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| **ADVANCED REQUEST FOR QUOTATION**  **FOR**  **Supported tenancy- LD** |

The Closing date for returning this document for submission is :

6th March 2018

**ADVANCED REQUEST FOR QUOTATION**

**Sefton MBC is committed to developing partnerships with independent sector Providers to ensure that a wide range of quality supported living services exists within the Borough.**

**The Commissioning Support Team would like to hear from Providers interested in developing a service for five identified clients with a learning disability and/or ASD in a long term supported tenancy.**

## Aims of the Service

**The service primarily aims to provide flexible support for the service users to enable them to live safely in the community, reduce the likelihood of hospital admissions and promote their independence, choice and inclusion. This will also involve working with the service users during the process of transistion and resettlement into the service.**

**The service must support the service users to maximise their full potential and set clear objectives that are monitored on a regular basis so that outcomes can be measured and evidenced to Care Managers.**

**Outcomes may include:**

* **Development of strategies to allow the Service Users to be able to manage their behaviours in an appropriate manner**
* **Maintaining positive mental health**
* **Maintaining own tenancy**
* **Maximising independent living**
* **Management of identified risks**
* **Socialisation and engagement in the community**
* **Maintenance of a positive social and family network**
* **Development of independent living skills**
* **Development of skills relating to financial independence**
* **Development of education/training leading to the potential for meaningful employment**
* **Development and maintenance of personal care**
* **Development of understanding and use of communication**
* **Promotion of a structured environment**
* **Prevention of relapse / hospital re-admission**

**This list is not exhaustive and we would emphasise that this is a supported living service, which will work to enable the service users to achieve their full potential.**

**A list of individual client outcomes are highlighted in the personal clients details contained in this document.**

**The Service**

**Specification : Long term supported living service for 5 adults with**

**Complex support needs- Learning Disability/ ASD**

**Support required is 24 hour care and support for 52 weeks per year .**

**Total number of support hours required is broken down to 39 weeks per year ( during college term time) which equates to approximately 470 support hours per week when individuals attend College, and 13 weeks per year (during college holiday time), which equates to approximately 570 hours per week when individuals are not at College.**

**This aggregates to approximately 497 hours per week**

**This support requirement includes 2 x waking night staff for the hours between 22:00 to 07:00 daily, and core day staff support delivered from 07:00 to 22:00 daily, with additional specified 1:1 support hours for each client based on assessed need.**

(**The commissioners reserve the right to reduce hours and introduce other clients to the service based on changes to assessed need)**

**The assessed hours per individual in the service are further broken down as:**

* **1 core member of staff between 07:00- 22:00 (could change depending on college hours etc)**
* **2 waking night staff between 22:00 and 07:00**
* **C and D are in full time education for 39 weeks per year**
* **C and D needing additional support Monday-Friday during the other 13 weeks**
* **C receiving 2:1 support at all times within the home**
* **D receiving 1:1 support at all times within the home**
* **A & B & E are receiving 12 additional 1:1 hours each**

**Please Note: Client C is already resident in the service, and on award of the contract, the successful bidder will plan the transfer of client C’s care from the incumbent provider. The successful bidder will also begin to plan the transistions of the remaining identified clients on a staggered basis post the award date.**

**Note-** This section provides details of the **needs** and intended **outcomes** relating to a specific adult or young person. Any potential provider will be expected to meet these needs. Providers will be assessed for suitability based on their response to the questions located elsewhere in this document.

When completing this specification it should be noted that it may be read by a large number of providers. As a result the information must be **specific** **and relevant** **to the service request** and the provision of **unnecessary data should not occur.**

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| **INFORMATION ABOUT THE ADULT/YOUNG PERSON** | | | | |
| **Initials: A** | **Gender: M** | **DOB: 27/9/1999** | | **Age: 17** |
| **Area of Liverpool where the person lives: Southport** | | | | |
| **Legal status: LAC** | | **Ethnicity: White British** | | |
| **Language: English** | | **Religion: None** | | |
| **Funding Approval:** | | **Funding Period: Long term** | | |
| **Social Worker: Matt Walton** | | **Hours – 12 1:1 individual hours, share of core hours, share of waking night support.**  **This service would be subject to regular reassessments with a view to developing independence and reducing support.** | | |
| **Please describe the health needs of this adult or young person, including medication and hospital admissions**  **A has a diagnosis of ASD and a moderate LD. He is overweight but is otherwise in good physical health.** | | | | |
| **Please describe how this adult or young person communicates. Please include information about communication systems, behaviours that cause challenges, triggers**  **A can communicate verbally but suffers with high levels of anxiety and low confidence which can affect his willingness and ability to communicate in a timely fashion.**  **A has not exhibed challenging behaviour in over 12 months. This previously occurred as a response to feeling let down and abandoned.**  **A responds to a calm approach and withdrawal; further confrontation may result in escalation with A putting him and others at risk of harm. Reasoned discussion can only take place when A ‘s anger cycle is finished and his current support team find that it is not productive to break this cycle.  A requires firm and fair boundaries in terms of behaviour and other issues involving his care and will need occasional prompts and reminders from time to time. These boundaries have been continually subject to amendment as he develops and matures. It has been recognised that A responds positively to low arousal approaches and redirection. A will withdraw to his room if he feels uncomfortable or threatened and will reconnect when he has calmed himself.** | | | | |
| **What does this young person like? Please include activities, places, food, drinks**  **Computer games**  **Cooking**  **Support workers he can trust**  **Consistency**  **Accessing the community- shopping, trips to places of interest**  **Spending time with family**  **A varied diet- he enjoys eating junk food such as Pringles**  **College** | | | | |
| **What does this young person dislike? Please include activities, places, food, drinks**  **Unpredictable events and sudden changes**  **Being the focus of attention**  **Seeing others in distress**  **Poorly presented information**  **Direct challenges from people he does not trust**  **Being let down by family members**  **Physically demanding activities** | | | | |
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| **Please provide any other important information about this family, please include risks**  **A has 4 younger siblings who are also in care. He is very close to them and will need support to manage and maintain these relationships including facilitating and supporting contact.** | | | | |
| **Please give clear information about their current care plan including family information, social care involvement and important events**  **A has lived in Children's residential home since 8/3/13. A and his siblings became subject to child protection plans and subsequent care orders in 2010 due to concerns within the family home including parental alcohol abuse, domestic violence and concerns around parenting capacity to meet the children's needs. Attempts were made to accommodate A with his brothers in foster placements but this broke down with A presenting as very angry towards his parents/other adults and was distressed at seeing his brothers move. A moved to the current home after several failed placements. A has made huge progress whilst there and it is expected that with the correct support he will continue to develop his independence.**  **A’s father committed suicide 5 years ago and contact with his mother is very rare due to her own non-engagement. The death of his father had a profound impact upon A and it remains unclear how he feels about this as he will rarely discuss it and has declined bereavement support.**  **Support is therefore need to support A in all aspects of his life with the understanding that family support is not available.**  **A has an advocate who provides ongoing support to ensure A’s voice is heard** | | | | |
| **INFORMATION ABOUT THE SUPPORT PACKAGE REQUESTED** | | | | |
| **What kind of support is needed? (e.g. personal care, health care tasks, community support, family support, overnight support, flexible support)**  **Ongoing emotional support, prompts to maintain personal hygiene, support to develop a community presence, engage in new activities, achieve clear goals in respect of independence: finances, cooking, cleaning, hobbies, socialising** | | | | |
| **What are the reasons that this support is needed?**  **To develop independence in all areas with a long term goal of SH being able to maintain his own tenancy** | | | | |
| **When is the support needed? (please add days of the week and times, including term times and school holidays)**  **52 weeks a year including term time and holidays and support to access the local community** | | | | |
| **Where is the support needed? (e.g. in school, in the community)**  **Within supported accomodation and when accessing the local community** | | | | |
| **When is support required to begin?**  **Transistion planning to commence immediately on award of the contract.** | | | | |
| **What are the outcomes that are anticipated for this care package? Please include an outcome about independence:**  **food preparation- specifically around being able to tell when meat is cooked and developing the ability to follow more complex recipes**  **Independence with household tasks: developing a routine around tidying, laundry etc**  **Independence with budgeting- support to develop weekly budget and manage this appropriately. Over time it is expected that A would be able to manage this independently**  **To develop community access independence via task centred practice- support to slowly develop A’s confidence by withdrawing as appropriate. Support will initially be needed to develop familiarty with the area, bus routes etc and plan activities as appropriate**  **Continued progress with weight loss to be achieved via positive relationship with staff who can challenge him- dietary choices, efforts to exercise and positive reinforcement.**  **Support to maintain and further develop family relationships: support may be needed to facilitate family contact and engage A in statutory planning meetings.**  **The long term plan is for A to develop the above skills in order to be able maintain a tenancy of his choosing with greater independence** | | | | |
| **Updated form completed by: Matt Walton** | | | **Date: Jan 2018** | |

