

West Sussex County Council
East Sussex County Council
Surrey County Council
Kent County Council
Brighton & Hove City Council
Medway Council
Essex County Council

BUSINESS CASE AND PROCUREMENT STRATEGY FOR A DYNAMIC PURCHASING SYSTEM AND A STRATEGIC CONTRACT MANAGEMENT FUNCTION

Executive Summary

To be completed

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- 1. Purpose (What has been agreed and what this business case is designed to illustrate).
- 1.1. Following the completion of stage 1 of the South East Together Project (SET) (see background) an options paper was presented to the Project Board on 22nd January 2016. This options paper recommended a way forward for a regional approach to the method of procuring placements with independent providers in the market sectors of Special Education Needs, Fostercare and Social Care for Looked After Children. The options paper narrowed down to a preferred solution and introduced further options for Contract Management, Quality Assurance and IT solutions.
- 1.2. Due to the breadth of potential partners and range of current practices in these areas, the options paper only sought to provide an overview of the construct of the preferred solution and identify the benefits which could be realised but not the full and exact scale.
- 1.3. In order to test the preferred solution and evidence it's benefits to each partner, it was recommended that partner authorities confirm their participation in the development of a full and detailed business case which outlined exactly how the preferred solution would operate, the cost to each authority and individual return on investment.
- 1.4. The principle advantages and reasons for working together have been agreed by all remaining partners and two additional partners who joined the group in April 2016, and form the basis for developing the solutions described herein.
 - Providers have an expectation that local authorities will work together to deliver a common way of working for making referrals to independent providers , monitoring placements and quality of service and managing overarching contract arrangements.
 - > The revised National Contracts should be embedded consistently across the region, and nationally.
 - > The Outcomes Framework and Measurement Approach developed in phase 1 of the SET project should be embedded consistently across the region.
 - Children, Parents and Carers expect a good standard of service/care regardless of geography and demography.
 - All partners face similar pressures of doing more with less.

Note: The BC tries to address the different positions that each partner is currently in as the benefits and ROI will be different depending on the current arrangements and purchasing practices in place for each of the services. For example spot purchasing vs block contracts vs frameworks vs DPS.

1.5. The Business Case also recommends the responsible authority (or collaboration of authorities) for each element of the solution; this includes recommending that West Sussex County Council (WSCC) is the Lead

Contracting Authority for the purposes of procuring, establishing and providing the overarching management the DPS across all services.

1.6. Finally, but most importantly, the business cases priority is to provide Councils and commissioners with a strategic procurement solution with which children and young people with SEN, and LAC needing care or fostering can achieve their full potential through the right interventions at the right time, with a capable market of providers. The success of these solutions will be measured by more young people feeling safe, secure, in further education, training, apprenticeships or work, feeling that their contribution to society matters and is valued.

2. **Background**

- 2.1. The SET project was established by WSCC in April 2015 following discussions with the Department for Education (DfE) and a successful application to the DfE's Children's Social Care Innovation Programme to look at the possibilities of developing a regional (and potentially a blue-print for a national) DPS.
- 2.2. WSCC was the first Local Authority to introduce a DPS for education/social care type services (in 2011/12) and this is now established within WSCC and Kent County Council (Kent CC) as the prime mechanism for commissioning SEN services.
- 2.3. The current WSCC DPS is held up as a model of good practice and enjoys the full support of the National Association of Non-maintained and Independent Special Schools (NASS), a highly regarded and influential body with strong links to the DfE and central government policy advisors. In an unprecedentedly difficult financial context, WSCC has not only been able to retain services for children, but improve outcomes, develop healthier relationships with providers and increase value for money.
- 2.4. This led to an approach by representatives from the DfE Innovation Programme to WSCC encouraging them to consider forming a regional DPS that would extend its remit to include social care placements. This resulted in the development of the SET project with regional partners from Surrey, East Sussex, Kent, Brighton and Hove City Council and the South London SEN Commissioning Partnership. Each expressed a genuine, in-principle, interest in participating in the project and a commitment to working towards a regional model.
- 2.5. WSCC submitted a bid to the DfE for funding which it could use to create staff capacity to allow the partners to explore, in greater detail, the option for developing a regional DPS. The bid was successful and a sum of £349,839 was awarded to WSCC to initiate a programme of work between the periods 1 April 2015 31 March 2016.
- 2.6. The programme of work delivered a number of outputs:

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- Reviewed and established new national contract schedules and terms and conditions.
- Developed with New Economics Foundation (NEF) a Common Outcomes Framework and Measurement Approach aimed at improving the services provided and the outcomes achieved for individual children by facilitating an outcomes-based commissioning model.
- Spend and market analysis undertaken by Cordis Bright, procurement practice appraisal undertaken by the Project Team.
- 2.7. The project has now moved into phase 2, the development and approval of the overarching business case, and includes the following partners:
 - Brighton & Hove City Council
 - East Sussex County Council
 - Essex County Council*
 - Kent County Council
 - Medway Council*
 - Surrey County Council
 - West Sussex County Council

The SL SEN Commissioning Partnership exited the project at the end of phase 1 to procure a DPS on behalf of its members for INMSS only.

3. Why Do This Now?

The Regulatory Need

- 3.1. The partnering Authorities will need to establish a compliant, commercially intelligent, outcome based purchasing model. The options appraisal recommended the establishment of a regional Dynamic Purchasing System.
- 3.2. In February 2015, the Public Contract Regulations 2015 were passed into UK law. These regulations govern all public procurement, and most significantly introduced a regulatory framework for Care Wellbeing and Education services known as the "Light Touch Regime" where previously these services were known as "part B" and essentially exempt from the regulations.
- 3.3. Part B services such as SEN, Foster care and Residential Care were not previously fully regulated in respect of procurement regulations and whilst the Local Authorities statutory best value duty applied, compliant procurement and purchasing was not necessarily required.
- 3.4. The Public Contract Regulations 2015 now mean that spot purchasing, non-compliant frameworks, and approved supplier lists will not be

^{*} Essex and Medway Councils were not part of Phase 1 of the South East Together project but have since expressed an interest in progressing with being part of a DPS and / or Contract Management function subject to business case approval and have agreed to provide information and support to the development of this business case.

acceptable forms of procurement for services above specified financial thresholds.

