed to delivering to the principles of the council's ethical charter</p>

Policy implications

30. These services are used by the council as a means to comply with its statutory duties under the NHS and Community Care legislation and FACS statutory guidance.

31. The new service model for home care will support the aims of the Southwark Council Plan "A Fairer Future for All" to create a fairer future for all by: protecting the most vulnerable; by looking after every penny as if it was our own; by working

with local people, communities and businesses to innovate, improve and transform public services. *Better Care, Better Quality of Life* – the Council and CCG’s Vision for Integration that supports the Better Care Fund agreement also recognises the vital role that home care plays in the development of a more integrated community based support model of health and social care services.

32. Home care is a vital part of community based support which enables the council to ensure older and disabled people are supported to live independent lives in the community and avoid unnecessary institutional care.
33. Both providers already pay staff at the London Living Wage and are committed to working with the council to improve the quality of home care services building on the work of the Task and Finish Group to deliver the Council’s Vision and Values for home care services agreed by Cabinet in November 2013.

Contract management and monitoring

34. Reports outlining the performance of the contracts in the first two contract years have been presented to Cabinet in 2012 and 2013 and the references to these two reports is contained in the background papers at the end of this report.
35. Both contracts continue to be closely monitored and reviewed each month by senior managers at the Senior Management Safeguarding and Quality Meeting.
36. Since the award of these contract the council has been working closely with both providers to improve services and it should be noted that both providers are now currently delivering far more hours than projected at the outset of these contracts and are well in excess of the minimum guaranteed hours.
37. Quality improvement work with providers has focused on their recruitment campaigns to ensure they have sufficient capacity to meet the council’s needs and that recruitment focuses on attracting and retaining skilled and well trained care worker. It should be noted that the implementation of LLW in August 2013 has supported this drive and staff turnover and retention rates are key improvement measures that will form part of the next annual performance report.
38. Overall both contracts have shown continued improvement over the first 3 years of delivery when judged against key measures. For example the number of safeguarding and service quality alerts have reduced over the first two years and are currently projected to comparable or slightly lower at the final outturn for the third year of the contract. Each provider’s performance will be included in the next performance report due to be considered by Cabinet in September.
39. MiHomecare continues to be compliant with Care Quality Commission requirements as per the last performance report.
40. London Care is currently in the process of registering the Southwark office with the Care Quality Commission. Whilst this is being done, the Southwark office is being operated as a satellite of the Wandsworth branch (which CQC is aware of).
41. The latest CQC report for London Care’s Wandsworth branch highlighted some areas for improvement and the council is working with the provider to ensure all concerns are addressed fully and the organisation is CQC compliant.

Community impact statement

42. All people receiving home care delivered through these contracts meet the Fairer Access to Care Services (FACS) criteria of critical and substantial needs. This means they are all likely to experience a degree of either physical or mental health disability in order to require support with their personal care or independent living and therefore would be considered disabled under the council's equality scheme.
43. The demographics of people who receive social care delivered by the council in Southwark can be summarised as follows:
- Of 4600 people who receive care, approximately 64% are older people, with the remainder being people with learning disabilities, mental health problems or physical disabilities.
 - Amongst the over 65's approximately 65% of these are women, which is linked to longer life expectancy for women and that needs for home care increase with much older people.
 - Approximately 37% of service users over 65 are from BME groups .This being disproportionately higher than the proportion of people over 65 years of age from BME communities in the borough)
 - Amongst the under 65's approximately 47% of these are women and approximately 56% are from BME groups.
44. In relation to the home care contracts that are the subject of this report, the two main providers between them support nearly 900 people providing 540,000 hours of care on an annual basis. The majority of the activity delivered by these contracts relate to the provision of personal care. Therefore disproportionately their recipients are older people and people with physical and sensory disabilities. Specialist children home care is delivered by separate contracts
45. The demographics of the workforce providing these home care services can be summarised as follows:
- At present, contracted providers of home care in Southwark employ around 475 home care workers.
 - Of these, approximately 82% are women and approximately 65.5% are from BME groups.
 - Providers have indicated that they do not have any staff who has declared a disability under the Disability Discrimination Act.
 - 84% (401) of homecare workers reside in Southwark
46. Any changes that impact on the quality of care delivered will affect all adult social care client groups, though it is noted that older people represent the largest group of service users. As set out in paragraph 21 the proposed extension and variation is expected to have a positive impact on the experience of users receiving home care services and overall service quality. Ensuring that home care workers have adequate time between visits and are paid for this time will reduce the pressure placed on them to 'get to their next visit' and will therefore support the delivery of more personalised user focused services by improving the quality of interaction between home care workers and service users. In addition, based on regional and national evidence it is expected that staff turnover will reduce and this in turn should improve continuity of care.