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| **INFORMATION ABOUT THE ADULT/YOUNG PERSON** | | | | |
| **Initials: B** | **Gender: F** | **DOB: 14.02.2000** | | **Age: 17** |
| **Area of Liverpool where the young person lives: Wirral** | | | | |
| **Legal status: LAC** | | **Ethnicity: British White** | | |
| **Language: English** | | **Religion: No stated** | | |
| **Funding Approval** | | **Funding Period: Long term** | | |
| **Social Worker: Katie-Marie Walker** | | **Hours – 12 1:1 individual hours, share of core hours, and share of waking night support**  **This service would be subject to regular reassessments with a view to developing independence and reducing support.** | | |
| **Please describe the health needs of this adult or young person, including medication and hospital admissions**  **B is due to transistion into adult services in January 2018 B is currently a lac child in a residential setting in the Wirral. B became a lac child due to safety concerns in the family home.**  **B has epilepsy as well as autism, this is current managed via medication, hwoever she still attends regular appointments in hospital and the community which she needs support to attend.**  **B can display challeneging behaviours at times, this often includes punching or kicking the walls which can cause her to hurt herself at times, this can at times need medical attention in the home and A and E.** | | | | |
| **Please describe how this adult or young person communicates. Please include information about communication systems, behaviours that cause challenges, triggers**  **B communicates verbally and is able to understand verball communication also. B is able to make her wishes clear in relation to what she wants in her daily life.**  **B can become upset when talking about certain family members this includes her dad and aunt.**  **B becomes distressed if someone is not able to answer her calls or they say they will call her back and don’t.**  **B can also become distressed if she is not given notice of any changes or she feels the someone is not being honest with her. All information needs to be given clearly to B and it needs to be confirmed that she has understood when was discussed.** | | | | |
| **What does this young person like? Please include activities, places, food, drinks**   * **People who are predictable** * **I am very sociable and enjoy being with others. I like banter with staff.** * **I need to have an understanding of what Is expected of me and what's going to happen** * **I enjoy being the centre of attention so am happy being at medical appointments** * **Paperwork with my name on it** * **Being involved in my care,** * **Cooking and trying new recipies** * **Football** * **Volunterring at the farm and working with farm animals.** * **Reading** * **Writing out books** * **Playing outside with others** * **Using social media** * **Being with family especially sister sam.** | | | | |
| **What does this young person dislike? Please include activities, places, food, drinks**   * **I worry about new experiences , so need to be given lots information, encouraged to try then decide how I feel** * **Being given too much Information** * **Transitions — I struggle with change and need people to plan for me with selected information and limited time for me to worry** * **Having to pay attention for too long** * **People not answering the phone or returning calls when they said they would** * **Cleaning my room and communial areas** * **Having a shower** * **Sudden changes** * **Not getting my own way** * **Meeting new people I like this to happen slowly.** * **Not being involved in my future.** * **Being bord** * **Not having set activites or jobs** * **Not being allowed to join in with something** | | | | |
| **Please provide any other important information about this adult or young person please include home language, cultural needs, gender specific carers, risks**  **B needs a consistant approach and for staff to follow the same processes for different activities. B has only worked with female staff in a home environment however in the community she works well with both and male and female staff.** | | | | |
| **Please provide any other important information about this family, please include risks**  **B became a looked after child in 2005 due to neglect and suspected sexual abuse. She has supervised contact with her mum who lives in the Wirral and unsupervised contact with her sister and her partner. B lived with her aunty for a period of time however she no longer has any contact with her aunt. B doesn’t no have contact with her father and it has not been deemed as safe as of jet for her to have contact with her dad from childrens services.** | | | | |
| **Please give clear information about their current care plan including family information, social care involvement and important events**  **B is currently a lac child placed in a residential home in the Wirral** | | | | |
| **INFORMATION ABOUT THE SUPPORT PACKAGE REQUESTED** | | | | |
| **What kind of support is needed? (e.g. personal care, health care tasks, community support, family support, overnight support, flexible support)**  **B will require support, supervision and encouragement relating to all day to day living tasks, and to develop her social interaction with peers.** | | | | |
| **What are the reasons that this support is needed?**  **Due to B ‘s Autism and epilepsy specialist support and accommodation is required to support her to develop her independent living needs and move towards independence.** | | | | |
| **When is the support needed? (please add days of the week and times, including term times and school holidays)**  **52 weeks a year including term time and holidays and support to access the local community** | | | | |
| **Where is the support needed? (e.g. in school, in the community)**  **Within supported accomodation and when accessing the local community** | | | | |
| **When is support required to begin?**  **Transistion planning to commence immediately on award of the contract.** | | | | |
| **What are the outcomes that are anticipated for this care package? Please include an outcome about independence:**  **B has to potential to move towards a more independent life style however in order to do this she needs to develop her independent living skills, these include;**   * **Maintaining her personal care by support her to develop an effective routine to manage her personal care needs.** * **Maintaining her diet by supporting her to continue to cook healthy meals and make wise choices for foods in order to prevent further weight gain.** * **Maintaining her home through cleaning routines both in her room and communial areas.** * **Learning how to maintain her safety in the home.** * **Learning to maintain her safety in the community including road safety and stranger danger awareness.** * **Travel training to access public transport.** * **Support to develop and maintain her relationships with both her peers and family.** * **Support to maintain her health needs in relation to her weight, epilepsy and regular health checks.** * **Support to participate in voluntary placements to develop work skills.** * **To learn how to develop and maintain a budget in relation to her finances.**   **With the support to develop these areas it is my belief that B will be able to move onto more independent living and require less support from staff.** | | | | |
| **Updated form completed by: Katie-Marie Walker** | | | **Date: Jan 2018** | |