- 3.5. The Children and Families Act 2014 replaces the Statements of Special Education Needs which were primarily "input" driven to an outcomes based Education, Health and Care Plan (EHCP). The SET project has coproduced with young people, parents and providers of services the Common Outcomes Framework to be embedded in any procurement. This will require Council's working with providers to be more innovative and open in the way in which services are created and delivered.
- 3.6. In addition, the following legislation and regulatory requirements support the need to secure high quality placements for children and young people.

| Legislation/regulation | Relevance | What this means in practice |
|---|--|--|
| Section 22G of the Children Act 1989 | Sufficiency duty | Requirement for local authorities to ensure there are enough placements available locally to meet the needs of children and young people. |
| Ofsted inspections and regulation of children's homes, special schools, fostering agencies and parent and child residential assessment centres. | Regulatory and inspection framework | Clear standards for delivery of service for placement providers. Local authority specifications for placements will use the national regulations as a key point of reference. Ofsted inspections of individual providers are used as part of performance management by placing authorities. |
| Southwark Judgement 2009 | Duty to take vulnerable young people aged 16+ into the care of the local authority | Housing and Children's Social Care must assess vulnerable homeless young people to ensure they are offered the most appropriate service to meet their needs. If they are assessed as vulnerable they will be accommodated – the local authority should have placements available to meet need. |
| Children and Families Act 2014 | Duty to support Staying Put placements | Introduced a legal duty for local authorities to support young people "staying put" with their former foster carer after the age of 18, as long as the local authority decides this is in the best interest of the young person. |
| Children and Families Act 2014 | Duty to jointly work with key partners in assessment and planning | Education, health and social care professionals should work together to assess and make a plan for children and young people with a disability or special educational needs, which can be in place until the age of 25. |
| Children Act 1989, updated | Duty to support staying put | Local authorities must consider a |

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| January 2015 (planning transition to adulthood for care leavers volume 3) Children (Leaving Care) Act 2000 | placements | more graduated transition to adulthood for young people in care. |
|---|---|--|
| Adoption and Children Act 2002/Special Guardianship Regulations 2005 | Provides the legal framework for Special Guardianship Orders for children in care | The local authority has greater choice over permanence options for children in care if adoption is not the plan, as an alternative to long term care. This has an impact if the child is in an external foster placement and requires negotiation with the fostering agency. |

The Needs of Children and Young People

- 3.7. Children and Young People need to feel safe and secure and have the support and opportunities to maximise their potential for growth and ease their transition into adulthood. They should be able to engage with their local communities and contribute to society.
- 3.8. In Foster care and Residential Care for Looked after Children, permanency of placement is a strong building block for achieving quality outcomes. Therefore identifying the right provider is important as is ensuring the market has the environment to work with authorities to create new approaches to provision or increasing capacity based on transparency of information relating to referrals made.
- 3.9. Good quality placements are needed in all cases, children, young people, parents and carers want to be involved in the outcomes identified for them and contribute to their Care and EHC plans. They also want to feel that the organisations they work with involve them in the production of services.
- 3.10. Whilst a procurement route is only a tool to select a placement, the strategy for selecting provider and placement is key to meeting the child's needs without retrospective intervention or more costly solutions later on. Embedding the Common Outcomes Framework with the supply chain and within individual placement agreements (IPA) as well as a standardised referral process which prioritises the child's needs is seen as critical to this procurement and business case.

The Needs of the Market

- 3.11. Understanding the historic approach and the positive and negative effects Councils actions have had on the market was an important first step in developing a solution which would be acceptable to all stakeholders.
- 3.12. The Nationwide Association of Fostering Providers (NAFP), Independent Children's Home Association (ICHA) and the National Association of Non-

Maintained and Independent Schools Special Schools (NASS) undertook a survey in 2012, exploring experiences among their members of Local Government Procurement.

- 3.13. This looked to measure and report on the amount of time and cost providers incurred when responding to referrals or undertaking a procurement exercise. The main findings describe:
 - → 43% of providers have spent more than one month of staff time on procurement activity.
 - One provider estimated staff cost on procurement equivalent to 365 days.
 - Only 9% of providers feel that procurement reduces the number of placements they receive.
 - ➤ 45% of providers felt that procurement increases the number of placements they receive.
- 3.14. The report also highlight the positive and negative impacts of local authorities procurement practices:
 - → (+)Better relationships with Local Authorities
 - (+)Increased understanding of Local Authority partners and their needs
 - (+)Better understanding of contractual documentation
 - (+)Greater transparency in costs and processes
 - > (-)Driving down costs below a level where high quality services cannot be sustained and organisations are under threat
 - (-)The time and effort spent on paper-based activities rather than on direct work with children
 - > (-)Increased costs through increased staff time spent on activity
 - (-)Emphasis on price rather than quality of service provided
 - (-)Duplication of effort on activities which are similar but not identical
 - (-)Decreasing contact with frontline professionals in Local Authorities as part of the referral and placement process.
 - (+)Feeling as if an open and honest relationship had been established between provider and placing authority
 - > (+)Meeting more regularly with Local Authorities
 - > (+)Satisfaction in being able to provide a service which the Local Authority had been unable to provide
 - (+)Good communication between both parties particularly in respect of the needs of the child
 - (+)Access to high quality information about the needs of the child and the service required
 - > (-)Lack of face-to-face contact with commissioners
 - (-)Lack of information or poor quality information provided by the Local Authority
 - > (-)Receiving every single referral from the Local Authority even if these are clearly not appropriate to the service

- > (-)Lack of feedback about the outcomes of tenders
- > (-)Providers signing up to framework agreements which are not honoured by the Local Authority e.g. on fees
- 3.15. Finally, respondents were asked to note what they thought Local Authorities could do to make the procurement process easier for providers and more effective in meeting the needs for children and young people. The responses are as follows:
 - Create a national procurement framework that could be followed by all Local Authorities. This would reduce paperwork for providers who work with multiple authorities.
 - Be open and transparent about the process and assessment criteria to be used.
 - Build and maintain relationships with providers this enables us to better understand your needs and ensure that we meet the needs of the children and young people that you place with us.
 - Try to develop the market, rather than control it, by focusing on issues such as innovation and price flexibility rather than price fixing.
 - Simplify and reduce the amount of information asked for.
 - Develop two tier processes with minimal information provided at stage 1. Providers who meet the criteria for selection can then be asked to provide more detail at stage 2. This would ensure that providers who are unsuccessful have not had to invest the same amount as time as in a single stage process.
 - Create more opportunities to meet with providers on a regular basis. This helps develop trusting relationships. Involve in-house providers in these events to create a "level playing field".
- 3.16. Throughout the SET project and whilst developing this business case, partners have looked to address these areas, provide efficiencies for both sides and foster and maintain a good working relationship with the industry.