47. In addition to the expected improvements for service users the proposed extension and variation will have a positive impact on home care workers delivering services under the two main council contracts. It will therefore predominately benefit female workers from BME background, the majority of who live within Southwark.
48. As a part of the council's development of a commissioning strategy and procurement of new arrangements for home care services that deliver the council's ethical care charter further assessment of the equalities implications of the recommendations made in this report will be made.
49. Taking the factors identified here into account there are not thought to be any negative implications for the categorised groups covered by the council's equality scheme as a result of these contracts being extended.

Economic considerations

50. As part of the council's commitment to pay staff at a minimum the London Living Wage, these contracts currently and will continue to require the providers to pay all staff engaged on these contracts at least this level. The variation to ensure home care workers are paid for their travel time and offered a level of guaranteed hours will have further benefits given that the majority of these staff are local women and disproportionately from BME communities. As well as benefiting individuals among these groups it is expected there should be wider benefits for the local community and its local economies.
51. Both providers have been working closely with organisational development to ensure continued employment opportunities are promoted to Southwark residents. A training and development plan has been jointly developed to attract and develop staff in the care industry, including career pathways and opportunities to engage in apprenticeship schemes

Social considerations

52. The providers have demonstrated a good track record in addressing social considerations in both their service provision and employment practices.

Environmental considerations

53. At the time of contract award both providers demonstrate they have an acceptable green policy in relation to the delivery of homecare services and the council expect the majority of care workers use public transport to travel between service user visits. The providers are expected to use electronic mail and use a database for resources in order to eliminate the unnecessary use of paper.
54. The council has recently re assessed these procedures and protocols for both providers, and they were found to be acceptable.

Financial implications

55. The *estimated* universal homecare costs for 2014-15 for MiHome care and London Care Ltd is summarised below. The volume of work provided by Mi Homecare Ltd is larger than that for London Care Ltd, as throughout the contract term they have taken on a greater proportion of new referrals made by the

council than London Care Ltd. London Care Ltd also started from a significantly smaller operational base in the borough than Mi Homecare Ltd.

Provider	Estimated Care Costs (based on existing hourly rate before variation) £	Estimated Care Costs (following variation and extension) £	Estimated additional contract spend (variation cost of implementing payment for travel time) £
MiHome care	5,768,400	6,983,400	1,215,000
London Care	2,168,000	2,625,000	457,000
	7,936,400	9,608,400	1,672,000
Estimated Annual Universal Homecare Hours 2014-15			

56. The table above sets out estimated annual costs based on current contractual terms and the anticipated costs following the variation to include payment for travel time.
57. In relation to the variation that will require Mihomecare Ltd and London Care Ltd to offer all home care workers a guaranteed level of working hours each week as an alternative to zero hours contracts, based on negotiations with providers it is not anticipated that there will be any cost implications. Providers have indicated they know with a reasonable degree of certainty the level of service / hours that will be commissioned and can therefore confidently offer a level of guaranteed working hours to all home care workers based on this anticipated activity.
58. The contract annual value of £9.6m will be funded from agreed 2014-15 departmental budget. Future contractual commitments will be taken into consideration as part of annual budget planning process.
59. These contracts offer value for money for the council, as the hourly unit rate paid compares favourably similar specialist home care services in Southwark which incorporate the London living Wage, but do not as yet include payment for travel time, (Reablement, Intermediate care, night owls contracts). The contract extensions will also deliver the council's commitment to ongoing improvements in the quality of care being provided to some of the most vulnerable residents of the borough. The two providers are committed to paying the LLW as a means of ensuring that they can retain a skilled, motivated and caring work force with which to deliver these home care services and have worked closely with the council around continuing to make progress toward implementing the principles of an ethical care charter for home care services.