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| **INFORMATION ABOUT THE ADULT/YOUNG PERSON** | | | | |
| **Initials C** | **Gender:** | **Female** | | **Age: 17** |
| **Formby -Southport area** | | | | |
| **Legal status:** | | **Ethnicity: White British** | | |
| **Language: English** | | **Religion:** | | |
| **Funding Approval:** | | **Funding Period: Long Term** | | |
| **Social Worker: Maggie Youngson** | | **Hours –share of core hours, share of waking night support**  **39 weeks- 72.5 1:1 additional hours**  **13 weeks- 105 1:1 additional hours**  **This service would be subject to regular reassessments with a view to developing independence and reducing support.** | | |
| **Please describe the health needs of this adult or young person, including medication and hospital admissions**  **Physical health is relatively good- there is a known bowel prolapse which can cause pain and discomfort and occasional bleeding . C will pull her prolapsed bowel out but when calmly asked will push it back in. This may disturb new support staff.**  **Supervision is needed as C will put her hands into the toilet bowel and will smear around the room.**  **She is known to put her clothes and toys on the floor and urinate over them, there are no known triggers for this behaviour so stringent observation and cleansing is required**  **No recent hospital admissions** | | | | |
| **Please describe how this adult or young person communicates. Please include information about communication systems, behaviours that cause challenges, triggers**  **There is verbal communication in one or two words supported by visual aids either body language or pictures. Once familiar with the speach pattern support staff are able to idenfiy the need/ request.**  **There is sensitity in all of her senses apart from taste, no eye contact, prefers the dark, head covered when out, audio distress by loud sudden noise, crowds and busy places,**  **To travel alone but with support . self protection by self isolating, prefers times when she is not seen or can see others.**  **Support staff to be mindful not to encroage personal space**  **Will go into her tent or under her blanket for security**  **If support staff are too close or in her space too long she will make sounds or action to move then away.**  **Prior to a change in activity or outing anxieties are raised often creating physical harm to others from her, usually the support staff. This is witnessed on a daily basis when attending school.** | | | | |
| **What does this young person like? Please include activities, places, food, drinks**  **Activities undertaken are mood and environment lead .**  **Pictures aid the days activity and compliancy with the duty staff , she needs to know who is on duty and who will change**  **technical devices, I Pads etc to view her favourite places .**  **to view churches petrol stations and pubs when out on the mini bus .**  **Having a Macdonalds meal not always in the restaurant**  **Calm places for walks**  **Her dolls toys in her lounge she likes to sleep with two dolls**  **Pictures- photographes**  **Swimming**  **Previous love of fair ground rides appears to have subsided but may return**  **There is no food preference identified however will finish all foods . The need to clear may be associated with the autism**  **Loves family contact**  **does not like sharing her space, staff may be close by but there are signs given when she wishes to be alone, staff will move away but always have her in sight. Her lounge at home is the place where she likes to relax watch T V and listen to her music. She has a collection of soft toys many of T V characters and dolls and tactile bits and pieces which she likes to hold. She can relax on the couch and snuggle up with her blanket and being sensitive to light will ask for her curtains to be closed.**  **C has a tent, this is C s space and not to be shared or interrupted. This is therapeutic and essential for her emotional wellbeing, one of her coping techniques is to 'hide' not to see or be seen.**  **She likes her bedroom and sleeps in a single bed, she loves her bed which is her sanctuary . She will pick 3 toys to take to bed, and has to be discouraged from taking more. Once in bed she covers her head with the duvet, relaxes almost instantly and has a good nights sleep. However her sensitive hearing is easily wakened, sometimes the bird song can be disturbing and can trigger an increase in anxiety and an aggressive outburst .** | | | | |
| **What does this young person dislike? Please include activities, places, food, drinks**  **All sensory areas are sensitive**  **Eye contact**  **Loud noises ,shouting screaming from others and at times bird song**  **Being in bright light**  **Being too close to others and others too close to her.**  **Having her alone time disturbed**  **Dislikes having her hair washed** | | | | |
| **Please provide any other important information about this adult or young person please include home language, cultural needs, gender specific carers, risks**  **Understands English and celebrates all Christian festivals** | | | | |
| **Please provide any other important information about this family, please include risks**  **She was born without complications and deemed to be a healthy baby, the forth child toher parents . At the age of 18 months C was given the MMR vaccine and within a few hours was admitted into hospital experiencing seizures. Her health deteriorated and there was notable deterioration in her learnt skills and was failing to reach further developmental milestones .**  **diagnosed with severe learning disabilities and autism. As she aged she displayed behaviours of aggression possibly due to her own frustration and a lack of tolerance towards others and her environment.**  **moved into a residential setting at a young age as her unsettled behaviours at home continued to escalate putting the family and herself at risk of harm.** | | | | |
| **Please give clear information about their current care plan including family information, social care involvement and important events** | | | | |
| **INFORMATION ABOUT THE SUPPORT PACKAGE REQUESTED** | | | | |
| **What kind of support is needed? (e.g. personal care, health care tasks, community support, family support, overnight support, flexible support)**  **Full support is required in all aspects of personal care this may be required several times a day there have been occasions a third support worker has been necessary**  **If the house is peaceful she will sleep well, however due to sensitive hearing can be disturbed by the slightest noise, including bird song which can interupe the calmness of the house** | | | | |
| **What are the reasons that this support is needed?**  **Does not have the ability or insight of her situation.**  **Unaware of risks to self ot others**  **Is at risk of serious injury to self and or others**  **Is unable to be indendent in any aspect of her life**  **To support her in the community and be part of society**  **To be understood and accepted**  **To be support in reaching her full potential** | | | | |
| **When is the support needed? (please add days of the week and times, including term times and school holidays)**  **52 weeks a year including term time and holidays and support to access the local community** | | | | |
| **Where is the support needed? (e.g. in school, in the community)**  **Within supported accomodation and when accessing the local community, and to maintain contact with family and attend medical appointments** | | | | |
| **Transistion planning to commence immediately on award of the contract.** | | | | |
| **What are the outcomes that are anticipated for this care package? Please include an outcome about independence:**  **To  introduce  cooking skills  and other basic domestic tasks through positive routines:  increasing with personal progress**  **To promote and maintain a healthy diet**  **To consider sensory needs in relation to completing activities of daily living**  **To focus on development of independence through implementation of routines**  **To maximise  and encourage decision making through effective communication**  **To promote positive  peer interaction**  **To identify reductions to care package where appropriate including sharing hours with other service users**  **To identify new activities  and interests that C enjoys and promote new skills**  **To work closely with education and alternative  services  once formal education has been completed**  **to develop effective communication and support strategies**  **To promote positive relationships  and contact with  her family.** | | | | |
| **Updated form completed by: M Youngson** | | | **Date: January 2018** | |