The Need of Local Authorities

- 3.17. There is a clear need for Councils to purchase placements from independent sector providers. The number of independent placements made over the past 3+ years has at least remained stable and in some categories increased.
- 3.18. There are general quality and sufficiency issues in the current provider market, particularly affecting children's residential services where the changes to the national regulations and Ofsted inspection framework have proved to be a challenge. Demand in fostering has shown in some areas that in the push to meet capacity the knock on effect is a negative impact on the ability to make placements available for complex teenagers, thus pushing complex teenagers into residential placements.
- 3.19. The SET Partner authorities across the country are experiencing a number of competing challenges within all three services. Demand is increasing,

particularly in addressing more complex needs for children and young people and capacity in some parts of the market is reducing or has reached critical mass. There is also less money available to cope with demand, in some parts of the country and this has meant changes in eligibility threshold for services being provided and therefore a reduction in the number of children or young people accessing the care they may have previously received.

- 3.20. Two significant pieces of legislation have also been introduced; see 3.1-3.4 above, which create an almost contradictory environment for making placements.
- 3.21. It has become increasingly clear that in some geographical areas and service sectors, capability and capacity within the supply market is decreasing. There is a suggestion that some small providers are not benefitting from a relational approach from Councils in delivering to outcomes or developing their business to meet needs. Larger organisations are becoming dominant in some services, through acquisitions or remote ownership, and leverage at Council level is reduced. The SET project has so far demonstrated that influence on a regional level can be more effectively gained by working together.
- 3.22. Financial pressures on Councils also means there is more focus on the need to reduce costs and to evidence that value for money is being achieved. It is widely accepted that spot purchasing or other inefficient procurement methods are less likely to be able to demonstrate that they have shown economy, efficiency, effectiveness and equity; the principles of Value for Money.
- 3.23. Table 1 shows the scale of spend and placements across the SET partnership. These figures have been provided by the partnering organisation but have not been subject to any robust qualification process. It should therefore be noted that there are recognised differences in the recording methods in each Authority and whilst the figures provide an indication of the value of the market, there may be some adjustments required at a later for those partners adopting the regional DPS.

What is a Dynamic Purchasing System (DPS)?

- 4. Dynamic Purchasing Systems (DPS) are electronic systems used for the purchase of commonly used goods, services or works.
- 4.1. As a procurement tool, they have aspects that are similar to a framework agreement, except that during their lifespans, any supplier may, if they meet the published criteria, join the system and submit a tender. However it has its own specific set of requirements. It is the most effective, compliant, way of working with and across a whole market sector.
- 4.2. The use of a DPS is regulated by the Public Contracts Regulations 2015 ("**PCR 2015**") (Regulation 34). It should be established using a restricted "two stage" tendering procedure and run through an electronic process, including competition of individual requirements.

- 4.3. A Contracting Authority is also able to set up a DPS on behalf of a number of other Authorities, as long as the participating authorities are identified in advance and the categories of goods, works or services are included in the requirement. Different categories of goods, works or services can be included in the same DPS by being divided into "Categories".
- 4.4. The Contracting Authority cannot impose a limit on the number of suppliers that may join a DPS, but may set a qualifying threshold which suppliers must meet before being granted a place on the DPS and then be able to bid for a specific contract.
- 4.5. A DPS can therefore act as a 'revolving door' for the Council. Suppliers are able to join the system, but may also have to leave if they fail to maintain the minimum quality standards required. This ensures that only 'accredited' suppliers are validated to tender through the DPS at any one time, generating a dynamically 'approved list'.
- 4.6. The services to be purchased by the local authorities are deemed to be health, social and related services (Schedule 3 - Social and Other Specific Services) for the purposes of the PCR 2015 Regulations and, as the value of the services will exceed the relevant EU threshold of €750,000 (£589,148), the "light touch regime" set out in Chapter 3 Section 7 of the PCR 2015 will apply for the purpose of procuring the services. Under the light touch regime, contracting authorities are able to determine the procedures that are to be applied in connection with the award of contracts subject to the light touch regime, provided that the procedures are at least sufficient to ensure compliance with the principles of transparency and equal treatment. A contracting authority may apply procedures which correspond (with or without variations) to procedures, techniques or other features provided for in Chapter 2 of the PCR 2015 (such as the establishment and use of a DPS under Regulation 34), as well as procedures which do not. A contracting authority therefore has significant flexibility over the type of process that can be used to procure these services. There are also no specific procedural rules in PCR 2015 that cover the awarding of call-off contracts from a pseudo-DPS used for services covered by the light touch regime, and again there is significant therefore flexibility availability to contracting authorities in awarding such call-off contracts. This will be useful here, where for certain categories of services, an element of parent choice may be required at the call-off stage.
- 4.7. As such, the partners are likely to want to use certain features of the DPS as detailed in Regulation 34 of the PCR 2015 but will want to make certain variations to the processes and procedures to reflect the fact that this will be a pseudo DPS for light touch services.
- 4.8. Regulation 59 of the PCR 2015 allows an authority to not have to request documents it already holds unless there has been a substantive change (or documents have expired) which would affect a provider's qualification onto the

DPS. (Note: As procurement, lead WSCC would need to agree a system for verifying this on behalf of other partners).

- 4.9. It has been suggested that to make things easier for the market that existing providers could be passported to a new DPS without a full application being completed. This has been considered but does not seem to be viable or in, the case of trying to introduce new ways of working, desirable for the following reasons:
 - The lead contracting authority would not be able to rely on information held by another authority.
 - > Just "passporting" lead contracting authority providers may be perceived as favourable treatment and would not meet the requirements of equal treatment under the PCR 2015.
 - The introduction of new requirements under the PCRs 2015 will require reassessment in various areas, so the benefit of a reduced application would be fairly minimal.
 - > It is important that <u>all</u> providers are assessed on their ability to deliver services aligned with the new outcomes framework and performance measurement approach.
- 4.10. The traditional framework of commissioning services had a restricted supply base and reduced the negotiating leverage of authorities. Dynamic purchasing allows for an open market so more suppliers could participate, including more niche and new providers that previously found more complex contracting arrangements restrictive.
- 4.11. WSCC established a DPS for SEN in 2012. Over the 4 year+ period the DPS has shown itself to be a more effective purchasing tool than previous models of spot-purchasing for the following reasons:
 - It has allowed the Council more control over providers, cost and outcomes. There is complete visibility over the procurement process, with a full audit trail.
 - It generates greater competition and as a result reduces prices. The DPS provides a level playing field where all bids are shortlisted against agreed criteria.
 - It removes reliance on spot purchasing and inconsistent negotiation. Providers are treated equally and value for money is established through the embedded procedure for competition.
 - It helps improve quality. WSCC specifies the Ofsted and credit ratings it requires from its providers before they are allowed access to system. This helped raised quality and consistency in the service, one of the crucial elements of working to improve outcomes across the board. Additionally, the potential to suspend under-performing services from the DPS has introduced a willingness amongst providers to work constructively with the Council to address matters of concern and provides a more effective early warning system to the Council.