Legal Implications

60. Please see the legal concurrent below

Consultation

61. There have been a number of consultations that have helped to inform the approach to contract extensions outlined in this report has included Children's and Adults' Commissioners and Operations teams, Southwark's Senior Management Team
62. The views of the two providers were also sought and have informed the recommendations in this report.
63. The evolving role of home care has also been subject to consultation through a number of other forums that again have informed the councils approach to the extension of these contracts. This includes the Home Care Quality Improvement Working Group, Southwark and Lambeth Integrated Care Programme and the Older People Partnership Board.

Other implications or issues

64. None

SUPPLEMENTARY ADVICE FROM OTHER OFFICERS

Head of Procurement

65. This gateway three report is seeking approval to extend and vary the two existing homecare contracts for one year from August 2014 to July 2015. The report confirms that the current contracts have extension provision in the form of two one year extensions.
66. The report confirms there is an ongoing need for these services. Home care services are required in order for the council to fulfil its statutory obligation in relation to providing personal care for those assessed with an eligible need. These contract extensions will provide continuity of service whilst a longer term procurement strategy is agreed and delivered.
67. The report explains that the council has made a commitment regarding travel time and guarantee of minimum hours to staff (directly and indirectly) working to deliver these services. The report confirms that the Home care contracts were let prior to the council making this commitment.
68. The report confirms that overall both contracts have shown continuous improvement over the initial term of the contracts.
69. The report describes the monitoring and management arrangements that have been in place to date and confirms that these will continue. User reported experience will be a clear indicator of any quality improvements and these should be carefully reviewed going forward. It is also important that the homecare contractors provide ongoing evidence of the travel time payments and guaranteed hours commitment made to the homecare workforce to ensure the council's commitment is being supported.

Director of Legal Services

70. This report seeks approval for the extension and variations to the home care contracts with Mi Homecare Limited and London Care Limited as further detailed in paragraphs 1-4. At the time of awarding this contract, the leader of the council delegated decisions relating to the extension of these contracts to the cabinet member for health and adult social care.
71. The existing contracts include provision to allow extensions up until 27 June 2016, so the 1 year extensions which are proposed fall within the anticipated extension period. When extended, the contracts will be varied to include provisions relating to travel time payments and guaranteed levels of working hours. The cabinet member is advised that the council may include workforce conditions as part of its contract/procurement requirements, but should only do so when the inclusion of these requirements will achieve best value. This report details at paragraph 21 the potential benefits and improvements to service quality that should be achieved by including these requirements as part of the variation.
72. A possible risk of challenge to the inclusion of additional requirements to the contracts has been highlighted in this report, and therefore the cabinet member should satisfy herself that best value will be achieved by requiring travel time payments and a guaranteed level of working hours to the home care workers, so that any risk of challenge is mitigated.
73. The cabinet member will be aware of the Public Sector Equality Duty (PSED) in section 149 of the Equality Act 2010, and in making decisions the duty to have regard to the need to:
- (a) eliminate discrimination, harassment, victimisation or other prohibited conduct;
 - (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
 - (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
74. The relevant protected characteristics are age, disability, gender reassignment, pregnancy/maternity, race, religion/belief, sex, sexual orientation. This report sets out the considerations which have been given to the PSED at paragraphs 42-49 of the report which the cabinet member should consider when making these decisions.
75. Contract standing order 2.3 requires that no steps be taken to vary a contract unless the expenditure has been approved. Paragraph 57 confirms the financial implications of these extensions/variations.