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| **INFORMATION ABOUT THE ADULT/YOUNG PERSON** | | | | |
| **Initials: D** | **Gender: F** | **DOB: 28.10.98** | | **Age: 18** |
| **Area of Liverpool where the young person lives: Bootle** | | | | |
| **Legal status: N/A** | | **Ethnicity: British White** | | |
| **Language: English** | | **Religion: Roman Catholic** | | |
| **Funding Approval:** | | **Funding Period: Long Term** | | |
| **Social Worker: Mike Nugent** | | **Hours –share of core support, share of waking night support**  **39 weeks- 72.5 1:1 additional hours**  **13 weeks- 105 1:1 additional hours**  **This service would be subject to regular reassessments with a view to developing independence and reducing support** | | |
| **Please describe the health needs of this adult or young person, including medication and hospital admissions**  **D has fragile X syndrome, Autism and a learning disability with associated anxiety and complex behaviour, D turned 18 on 28/10/16. D was voluntarily accommodated under Section 20 of the Children's Act due to her aggressive behaviour towards her parents and siblings.**  **Prior to D becoming looked after she was known to the Children with Disabilities team for over ten years, D had 2 to 1 community support and 56 nights respite a year. Children's Social Care received three JAIDS regarding aggressive behaviour towards her family, the first in July 2013 when D grabbed Mum’s head and hit it against a concrete post. The second in October 2014 when D attacked her Dad and his arms covered in deep wounds. D has also attacked Grandparents.**  **D’s behaviour is challenging and she requires close supervision. D currently attends Peter House School in Southport and her family are hoping Thornton College will be an option for her. D has started to use public Transport to and from school with 1:1 support. This was initially 2:1 but due to the progression D has undertaken it has been reduced to 1:1.**  **D is quite rigid in her thought processes and can become agitated and aggressive if things don't happen when she wants them to in the way she wants. D can harm herself or others when upset and is unable to regulate her emotional responses without input from those around her. When D is stressed she may disengage with the world, with unusual perceptions and streams of thought/imagination that might not fit in with what is happening around her. This may be difficult to interpret and increase her agitation if not managed appropriately. D can harm herself, thrown objects or hit staff. D can also urinate or defecate for attention. D can be sexually inappropriate towards male staff and take her clothes off.**  **Parents would like agency support for a carer to take D out to college, activities and/or clubs. This would help promote her social skills while doing activities she likes. D loves to bake and requires support around all her daily living tasks.** | | | | |
| **Please describe how this adult or young person communicates. Please include information about communication systems, behaviours that cause challenges, triggers**  **D is able to communicate quite well, but requires skilled support interventions to observe her mood, body language and to support her to fully express herself. It is important for to have strict boundaries and support workers who remain consistant with her at all times and respond appropriately to any behaviours. D requires clear verbal instruction.**  **D is quite rigid in her thought processes and can become agitated and aggressive if things don't happen when she wants them to in the way she wants. D can harm herself or others when upset and is unable to regulate her emotional responses without input from those around her. When is D stressed she may disengage with the world, with unusual perceptions and streams of thought/imagination that might not fit in with what is happening around her.**  **A trigger for her sexualised behaviour includes Beyonce, and her songs. If certain songs are played, D will undress regardless of who is around, or her location. D will require support and encouragement, and some support for all her daily living tasks.** | | | | |
| **What does this young person like? Please include activities, places, food, drinks**   * **People who are predictable** * **I am very sociable and enjoy being with others. I like banter with staff, I like to tea-breaks for this purpose** * **To be noisy** * **Being with people who are in authority** * **I need to have an understanding of what Is expected of me and what's going to happen** * **I do enjoy seeing others getting told off and have been known to 'snitch'** * **I like things to be right** * **Activities I enjoy include : Craft activities, music and dancing, baking and eating cake (offering to others), pampering, makeup nails, false tan, shopping, being in school kitchen** * **I like my IPaci-1 research 'girlie' interests e.g. following fashion brand, holidays, games** * **I like having trinkets, photographs** * **I enjoy studying fashion and enjoy my clothes and those of others** * **I like bouncing** * **I enjoy going to church—to sing, be with older people, have tea and biscuits** * **I enjoy the company of older people possibly because the are calm , predictable, don't create a challenge with what they wear** * **I enjoy being the centre of attention so am happy being at medical appointments** * **I need short lead ups to events** * **Paperwork with my name on it** | | | | |
| **What does this young person dislike? Please include activities, places, food, drinks**   * **I do worry about everything** * **Dogs** * **I worry about new experiences , so need to be given lots information, encouraged to try then decide how I feel** * **The passing of time, as I don't understand** * **Being given too much Information** * **Being given information too early increases my anxiety** * **Transitions — I struggle with change and need people to plan for me with selected information and limited time for me to worry** * **People touching my belongings** * **Having to pay attention for too long** * **Not being the centre of attention** * **I struggle with others being the centre of attention e.g. I find it difffcuft when others receive compliments** * **Others students having different support to me** * **It can be difficult for others to appreciate my likes as they seem to be complex at times e.g. they may** | | | | |
| **Please provide any other important information about this adult or young person please include home language, cultural needs, gender specific carers, risks**  **Parent’s have advised that D responds better to older carers who remain strict and stable in terms of their approaches and remain monotone (wherever possible). D responds well to male workers, but can struggle with younger trendier female carers as she views them as friends and not workers.** | | | | |
| **Please provide any other important information about this family, please include risks**  **D s parents have two other daughters one who also has fragile x and a learning disability and another with severe mental health problems resulting in her being an inpatient at a psychiatric hospital in Chester.** | | | | |
| **Please give clear information about their current care plan including family information, social care involvement and important events**  **D was voluntarily accommodated under Section 20 of the Children's Act due to her aggressive behaviour towards her parents and siblings. She is currently supported by Autisim Initatives in Chambres Road.** | | | | |
| **INFORMATION ABOUT THE SUPPORT PACKAGE REQUESTED** | | | | |
| **What kind of support is needed? (e.g. personal care, health care tasks, community support, family support, overnight support, flexible support)**  **D will require support and encouragement relating to all day to day living tasks, and to develop her social interaction with peers.** | | | | |
| **What are the reasons that this support is needed?**  **Due to the complex nature of D’s LD, Fragile X and Autism, specialist support and accommodation is requires to ensure that she remains stable and to avoid potential admissions into hospital.** | | | | |
| **When is the support needed? (please add days of the week and times, including term times and school holidays)**  **52 weeks a year including term time and holidays and support to access the local community** | | | | |
| **Where is the support needed? (e.g. in school, in the community)**  **Within supported accomodation and when accessing the local community, and to maintain contact with family and attend medical appointments** | | | | |
| **When is support required to begin?**  **Transistion planning to commence immediately on award of the contract.** | | | | |