- Parents are provided with a transparent choice. They can select their preference from the top shortlisted bidders.
- Providers are offered more opportunities to bid and the costs of procurement and bidding are effectively reduced.
- The system provides more options to consider for an individual child's placement.
- 4.12. The West Sussex DPS was established under the old Part B regime, and in effect works as an open framework rather than a DPS as set out in the new regulations. The DPS being proposed now uses the experience of the current way of working and takes advantage of the benefits within the new requirements of a DPS, particularly around electronic operations and efficient supplier management.

5. **Benefits and Objectives**

- 5.1. A well run DPS should allow more bespoke choice for the customer and enable the customer's requirements to be broadcasted to a greater number of, accredited suppliers operating on an open footing. The commercial aspects of placements should be established with a view to gaining the best possible value for money for each placement.
- 5.2. It is important to view the system as a tool to drive quality rather than purely attract savings at the outset; savings could be achieved as part of this process but it is very much dependent on the approach the partners wish to take. The business case makes recommendations devised to most effectively drive out cost and establish the best value for each referral.
- 5.3. Providing the right packages with clearly defined and expected outcomes will be effective in driving down cost if coupled with monitoring arrangements; the DPS should be seen as a tool for establishing the right placement at the right price at the right time.
- 5.4. The "State of the Nation" report 2016 by SENDirect suggests that "when providing services and support for a disabled child, a micro-commissioning approach is more practical than block contracts for ensuring that need is met".
- 5.5. It should be particularly noted at this point that the opportunity for savings will be different for each partner. Immediate savings are more likely to be achieved for authorities with less mature purchasing arrangements, for example those currently procuring only on a spot basis only or those with arrangements which were established a number of years ago.
- 5.6. There are a number of key advantages of procuring services through a DPS:
 - Potential cost savings. Dynamic purchasing creates a level playing field where even the smallest local providers can submit bids. This high level of competition has the potential to drive down prices and reduce local authority spend. The open nature of the DPS allows

- local authorities to address competitiveness and capacity without having to restart costly procurement exercises.
- Quality control. Suppliers must first be 'accredited' against a set of quality criteria dictated by the partners before being granted entry to the DPS. This can ensure that only high quality suppliers, aligned to outcomes framework, with strong financial checks, are permitted to submit bids.
- Outcome based. Service outcomes can be specified by the partners when procuring through the DPS. In the case of a placement, providers would have to detail how and when they would deliver the desired outcomes for the child or young person. All subjective responses would be assessed by the Council. The Common Outcomes Framework has been established for this very purpose.
- Transparency. The partners would have complete visibility over the end-to-end process of procuring its services, a full transparent audit trail. The open, transparent nature of a DPS can also build trust and certainty for suppliers.
- Increased flexibility. Unlike a Framework, a DPS can respond quickly to sudden demand or supply changes in the market, e.g. a school or home closing or losing the required Ofsted rating.
- Individual Placement Agreements can be added, issued, and awarded faster, reducing risk and decreasing uncertainty for the partners. Additionally, Contracts at the point of application and acceptance can also be completed electronically and efficiently.
- Value for money. With the DPS ranking bids in terms of both cost and quality, the relevant partner is able to demonstrate that all services procured represent maximum value for money.
- Admin consolidation. The electronic, automated nature of a DPS means that suppliers can tender without having to invest hours of time completing forms; it's easier and less time-consuming for them to bid. Invoices could also be electronically consolidated onto a managed DPS, saving officer hours.
- Straightforward implementation. The PCR 2015 has simplified the way a DPS can be implemented. There are fewer advertising requirements; only the DPS itself needs to be advertised within the Office Journal of the European Union (OJEU) and not subsequent refreshes.
- The ending of the practice (now non-compliant with legislation) of spot purchasing placements. This would also be compliant with PCRs 2015 and the partners Best Value Duty.
- No time limit. A DPS can remain 'open' to new suppliers at all times. They have no set time limits regarding how long they can run for, unlike a Framework. A "period of validity" must be stated in the original OJEU notice and the partners will need to make a decision on this balancing the fact that a longer-running DPS will reduce the need to re-compete these services, but if it is too long the DPS may become obsolete if the partners' circumstances or market changes. The PCR 2015 indicates that the period stated in the notice can be

later amended (extended, shortened, terminated) subject to a relevant notification being made and any changes to the period of validity complying with relevant EU Treaty principles. This therefore, provides a useful flexibility should circumstances change.

- SME Access. DPS is the most effective, <u>compliant</u> way of engaging with SMEs, VCSOs etc.
- Multiple Services, one application. Providers may be allowed to bid once to offer more than one category of services on a DPS, reducing evaluation and bidding time and costs for all parties.

5.7. There are, however, drawbacks and possible risks to a DPS:

- Supplier disengagement. For the DPS to work effectively suppliers
 must be engaged to participate. If only a handful opt to join (or are
 accepted onto) the system, its ability to reduce spend and improve
 quality standards is diminished. A critical mass of accredited
 suppliers is therefore required.
- Entirely electronic. The DPS is entirely electronic and commissioners may therefore need to work with their market to ensure it is able to respond. However providers currently working through a variety of paper and electronic methods will now be working through just one.
- Cultural change. The transition away from spot purchase, block contracts or a traditional Framework to a DPS may require a culture shift. Adequate training and engagement would also need to be provided to operational teams' staff of the partners using the DPS to evaluate subjective outcome based tender responses and embed the importance of transparency and consistency to maintain a healthy market.
- Just a system. The DPS will not revolutionise the local market and guarantee improvement; it would not be the panacea to all ills. It would be a new, better way for accredited suppliers to approach the partners for work, and allow the partners a platform upon which to develop market capacity and capability.
- Unlimited time. The unlimited expiry of a DPS may in time lead to a system which is too big, or not in keeping with market trends. This could affect competitiveness and value for money. Ongoing contract and market management will help avoid this, as well as an effective "period of validity".
- Publication of Contracts. There is now a requirement that at a
 minimum all contract awards made under a DPS must be published
 once a quarter, these may be grouped. The transparency
 requirements of the PCR 2015 also require publication of the same
 on Contracts Finder. An electronic transparent process will make this
 easier to collate the necessary information and the electronic
 tendering and referral tool recommended here facilitates this
 automatically.
- No savings guarantee. A fall in spend is not a certainty through the DPS; the market may not respond to the DPS as forecast. The