Strategic Director of Finance and Corporate Services CAS14/102

76. The Strategic Director of Finance and Corporate Services notes the recommendations in this report for the extension and variation of two contracts

for an extra 12 months, removal of zero hours contracts, and payment of travel time between care visits.

77. The financial implications give details of the additional costs involved and confirm that the current budget is sufficient to pay for the contracts. However, as the contracts run into financial year 2015/16, these will be subject to budgets to be agreed by council assembly for 2015/16. The report notes that the contracts were awarded to support people to remain in their own homes for longer, which replaces the alternatives of residential placements and nursing. Home care is a vital part of community based support which enables the council to ensure older and disabled people are supported to live independent lives in the community and avoid unnecessary institutional care. On that basis it is likely the council would wish to continue to support budgets to pay for the demand led services as a means to comply with its statutory duties.

BACKGROUND PAPERS

Background Papers	Held At	Contact
Gateway 2: Contract Award Approval Home Care Services in Southwark	http://moderngov.southwark.gov.uk/documents/s15724/Report%20Home%20Care%20Contract%20Award%20Gateway%202.pdf	Rochelle Jamieson 020 7525 4720
Call in: Gateway 2: Contract Award Approval Home Care Services in Southwark	http://moderngov.southwark.gov.uk/documents/s15724/Report%20Home%20Care%20Contract%20Award%20Gateway%202.pdf	Rochelle Jamieson 020 7525 4720
Cabinet (special) Minutes of the Open session held on Tuesday 15 February 2011 (note this confirmed contract award)	http://moderngov.southwark.gov.uk/documents/g3760/Printed%20minutes%20Tuesday%2015-Feb-2011%2017.00%20Cabinet.pdf?T=1	Rochelle Jamieson 020 7525 4720
Home Care Monitoring Report (first 6 months)	http://moderngov.southwark.gov.uk/ieListDocuments.aspx?CId=302&MId=3823&Ver=4	Jonathan Lillistone 020 7525 2940
Home Care Annual Contract Performance Report (July 2011 to June 2012)	http://moderngov.southwark.gov.uk/mgConvert2PDF.aspx?ID=28775&ISATT=1#search=%22home%20care%22	Rochelle Jamieson 020 7525 4720
Home Care Annual Contract Performance Report (July 2012 to June 2013)	http://moderngov.southwark.gov.uk/mgConvert2PDF.aspx?ID=40357&ISATT=1#search=%22home%20care%22	Rochelle Jamieson 020 7525 4720
Developing a quality strategy and best practice principles for home care services: initial review of UNISON's ethical care charter	http://moderngov.southwark.gov.uk/ieListDocuments.aspx?CId=302&MID=4253#A127142	Jonathan Lillistone 020 7525 2940

Background Papers	Held At	Contact
Gateway 3: Variation Approval. Variation of Home Care Contracts to deliver quality improvements associated with the implementation of the payment of London Living Wage	http://modern.gov.southwark.gov.uk/mgIssueHistoryHome.aspx?IId=21235&optionId=0	Jonathan Lillistone 020 7525 2940

APPENDICES

No	Title
None	None

AUDIT TRAIL

Lead Officer	Jim Crook – Interim Strategic Director of Children’s and Adults’ Services	
Report Author	Jonathan Lillistone – Head of Commissioning, Children’s Families and Adults	
Version	Final	
Dated	4 July 14	
Key Decision?	Yes	
CONSULTATION WITH OTHER OFFICERS / DIRECTORATES / CABINET MEMBER		
Officer Title	Comments Sought	Comments included
Head of Procurement	Yes	Yes
Director of Legal Services	Yes	Yes
Strategic Director of Finance and Corporate Services	Yes	Yes
Contract Review Boards		
Departmental Contract Review Board	Yes	Yes
Corporate Contract Review Board	Yes	Yes
Cabinet Member	Yes	Yes
Date final report sent to Constitutional Team		9 July 2014