| **What are the outcomes that are anticipated for this care package? Please include an outcome about independence:**   * **D would like to continue to improve her cooking skills by making various different meals with supervision, Rosie loves to bake.** * **D would like to continue to feel clean and comfortable in clothes of her choosing. D would like to improve her skills around her laundry tasks.** * **D likes to feel comfortable in her own clothes and build up her independent skills in this area and choose the appropriate clothes for the time of year and weather/occasion.** * **D needs supervision and prompting when cleaning, these are skills she is keen to develop to ensure her own space/bedroom is clean, clutter free and presentable.** * **h D as a key fob for her bedroom and the kitchen, staff are required to prompt 's D independence skills relating to the responsibility of keeping the key fob safe, and to use it appropriately.** * **D requires support and supervision in the community, she has gained skills over the past year or two. She has improved, but requires more work to ensure she remains safe and free from abuse. D has started to utilise public transport with the support of a carer – this should continue and further work around road safety will be essential.** * **D enjoys her education mostly, and staff should encourage her to remain focussed and appropriate when tackling her educational work.** * **Support to develop and maintain her relationships with both her peers and family.** * **To learn how to develop and maintain a budget in relation to her finances.** * **D will require support relating to her menstrual cycle, and it would be beneficial for her to become more independent in this area, and provided with coping stratergies to allieviate her anxiety around her cycles.** | | | | |
| **Updated form completed by: Mike Nugent** | | | **Date: January 2018** | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **INFORMATION ABOUT THE CHILD/YOUNG PERSON** | | | | |
| **Initials: E** | **Gender: M** | **DOB: 27/12/99** | | **Age: 18** |
| **Area of Liverpool where the young person lives: Bootle** | | | | |
| **Legal status: N/A** | | **Ethnicity: British White** | | |
| **Language: English** | | **Religion: Roman Catholic** | | |
| **Funding Approval:** | | **Funding Period: Long Term** | | |
| **Social Worker: Mike Nugent** | | **Hours – 12 1:1 individual hours, share of core hours, and share of waking night support**  **This service would be subject to regular reassessments with a view to developing independence and reducing support** | | |
| **Please describe the health needs of this child or young person, including medication and hospital admissions**  **E has Autism and ADHD with associated anxiety and some behavioural issues; LW turned 18 on 27/12/2017. E was voluntarily accommodated under Section 20 of the Children's Act due to aggressive behaviour towards his parents and siblings.**  **E needs a total communication approach to enable him to understand what will be happening next. The distress and anxiety he experiences when he isn't enabled to anticipate his daily routine, manifests in aggressive behaviour. This can include hitting, smacking and verbal abuse. E needs are complicated by family and environmental factors. E mother is being treated for Bi Polar Disorder and although currently stable, her emotional state can fluctuate. As such her own mood can complicate E’s emotional well-being, leading to an escalation in his behaviour, which in turn then makes her feel more unwell, rather like a cycle.**  **E is quite rigid in his thought processes and can become agitated and if things don't happen when he wants them to in the way he wants. E tends to go from A to Z without thinking about the journey inbetween. E has potential to move on, but lacks the confidence and motivational to do so, and would require support to regain his confidence.**  **E would like to engage in recreational activities like the gym, and his goal is to go back to college and he really has the potential to do this with the right support, he would also benefit from ‘healthy sex discussions’. E parents are in agreement with this approach and would like to see their son progress.**  **E is not on any medication, since he made the informed decision of taking himself of medications, his behaviours have improved greatly and he is a much calmer person.** | | | | |
| **Please describe how this child or young person communicates. Please include information about communication systems, behaviours that cause challenges, triggers**  **E is able to communicate and express his views, once he has gained trust with the carers and support staff. E does need total communication approaches and things set out quite rigidly.** | | | | |
| **What does this young person like? Please include activities, places, food, drinks**   * **People who are predictable** * **I am very sociable when I trust people and enjoy being with others. I like banter with staff.** * **I like quiet times often.** * **I need to have an understanding of what Is expected of me and what's going to happen** * **I like things to be right** * **Activities I enjoy include : Gym, boxing and anything healthy, I like fashion and Everton Football Club** * **I enjoy the company of care staff who get me, who are sporty and like playing on x-boxes.** * **I need short lead ups to events** * **I enjoy all foods, and I can follow basic instructions in the Kitchen.** | | | | |
| **What does this young person dislike? Please include activities, places, food, drinks**   * **I do worry about everything** * **I do not like a fuss** * **I don’t like feeling anxious** * **I don’t like a lot of noise and if it is too noisy, I will take myself off to my room** * **I don’t tend to open up to people unless I trust them.** | | | | |
| **Please provide any other important information about this child or young person please include home language, cultural needs, gender specific carers, risks**  **E has advised that he would like carers like his current main carer Barrie, who is down to earth, takes his time with me, supports me well and is very calm. E responds well to male and female carers and would like them to be sporty and encouraging to allow him to gain in confidence.** | | | | |
| **Please provide any other important information about this family, please include risks**  **Mother has bi-polar, but has been stable for some time. E does not get on that well with his mother, and as a result his behaviour can escalate – any contact should be at the St Catherines with staff around, which is E’s wish.** | | | | |
| **Please give clear information about their current care plan including family information, social care involvement and important events**  **E was voluntarily accommodated under Section 20 of the Children's Act due to his aggressive behaviour towards her parents and siblings. He is currently supported by Autisim Initatives in Chambres Road.** | | | | |
| **INFORMATION ABOUT THE SUPPORT PACKAGE REQUESTED** | | | | |
| **What kind of support is needed? (e.g. personal care, health care tasks, community support, family support, overnight support, flexible support)**  **E will require support and encouragement relating to all day to day living tasks, and to develop her social interaction with peers.** | | | | |
| **What are the reasons that this support is needed?**  **E will require monitoring, encouragement and support to reach his potential.** | | | | |
| **When is the support needed? (please add days of the week and times, including term times and school holidays)**  **52 weeks a year including term time and holidays and support to access the local community** | | | | |
| **Where is the support needed? (e.g. in school, in the community)**  **Within supported accomodation and when accessing the local community, and to maintain contact with family and attend medical appointments** | | | | |
| **When is support required to begin?**  **Transistion planning to commence immediately on award of the contract.** | | | | |
| What are the outcomes that are anticipated for this care package? Please include an outcome about independence:   * **E would like to continue to improve his cooking skills by making various different meals with supervision.** * **E lacks confidence relating all of his day to day living tasks, and would welcome motivational prompting and encouragement that he can achieve his goals towards more independence.**   **•     E lacks the confidence to attend college and/or an access to work scheme, but has the capability to excel if he was provided with the correct motivational skills.**  **•    E needs supervision and prompting when cleaning, these are skills he is keen to develop to ensure his own space/bedroom is clean, clutter free and presentable.**  **•     E requires motivational support and supervision in the community, he has gained significant skills over the past year.  He has improved, but requires more work to ensure he remains safe and free from abuse.**  **•    E wishes to re-engage in his educational journey, and has the capability of re-engage and progress, and staff should encourage him to remain focussed and appropriate when tackling re-engaging within education.**  **•     Support to develop and maintain his relationships with both his peers and family.**  **•     To learn how to develop and maintain a budget in relation to his finances.**  **•     E wishes to keep in shape, and would require motivational support in learning how to eat healthily, and exercise appropriately.**  **E  can sometimes make sexualised comments, staff are asked to monitor and engage in healthy sexual discussions.** | | | | |
| **Updated form completed by: Mike Nugent** | | | **Date: January 2018** | |