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- commercial approach described in the solution below is designed to maximise value and possible savings for all partners.
- External factors. Further legislation and market activity around consolidation or acquisition will not be addressed by a DPS, but the partnership approach combined with a procurement tool open to the entire market makes it easier for us to manage these impacts, and in some instances may allow us to influence them.
- 5.8. The above are related to a DPS regardless of the number partners who implement it. There are further benefits and arguments to support a collaborative approach to establishing a DPS, one which could lead to common standards and best practice being established at commissioning, placement and provider level. These are:
 - Contract Monitoring Information available to all.
 - Consistency in terms, outcomes and standards.
 - Improved intelligence regarding capacity in the market.
 - Reduced competition across borders which can distort value for money achieved by individual partners.
 - Benchmarking- quality and cost, outcomes learning.
 - Reduced time and cost for suppliers at procurement, referral and contract monitoring stages.
 - Information sharing and an ongoing partnership relationship can be developed electronically and more efficiently.
 - Early warning across multiple partners of market challenges or supplier issues.
 - Reduced time and cost for authorities (including Contracting Authorities) at procurement, contract management and quality assurance levels.
 - It is recommended that each authority takes responsibility on behalf of the partnership for provider inspections in their respective geographic boundary a huge efficiency and cost saving for both the local authority and provider.
 - Leverage regionally and nationally with providers and with DfE, OFSTED, NASS, ICHA and NAFP.
 - The valuable partnership and collaborative working that has formed across the region is maintained longer term.

6. **Engagement**

6.1. The business case acknowledges that parents/ carers, children and young people should have a greater influence over the way in which services are delivered which could reduce incidences of appeals and tribunal challenge to the Councils. It is intended that various stakeholders are consulted over the final design for the DPS, referral process and award criteria. Market representative bodies, who have already given feedback on the future of procuring and placing services, will be consulted further and market engagement will be undertaken to ensure current and new providers are

involved and attracted to the new arrangements. This will take place in late October to mid December 2016 .

- 6.2. Extensive engagement with the supply market across the region will be undertaken, to ensure providers are both involved in and understand the approach being adopted and can easily move to the new ways of working contained in this paper.
- 6.3. The procurement phase will also allow for the views and voice of children and young people to be included. It is proposed that a model answer is designed by children/young people to be used in the qualification of providers. As detailed further the scores for this element will be weighted and included in all ongoing placements, further embedding a coproduction, outcomes based ethos in referrals.
- 6.4. The referral process has been designed to incorporate appropriate parent choice.
- 6.5. A high level timetable related to the business case recommendations can be found at Appendix A. *Note: this is dependent on partnering Authority approval timelines.*

7. The proposed solution.

- 7.1. This business case recommends that WSCC act as lead Contracting Authority on behalf of the SET partners for procuring, establishing and managing a DPS for the placement of SEN, Fostercare and Residential Care for Looked after Children in the independent sector. A roles and responsibilities table is included at Appendix B.
- 7.2. Each of the three distinct services will be divided into "Categories" and each of the partner can choose which Categories they wish to use. There is no requirement to commit to all Categories.
- 7.3. Based on feedback from project group and project board meetings. Alternative Education providers will also be included within the DPS. These will be required to meet differing qualification criteria to other providers because they are not regulated by OFSTED and are less capable of responding to referrals in the traditional way. The requirement and scope for each "category" will be included in the OJEU Contract Notice and a suitable qualification process and valuation criteria will be developed. Providers will be able to submit application for inclusion on the DPS for one of more categories.
- 7.4. Further mechanisms will be put in place for new providers to join any/all of the three categories during the lifetime of the DPS, subject to meeting the original published qualifying criteria. As stated above the qualification criteria will be finalised in collaboration with the partners agreeing to adopt the regional DPS but as an illustration of a typical set of qualification criteria, the table below

provides and sample of what is likely to be included. This list is not exhaustive:

| Criteria | Evaluation | Methodology | |
|--|--------------|---|--|
| Mandatory / Discretionary Exclusions for Public Contracts. | Pass / Fail | Against Public Contract Regulation 2015 requirements. | |
| Financial Capability Assessment | Pass / Fail | This will only assess whether there is a suitable level of risk as we cannot examine provider's financial capacity against an unknown volume or value. | |
| Insurances | Pass / Fail. | Set by Category – will need to ensure insurance requirements are reasonable but sufficient so as to not add cost or deter bidders | |
| Compliance with relevant H&S, Equalities and Environmental legislation | Pass / Fail. | Confirm compliance with legislation and no infringements or notices in the last 3 years. | |
| OFSTED or equivalent rating (e.g. ISI) | Pass / Fail. | Must hold and maintain "requires improvement" or above or equivalent | |
| DfE Registrations (if applicable) | Pass / Fail | | |
| Workforce | % | Weighted score set based on particular service category as to approach to any additional standards the authorities wish to set which are above OFSTED requirements. | |
| Business Continuity, Safeguarding and Risk | Pass / Fail | To ensure appropriate arrangements in place for disruption and risk management. | |
| Data Protection | Pass / Fail | Necessary compliance with DPA must be demonstrated. | |
| Ability to work to the outcomes framework and measurement approach | % | Weighted score based on method statement which is based on the 5 components of Outcomes Framework and | |
| Contract Management & Performance Monitoring | % | Weighted score based on method statement to measure level of capability and assurance through performance monitoring. | |

| Commercial | Fixed Cost per | See below |
|------------|----------------|-----------|
| | placement | |
| | | |

Each provider will have established costs which form part of day to day operations and providing client services (reporting etc.) The purpose of establishing a commercial fixed cost within the DPS is threefold.

- 1. To ensure that only the variable costs for each placement i.e., the individual needs of the child are part of the competitive process. This ensures that the value for money is focussed on the individual placement and complexities rather than costs which are common for all placements.
- 2. It will guard against providers using any particular troughs or throttles in the market, either due to capacity or the needs of the child reducing competition that these costs cannot be loaded at referral stage.
- 3. It provides a level of cost stability within the market and allows inflationary pressures to be identified and any uplifts agreed only affecting the specific costs associated with that pressure. True cost is therefore more effectively measured

These core costs are currently set out in the National Contracts Schedules and cover 9 main categories. For SEN these are:

- All costs related to assessment of child or young persons suitability
- All costs related to the premises
- All costs related to vehicles
- All costs related to supplies and services
- All costs related to education / classroom
- All central / organisational costs
- All costs related to establishments core staffing
- Staff related costs
- All general core costs related to children

Additional fixed costs also apply to other certain types of placements (for example residential)

- Additional core service offer for all weekly and termly residential placements
- Additional core service offer for all 42-52 week residential placements
- Additional services offered in relation to specific needs (learning support, occupational therapy, physiotherapy etc)

Different but common core costs will also be required from Fostercare and Residential Care providers.

These core costs provided will be carried forward to all referrals, a provider at the point of referral can and, by increased competition, transparency and provider numbers, will reduce these costs, but cannot increase them.

The commercial element of the qualification process will also establish discounts for cohort or sibling referrals, where more than one child is being referred. (Note this is different to block bookings).