* ***Sefton Council reserves the right to award the contract/agreement on the basis of a single supplier***

**ADVANCED REQUEST FOR QUOTATION (ARFQ)**

**GUIDANCE NOTES FOR PROSPECTIVE BIDDING ORGANISATIONS**

1. Please note that whenever used in this document, the terms:

* “Organisation” refers to a sole practitioner, limited liability partnership, partnership, incorporated company, co-operative, charity or analogous entities operating outside the UK as appropriate.
* “Officer” refers to any Directors of a Company, Directors of a limited liability partnership, Partners of a Partnership, Trustees of a Charity, company secretary, partner, associate, trustee or other person occupying a position of authority or responsibility within the organisation bidding and who has authority to sign on behalf of the organisation for this contract.

1. Where a group of entities are forming a consortium and bidding as a consortium each member of the consortium not just the lead organisation must respond to questions [as indicated].
2. Organisations not currently operating in the UK should, when answering each of the following questions, substitute where relevant the appropriate legislation/Codes of Practice, equivalent accreditations, appropriate professional, Registrar of Companies, commercial or other registrar applicable within their domestic jurisdiction.
3. Organisations can find information on the Public Contract Regulations 2015 – General Exclusions Reg. 57, within <http://www.legislation.gov.uk/uksi/2015/102/contents/made>

(Question 2.1) (This is the original version of the Regulations - it is your responsibility to check as to whether this SI has been amended and to respond to the ARFQ on the basis of the legally correct current version.)  
  
Regulation 57 includes mandatory and discretionary exclusion criteria.

For Mandatory Exclusions If you cannot answer no to every question in this section it is very unlikely that your application will be accepted and you should contact us for advice before completing this document.

For Discretionary Exclusions:

If you cannot answer no to every question it is possible that your application might not be accepted and you should provide a full explanation in your submission.

1. The copyright, in this document, is owned by, Sefton Council. Please do not scan this document in or take copies of it except so far as is necessary to keep a record of your completed submission.
2. Unless instructed otherwise when answering the questions, please give details, which specifically relate to your Organisation, not to the whole of the group if your firm forms part of a group.
3. Please do not include general marketing or promotional material for your Organisation either as answers to any questions, as it will be considered as unanswered and you may be disqualified from consideration, or for any other reason.
4. Amendments are not to be made to the contract documents by the bidders. Bids containing unauthorised amendments will not be considered.
5. The document contains Gateway Questions, which are shaded in **Blue**, this indicates that these questions are **Mandatory and will be assessed as a Pass/Fail – bidders failing any of these questions will not have their submission considered.**
6. Please answer every question. If the question does not apply to you please write N/A and if you do not know the answer please write N/K. If you fail to complete this questionnaire in full you may be disqualified from consideration.
7. Please ensure answers are clearly indicated with a **tick**. Failure to do so may result in your submission being disqualified from consideration.
8. You MUST inform the Council of any changes to the information supplied or of any additional information between the date when you complete the document and the date when the contract starts.
9. In order to simplify this process a limited number of statements or documents have been requested. Please mark clearly on enclosures the name of your organisation and the number of the question to which it relates.
10. The Council reserves the right to issue supplementary documentation at any time during the bid process to clarify any issues or amend any aspects of the published documentation. All such further documentation that may be issued shall be deemed to form part of the contract/agreement documentation and shall supplement and/or supersede any part of the previous documentation.
11. Satisfactory insurance cover in accordance with Council requirements must be in place at the commencement and throughout the life of the contract, the Council reserves the right to review those levels throughout the lifetime of the contracts.
12. Sefton Metropolitan Borough Council may abandon the bidding process at any time and is not bound to accept any bids and will not be liable under any circumstances whatsoever for the costs bidders incur in preparing the submission.
13. All questions relating to this quotation must be submitted via The Chest’s Question and Answer facility. Please refer to **previously asked questions** before asking a question as duplicate questions will not be answered.  
      
    Both questions and answers will either be made public on The Chest or responded to directly to the originator depending on the content.

**The Council Officers will not respond to questions asked after:**

**Thursday 1st March 2018 12:00 hrs**

1. Sefton Council will provide all bidders with their final ranked position only after the evaluation process is complete upon request via The Chest’s Question and Answer facility.
2. Decisions are usually made 1 weeks following the closing date of the ARFQ.
3. **Acceptance of offers**

You should note that: -

* 1. The Council reserves the right not to accept the lowest, or any, quotation.
  2. The Council reserves the right not to consider any bid which exceeds the indicative budget, when published.
  3. The Council reserves the right to accept the whole or defined lots of the quotation without accepting the remainder.
  4. Acceptance of a quotation/award of contract will be by written communication from the Council via the Chest.
  5. This quotation does not confer exclusivity nor guarantee orders.
  6. Quotations will only be considered that have been submitted via the chest portal, and before the closing date and time published in this document.

1. **Access to information**

Under the Freedom of Information Act 2000 and the Environmental Information Regulations, the Council may be required to disclose either information about your bid or the quotation itself, including your price or range of prices once a contract is awarded and information that you regard as commercially sensitive. Requests for non-disclosure must accompany your bid and include clear and substantive justification.

1. **Transparency of spend**

If you are awarded this contract, any individual payments made to you over £500 may be published automatically in our transparency data on the Councils web page

1. **Terms & Conditions**

The Terms and Conditions upon which the Council proposes to procure are contained either within this document, or are appended to it within the Chest portal. Suppliers are advised to fully consider these **before** submitting a quotation.

1. Bidders are reminded to take note of the applicable Terms and Conditions of Contract. All bidders will be required to confirm, via a tick-box on The Chest, that they have read and accepted them.
2. Best and Final Offer

The Council reserves the right, as afforded within Sefton Council’s Contract Procedure Rules, to employ a Best and Final Offer stage (BAFO). Where that BAFO changes an element of evaluation criteria for the Core Requirement, then that element of the bidders tender will be re-scored. This process will be managed through The Chest.

**TIMETABLE**

**This is an indicative timetable only and may be subject to change at the absolute discretion of the council**

| **Stage** | **Date** | **Time** |
| --- | --- | --- |
| Deadline for questions | Thursday 1st March 2018 | 12 noon |
| Deadline for submission | Tuesday 6th March 2018 | 12 noon |

Bidders may make any adjustment to their bid submitted previously via The Chest at [www.the-chest.org.uk](http://www.the-chest.org.uk) up to the deadline date and time of the bid. The last bid document uploaded on to The Chest will be the only one that will be considered. Earlier bid documents are not retained, so the final bid document must be a fully inclusive submission.

**Bidders must ensure that all documentation is submitted on time. Please bear in mind fluctuations in connectivity or the uploading of larger documents can mean that the process takes longer than anticipated. Any documents submitted after the deadline date and time may not be considered. Please also note that access to The Chest is arranged independently of the Council and it is your responsibility to ensure your registered users are updated and have access as your organisation requires.**

The Council will not be responsible for contacting the bidder through any other route than the nominated contact(s) on The Chest. **The Council will not be held responsible for organisations who do not keep their contact details up to date.**

**Technical Support - Assistance**

If you experience any technical problems in using The Chest, email [nwsupport@due-north.com](mailto:nwsupport@due-north.com) or telephone 0845 293 0459.

Supplier help guides are available on The Chest from [www.the-chest.org.uk](http://www.the-chest.org.uk)

**Award and Evaluation Criteria**

**This ARFQ will be awarded to the Most Economic Advantageous Quotation through assessment and weighted scores as detailed below:**

|  |  |
| --- | --- |
| **CRITERIA** | **WEIGHTING %** |
| **Mandatory Information** | **Pass or Fail** |
| **Quality Section** | **70%** |
| **Price** | **30%** |
| **TOTAL** | **100%** |

**Mandatory Information**

This part of the document contains **Gateway Questions**, which are shaded in Blue, this indicates that these questions are critical and it is vital that you **must** answer them, as this may result in a **Pass or Fail** at this stage and your submission not considered further.

**Quality Questions**

|  |  |
| --- | --- |
| **Criteria** | **Weighting Percentage** |
| **Questions /Quality**  Question 1  Question 2  Question 3 | **70%**  33%  33%  34% |
| **Price** | **30%** |
| **Total** | **100%** |

The questions will be assessed using the following scoring matrix:

|  |  |
| --- | --- |
| **Score** | **Criteria** |
| **5** | Exceeds required standards and offers added benefits |
| **4** | Meets the required standards well |
| **3** | Mostly meets the required standards but fails in parts |
| **2** | Mostly fails to meet the required standards |
| **1** | Significantly fails to meet the required standards |
| **0** | No response |

Where the marks available for a question exceed 5 (i.e. from the 0-5 scale above) then a factor will be used. For example where 33 marks are available for a question then a factor of 6.6 will be applied given that 33 is divisible by 5, 6.6 times.

Once marks from a maximum of 100 are allocated to a bid through evaluation then an overall factor of 0.70 will be applied to represent Quality scoring as a maximum of 70% weighting.

For example where two bids are scored 100 and 75 marks respectively, they would be factored as follows :

Bidder 1 - 100 x 0.70 = 70 marks for Quality

Bidder 2 - 75 x 0.70 = 52.5 marks for Quality

**Price**

The lowest price, identified as the ‘TOTAL Cost’ on the Pricing Schedule contained at Part 3 herein, and submitted in line with the specification will be awarded 30%. All other prices will be expressed as a proportion of the highest score.

The ‘Price’ element scoring is to be assessed by awarding 100 marks to the lowest priced bid for the provision of the whole requirement. Then, for all subsequent bids a mark will be deducted from 100 for each % by which that bid differs from the lowest priced bid.

A worked example:-

Where we would be comparing two bids with weekly pricing at say £1200 and £1,000, the lower bid would score 100 marks, the higher bid would be scored as follows:

(1000 – 1200) divided by 1200 x 100 = - 16.66% (rounded)

i.e. the lowest priced quotation is 16.66% less than the next bid.