Finally, the partnership acknowledges that a new procurement process offers the chance for providers to revise prices, and there is a risk that this will result in increased costs to the authorities. **The following option is therefore**

recommended for further discussion / development:

- 1. That an "affordability cap" be placed on the qualification process whereby a provider cannot apply (or successfully apply) if their core costs exceed a certain amount. This can be set by authorities individually for a whole category or a common "affordability cap" based on the benchmarking exercise undertaken can be agreed for each category.
- 7.5. Any selection criteria used and pass mark threshold will be proportionate and objectively justifiable when measured against what is being procured.
- 7.6. Qualification must be by individual school/residence rather than by provider. The qualification process will allow multiple applications to be made easily.
- 7.7. A workflow diagram of the qualification process is shown at Appendix D.
- 7.8. All providers will be visible to all of the partners, there will be no "sub Categories" for a County or geographic areas as it may be seen as the Contracting Authoring preventing providers from offering services within a particular geographic area.
- 7.9. However at referral stage the authority will be able to take a selection of providers based on a geographic area and issue the referral only to those identified providers. If there are not a suitable number of providers in the selected area or no bids are received, the authority can change the limit to include a larger number of providers and re-submit the referral.
- 7.10. The qualification stage has scored method statements, these do not prevent a barrier for qualification, but the overall weighted score (out of 100) for the method statements will be taken forward to any referral (call off) stage. It is proposed that this element will then make up 20% of the weighted referral scores for an individual placement.
- 7.11. The rationale for bringing forward the original method statement scores is to ensure that the initial benefit obtained in critical areas of initial qualification (working to outcomes, monitoring and performance) are brought forward to each referral.
- 7.12. However, it is also proposed that these original method statements responses are subject to continuous improvement and incentivisation. This means that the central contract management function and loge term provider monitoring (that is crucial to development of services and market capability) will adjust the scores positively or negatively in the future. Practically, it is proposed that a providers scores for methods statements are increased / decreased on a periodic basis (6 monthly/yearly) improving their success rate in referrals and also embedding continuous development and SRM in the market.

- 7.13. The advantage of this approach is to ensure that providers who did not have the necessary capability at the point of qualification (particularly small organisations) are not permanently "shut out" or disadvantaged by the move to outcomes based commissioning and formal performance management. They will be encouraged to undertake improvements in the knowledge that can access the DPS once they have achieved the desired capabilities.
- 7.14. Phase 1 of the project recommended that the procurement and application of the DPS is undertaken through a Cloud Base dedicated DPS IT solution. A detailed review of a leading solution "adam" (available on direct call off from a compliant framework agreement) suggests that there are a number of demonstrable benefits from adopting a centralised IT solution. These included constancy of approach and streamlined call off arrangements using standardised referrals, enhanced supplier performance information, detailed market analysis, benchmarking data and market trend functionality. It would also improve communication between the partners.
- 7.15. The solution would also show were the market is performing well and highlight where market development will be necessary. The outcomes framework can be integrated within the system to allow for monitoring to be undertaken easily. This will assist the effectiveness of the contract management function.
- 7.16. However the costs of implementing the "adam" IT solution and ongoing license fees was felt by the WSCC project team not to be financially viable for the partners. The ongoing annual license fees were estimated at an average for each partner as follows:
 - > SEN £28,696
 - ➤ IFA £28,517
 - Residential £21,269
- 7.17. There is also a one off implementation costs of £150,000 split between the partnering Authorities (see Appendix D for a copy of the proposal and a breakdown of costs).
- 7.18. Two other IT solutions (CHARMS DPS & CarePlace) are currently under review and early indications are that these may be significantly cheaper alternatives. However It was felt that at this stage of a RDPs it would be unlikely that all partners, and potential future users of the DPS, will be prepared to migrate to one dedicated IT system so they have not been included any further in this business case. The review of the two other identified system will continue to determine whether they are viable options for possible inclusion at a later stage of development should the partners wish to pursue them further.
- 7.19. It is considered that a centralised IT solution would provide the most benefits from a regional DPS but as outlined above the financial commitment for "adam" is thought to be unacceptable at this stage of project. This means that

the proposed central contract management function will be restricted to the specification outlined in section 9.

- 7.20. Should agreement be reached to move to a full regional DPS and we maintain current timescales referrals could not be made until the full evaluation of initial submissions and tender responses has been completed. Due to the size of the market and number of anticipated applications it is proposed to close entry to the DPS on 1st February 2017, whilst on-boarding and mobilisation of systems and new ways of working are completed and then reopen the DPS on the 1st April 2017 for new entrants thereon. Note: these dates are based on the original procurement proposal so will be subject to change based on partners' approval timelines.
- 7.21. Providers accepted to the DPS must continue to meet the qualifying criteria (pass / fail standards) throughout the life of the DPS. This will require the lead contracting authority to audit providers on at least an annual basis to confirm continued registration. If any provider fails to meet the qualification criteria they will be suspended from further tender activity until such time as the point of failure is addressed satisfactorily and the provider can re-apply. Reapplication will not need to be made in full as the central contract management function will keep all information relating to the provider they will therefore only need to resubmit information relating to satisfying the nature of the suspension. This exclusion will apply to all authorities using the DPS. Authorities cannot request that a provider be excluded from the DPS unless the qualification criteria is not met or otherwise allowed within the terms and conditions of contract.
- 7.22. Timetable for procurement of the DPS is provided at Appendix A. Roles and responsibilities proposed are set out in Appendix B.

8. **Tendering Referrals**

- 8.1. The process for competitive procedure (mini-competition) will need to be established under the DPS procurement and agreed and adopted by all partner authorities. This will ensure compliance with procurement regulations, but also ensure the use of the DPS remains transparent, proportionate and ensures all partners and authorities are treated equally within the award criteria and assessment of value for money.
- 8.2. The mini-competition award criteria can be, and will be, different for each service category and each partner. It should not reassess any areas previously evaluated as part of the qualification process, and must be centred on the needs of the child and desired outcomes. It should not take account of past performance of other referrals and should not discriminate against a particular provider or group of providers.

- 8.3. Providers on the DPS for each category must be given the opportunity to apply for every referral within the selected geographic limits. These are set by each Council at the point of individual referral.
- 8.4. The geographic limit can be extended if a suitable number of providers do not exist or are interested in the referral.
- 8.5. It is recommended that the partner authorities agree to the following high level criteria for each "Category".

| | SEN | Foster Care | Social Care (LAC) | | |
|--|--|--|---|--|--|
| Cost of Placement (including any discount applicable to cohorts/siblings) | Per week / Per month / Per annum | Per week / Per month / Per annum | Per week / Per month / Per annum | | |
| Ability and approach to meeting desired outcomes. | % | % | % | | |
| Ability to meet requirements of EHP / SCP. (E.g. therapies, educational needs, specific safeguarding requirements etc.??)* | These will be a list of needs which the provider must indicate whether they can provide. Each need will carry a mark which will then add up to a total weighting based on the number of needs which a provider can meet.** | | | | |
| Location** | Whilst not a key criteria in the assessment of the most suitable provider, location can play a key part in the child's wellbeing and resulting outcomes as well as incurring sometimes significant additional costs to placements. The proposal here is that 1 mark is subtracted from a total weighting of 5% for every 10 miles the establishment is away from the child's home. (e.g. 0-10 miles =5%, 10-20 = 4%, 50miles+ =0%. | | | | |
| Specific Features (Must Haves and Desirable) (e.g. dietary requirements, EASL, ??)* | must indicate whether they can provide. Each need | | | | |
| Core Competency | This is a weighted score carried forward from the qualification scores of a provider weighted to maximum of 20%. | | | | |
| Incentivisation (optional criteria) | down for compl a premium pay outcomes befo | ex or intensive ne ment made for pr | ves for early step eds, this would be roviders who reach rame or allow the rements reduced. | | |

- * There is very rarely the perfect provider able to meet 100% of every child's needs. The objective of the DPS and mini-competition (referral) process is to identify the provider who is **best placed** to meet as many of the needs and requirement of the child thus meeting the outcomes desired.
- 8.6. These criteria will be configured to automatically evaluate and score based on populated requirements. For example:
 - Specific Features can be listed and each feature which can be met (by a tick) is given a mark (total marks are then weighted automatically).
 - Location could be weighted automatically based on distance required to travel.
- 8.7. The weighting of each criteria can be increased or reduced based on the individual referral requirements, the core weighting for referrals will be based on a combination of 50% quality / 50% price but authorities can vary this weighting 20% either way depending on an individual referral or market demand. This means that the minimum and maximum quality/score weighting can be 30% and 70% respectively.
- 8.8. A final selection or weighting process could be introduced where similar quality bids are received to reflect parent/carer choice. Therefore it is suggested that where less than 5% difference in total scores exists between up to a maximum of 3 bidders, parents can be asked to make a subjective choice on their preferred establishment.
- 8.9. The DPS will also allow block bookings, whereby in some circumstances an authority, or group of authorities, can secure capacity in advance. This will require separate criteria to be established and the contract terms for blocks to be established (including refusals and void management), and how these blocks can be varied for costs once a placement is referred into the block it would be sensible to limit this variability to ensure that blocks cater only for common requirements and the individual needs are most effectively met. The OJEU Contract Notice will include this ability and the exact mechanism for competing for a block contract will be agreed before issuing the tender documents.
- 8.10. In exceptional and justifiable services direct placements will be allowed. The criteria and circumstances will be agreed with all partners so that consistency is still maintained.
- 8.11. The process described above is an effective method of creating an efficient but competitive referral process, it has a number of criteria which are automatically cored and weighted based on the bidders response, and the bidder only has to spend time completing one written method statement on

their ability to meet and monitor the outcomes and price only the needs of the child which will be added to previously submitted fixed costs.

NOTE: All partners must use the referral process in the way prescribed to prevent possible legal challenge (which can happen throughout the life of the DPS) and the DPS being suspended or reducing its period of validity. It will also be the most effective way of gaining quality market information, benchmarking data and ensuring the outcomes framework is successfully embedded. Additionally, this will provide robust evidence to parents that the best possible placement for their child has been sourced and help reduce incidences of appeals and tribunals. It is more likely that matching children with suitable providers is maximised by consistently maintaining the process providers were qualified against.

9. Contract Management Function

- 9.1. Based on discussions with partners throughout the project, particularly given the experience of other partners working in current or past collaborative arrangements, it is agreed that central strategic management of the DPS and provider market is required to underpin the importance and reputation of the partnership/DPS, improve longevity and sustainability of the benefits possible, and respond positively to market and stakeholder (inc. parents and children) expectations.
- 9.2. Key objectives of this project are to improve outcomes, become a more intelligent commissioner, reduce running cost and create a robust, compliant and competitive environment to meet the Councils and child population needs; it is recommended that a strategic contract management function is formed.
- 9.3. There will be ongoing costs to the "Managing Authority" for the continued oversight of the DPS, including management of suspensions, contract variations, ongoing assessment and assurance of providers' capabilities and evaluation and on boarding of new providers. These annual costs will need to be met by all partners using the DPS and are detailed separately in the table in section 12 below.
- 9.4. Resources currently allocated in each Council only allow for reactive Quality Assurance activity when issues and concerns are at a heightened level.
- 9.5. By enabling a more efficient and effective use of Officer time and resource, the proposed regional DPS will create capacity for a shared quality assurance programme based on matrix risk assessment.
- 9.6. It is proposed that quality assurance is managed by a partnership agreement with the ability for localised intervention as and when required.
- 9.7. However, strategic contract and supplier management is most effectively delivered on a centralised basis, where the leverage and influence of the "client" will be at its greatest.

- 9.8. A centralised team takes away the SRM and Strategic Management process so that case workers, commissioners and other officers can concentrate on local issues and priorities and focus on placements which have individual needs at their core.
- 9.9. This business case is predicated on the basis of partners adhering to the process of referrals/mini-competitions to create good data and information on costs, activity, demand and outcomes. It is unlikely that a Strategic Contract Management function can be viable without this.
- 9.10. Equally the business case and SET project has always been aimed at facilitating collaboration and knowledge sharing. There is an appetite among the group to continue this. Without an effective strategic contract management function it is less likely this will continue and that partners will compete with each other this may give an opportunity to the market to exploit partners.

10. Scope of Centralised Contract management of DPS.

- 10.1. Centralised management of overarching regional DPS will include the following elements:
 - Management of bids and contract award for new suppliers throughout the life time of the RDPS.
 - Maintenance of all master logs related to the RDPS including suspensions, reinstatements, Ofsted status, core fees.
 - Communications to all parties of matters concerning, and limited to, the RDPS.
 - > Co-ordination, delivery and analysis of annual compliance checks.
 - Co-ordination and management of a RDPS steering group.
 - Co-ordination and management of a RDPS decision-making Board.
 - Co-ordination of data from all RDPS partners to provide a regional perspective and analysis to inform future developments and promote use of leverage of purchasing power.
 - Reporting to RDPS Board.
 - Representation and responses at a national level.
- 10.2. Centralised Contract management of providers awarded a place on a regional DPS will include the following:
 - Core fee management and negotiation in relation to annual core fee reviews.
 - Recording and collating issues and concerns from RDPS partners regarding individual providers that may lead to action being taken.
 - Collating information and reports from RDPS partners following their own Quality Assurance visits to individual providers, to provide a centralised record available to all RDPS partners.
 - Addressing non-compliance (at a service level) matters.
 - Recipient of Ofsted secure lists and responsible for highlighting concerns to RDPS partners.

- Co-ordination of RDPS partners' response to a provider where an Ofsted inspection has resulted in a poor judgement, and/or the level of concern from issues raised by RDPS partners have reached an agreed threshold to include visits by a team made up of relevant Officers from RDPS partners.
- Co-ordination and oversight of Action Plans (as a result of poor Ofsted judgement and/or other significant concerns identified by several RDPS partners) for those providers identified and agreed as key for all RDPS partners.
- > SRM meetings with providers identified as key for all RDPS partners.
- Co-ordination of scheduled monitoring visits, to a schedule as agreed by RDPS partners, which will include Officers from RDPS partners – to include a full report available to RDPS partners.
- 10.3. Functions **NOT** provided as part of the central contract management function of the Regional DPS
 - Meeting and working with individual providers, as identified by a RDPS partner, to facilitate them joining the RDPS any work with a provider that an individual RDPS partner wishes to encourage to submit a bid to join the RDPS, will be undertaken by that RDPS partner.
 - Communications to providers and others that concern and are related specifically to an individual RDPS partner, and are not related to the RDPS as a whole.
 - Involvement in any part of the referral or placement making process for individual placements on behalf of RDPS partners.
 - > Negotiating fees for individual placements.
 - Monitoring and addressing concerns in respect of individual placements.
 - > Attendance at Annual and/or LAC Reviews for individual placements.
 - Quality Assurance visits to providers on behalf of individual RDPS partners.
 - Co-ordination and oversight of an Action Plan or any other follow-up activity, as a result of a poor outcome of a Quality Assurance visit undertaken by a RDPS partner.

11. Social Value

- 11.1. In 2012, the Public Services (Social Value) Act placed a duty for all contract authorities to consider the desirable social, economic and environmental benefits that a procurement could deliver to local communities.
- 11.2. The DPS qualification process will look to examine a providers capability and experience of delivering such benefits, however as a DPS does not provide any commitment of volume or value and contracts with providers are formed only via individual placements, it is not feasible to include definitive requirements with providers to deliver social value. Coupled with the vast differences between types and sizes of providers across each category it will be impossible to create a common requirement. However the DPS will require providers to work with each Council and the partnership to bring community benefits via

added value during the contract management and partnership approach described in this business case.

11.3. In addition the outcomes framework will provide a mechanism to measure community outcomes which have resulted from placements.

12. Centralised Contract Management Costs

- 12.1. A review of required staffing levels to provide the effective level of centralised contract management described above has been undertaken. This review was based on current experience and knowledge of operating a DPS and Framework for a number of years and the two distinct markets that will need to be managed (NMISS and social care). The following cost and breakdown are proposed as the minimum required to deliver the function:
 - > 1 Hay B Grade FTE (two 0.5 fte) on the overarching management and responsibility of the DPS in respect of NMISS and social care, plus an additional:
 - 2 x G12 Senior Contracts Officer
 - 2 x G8 Contracts Officer
 - > .5 x G10 Business Data Analyst
 - 12.2. Using the NJC 2017 salaries:
 - > 2 x 40,057
 - > 2 x 25,951
 - ➤ .5 x 16,243
 - > 1 x 50,274 (Hay B)
 - > Total **indicative** cost pa = 198,533 + on-costs split between the participating partners

Note: the DPS will be open to other local Authorities to join subject to a joining fee (to be agreed by all partners). These joining fees will be used to reduce the original joint partner's annual costs. New joiners will not have access to any central management activities.

13. Procurement costs

13.1. It has been agreed that the lead Authority will incur a one off procurement costs in setting up the regional DPS and that these costs would be shared equally between the participating partners. WSCC as the potential lead has identified these costs which are outlined below:

| | - | Approx. No of Days | | Cost £ |
|------------------------------|---|--------------------------|---|-----------|
| | | | | |
| Development of ITT, Spec and | | | | |
| Commercial Model | | 20 | £ | 40,000.00 |

Appendix 2

| Development of Terms | 20 | £ | 10,000.00 |
|------------------------------------|----|--------------------------|------------------------|
| Upload of ITT and Project | 2 | £ | 700.00 |
| Tender Period (inc. clarifications | | | |
| etc) | 5 | £ | 2,500.00 |
| Assessment of Providers | | | |
| (Mandatory and Financial | | | |
| Checks) | 20 | £ | 20,000.00 |
| | | No co | st as shared technical |
| Evaluation of responses | | resource across partners | |
| Award Notification | 3 | £ | 1,500.00 |
| Feedback | 7 | £ | 5,000.00 |
| Contract Arrangements | 20 | £ | 10,000.00 |
| | | | |
| | | | |
| | | £ | 89,700.00 |
| | | + contingency of 10% | |
| | | | £97,700.00 |

14. Benefit Realisation

- 14.1. Section 5 of this business case outlines the benefits of collaborative working across a regional DPS. However maximising benefit realisation for individual participating Authorities is not something that can be delivered remotely by a centralised contract management team or the lead Contracting Authority. The following sections explain the rationale on why each Authority will need to take ownership of any benefit realisation programme.
- 14.2. Realised benefits will fall into two categories, operational efficiencies and supplier cost reduction, both of which are subject to various local influences. It is therefore not possible to accurately predict the level of benefit realisation achieved for individual partners.
- 14.3. In considering operational efficiently and savings, it is important for partnering authorities to recognise that realising the savings will be predicated on the number of service "categories" adopted in the DPS, the level of standardisation of processes applied and any restructuring of internal resources (including procurement and contract management costs). All of these elements are managed by the individual partners and therefore they will need to produce their own benefit realisation plans for operational efficiencies as part of this business case assessment.
- 14.4. At the commencement of this project, it was suggested that there is potential for a 1% 5% reduction in supplier costs that could be achieved through the application of dynamic market management and influence from a regional DPS. However it must be emphasised that there is a high level of risk in not achieving these savings and WSCC, as the author of

this business case, cannot guarantee that these savings will be achieved for each or any partner. Significant fluctuation in supply and demand, changes in legislation (such as the National Living Wage) and possible new entrants and exists in the market can all easily change pricing structures, which will have a knock on effect to any savings ambitions. It is therefore important that partners consider these dynamics when deciding whether to joining the regional DPS.

14.5. Subject to the caveats above, the benefits from a regional DPS are significant and partnering authorities should not base their assessment on whether to join the DPS purely on financial consideration alone. The benefits from collaborative sourcing, centralised management, and development should not be overlooked and the potential as a group to influence future government policy has significant reputational and operational benefits. These may be longer term objectives but they will help to influence the provider market and change organisational culture.