Therefore where the lowest price quotation receives a score of 100, the next bid is scored

100 – 16.66 = 83.34

Bidder 1 = 100 marks

Bidder 2 = 83.34 marks

Scores from 100 marks are then factored by 0.30 to represent a maximum of 30% weighting :

Bidder 1 100 x 0.30 = 30 marks for Price

Bidder 2 83.34 x 0.30 = 25 marks for Price

Quality / Price Example Summary

Each bidder’s individual marks for Quality and Price will be totalled to produce an overall score so in the example shown above this would equate as follows:

Bidder 1 - 70 (for Quality) + 30 (for Price) = 100 marks

Bidder 2 - 52.5 (for Quality) + 25 (for Price) = 77.5 marks

**PART 1 – MANDATORY INFORMATION**

Organisation Information

|  |  |  |
| --- | --- | --- |
| Section 1 |  | **Answer Fields** |
| 1.1 | Name and address of the organisation in whose name a quotation(s) would be submitted: |  |
|  |
| 1.2 | Registered or trading name and address if different from question 1.1 |  |
|  |
| 1.3 | Correspondence address if different from question 1.1 |  |
|  |
| 1.4 | Does your organisation have a website, if so please provide the address? |  |
|  |
| 1.5 | Company Registration, LLP Number or Registered Charities number and date of registration (if this applies) |  |
|  |
| 1.6 | Contact names and details for the Contract Manager (responsible for managing the contract) |  |
|  |
| 1.7 | Name of ultimate holding or subsidiary companies including addresses and an explanation of group structure and internal relationships |  |
|  |
| 1.8 | [Is your Organisation:](https://www.thechest.nwce.gov.uk/procontract/halton_evaluate.nsf/dsp_frm_adv_question_summary/ADVMSTEVALQUES-NWCE-89GDEV?editdocument&from=frm_adv_template_summary&login) |  |
| A Public Limited Company |  |
| A Limited Company |  |
| A Partnership |  |
| A Sole Trader |  |
| Voluntary/Community Association (Third Sector) |  |
| A Consortium – If so please state in question 1.1 details of all consortia members relating to this submission (see guidance note point 2) |  |
| Other – Please Specify |  |
| 1.9 | Please give the names and addresses of each of the senior members of your organisation (for example sole trader, partner, director or company secretary): |  |
|  |
| 1.10 | Please state if any employee of your organisation has a relative(s) who is employed by this Council or who is an Elected Member of this Council. Please provide details. This will not preclude your ARFQ submission from consideration. |  |
|  |

Professional Standing

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Section 2 |  | | | **Answer Fields** |
| 2.1 | Has your organisation been in breach of any of the General Exclusion clauses in <http://www.legislation.gov.uk/uksi/2015/102/regulation/57>. It is your responsibility to read the Regulation so you can answer this question correctly. Has your organisation or any director or any person with powers of representation, decision or control of your organisation been convicted of any offences set out in Reg. 57(1) of the Public Contracts Regulations 2015.  If you answer yes you must provide details of the breach, nature of the case, findings of the court, or result of the investigation.  (Please note – it is your responsibility to check as to whether this SI has been amended and to respond to the ARFQ document on the basis of the legally correct current version.) | | | Yes  No |
| Section 3.  Insurance | | | | | |
| The Council requires successful contractors to maintain minimum liability cover based on the following.  Public Liability £10 million  Employers Liability £10 million  Professional Indemnity  £5 million  Residents Effects Cover £500 in respect of any one claim for each Child.  Vehicle Insurance Cover the Provider and its Staff shall have in place motor vehicle  insurance commensurate with the potential liabilities of the  Provider relating to the operation of vehicles used for the  transport of Children and their visitors  Malpractice Insurance£1 million per occurrence where nursing care is provided, or  the Parties agree such insurance is appropriate    Please see details above regarding additional insurances required for this service. | | | | | |
| 3.2 | Please provide Insurance details below: | | | | |
|  |  |  | | |
|  |  |  | | |
| 3.3 | Do you currently satisfy the above levels of Insurance and will you maintain this level of insurance throughout the lifetime of the contract?  Please Tick  If no, you must guarantee that you will be able to increase your cover to our specific limits throughout the lifetime of the contract?  Please Tick to confirm you accept this and understand you must supply evidence satisfactory to the Council if you are awarded the contact. | | | Yes  No  Yes  No | |

Equal Opportunities

|  |  |  |
| --- | --- | --- |
| Section 4 |  | **Answer Fields** |
| 4.1 | Is it your policy as an organisation to comply with the Equality Act 2010 and to treat all people fairly and equally so that no one group of people is treated less favourably than others? | Yes  No |
| 4.2 | In the last three years has any finding of unlawful discrimination been made against your organisation by any court or industrial or employment tribunal or equivalent body? | Yes  No |
| 4.3 | In the last three years has your organisation been the subject to a compliance action by the Equality and Human Rights Commission or an equivalent body on grounds of alleged unlawful discrimination? | Yes  No |
| 4.4 | If the answer to Q4.2 and / or Q4.3 is Yes, please advise us briefly of the findings and the steps your organisation has taken as a result of that finding or investigation? Please provide written evidence. | Enclosed |
| 4.5 | What does your organisation do to ensure that equality and diversity is embedded within your organisation? Please provide written evidence. | Enclosed |

Technical Information

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Section 5 |  | | | | | **Answer Fields** |
| 5.1a | Please provide two examples detailing any **similar** business activities within the past two (2) years, undertaken by your organisation which you consider demonstrate experience and expertise in delivering goods/services/works of a similar size and nature to this contract. | | | | |  |
|  | | | | |
| 5.1b | Please provide details of two (2) referees (preferably other Local Authority or Public Sector Bodies) from whom the Council can take up professional/technical references. The references provided must be for recent contracts that are similar to that which is proposed by the Council in terms of content and value. **The referees must be contacted and agree to providing a reference prior to this questionnaire being submitted**.  Note: The Council reserves the right, should references sought be unsatisfactory, to seek further references from other organisations for whom your firm undertakes work. Should the Council be unable to obtain satisfactory references, then your bid may be precluded from an award of business.  **Sefton Council should not be included as a referee, although you may in relation to 5.1a include examples of activity supplied by the Council.** | | | | |  |
| **Company Name** | | **Contact Name** | **Email** | **Telephone Number** | **Duration and Value of Contract** | |
|  | |  |  |  |  | |
|  | |  |  |  |  | |
| Sub-Contractors – If using subcontractors answer 5.2-5.3, if not answer 5.2 only | | | | | | |
| 5.2 | Do you anticipate using sub-contractors in respect of the above work? If known please provide details. | | | | | Yes  No |
|  | | | | |
| 5.3 | Does your organisation manage suppliers/sub-contractors to ensure that programmes of work are met and product quality is satisfactory? If yes please provide details of how they are selected and monitored | | | | | Yes  No  N/A |
|  | | | | |

Health and Safety

|  |  |  |
| --- | --- | --- |
| Section 6 | **NOTE TO ORGANISATION:**  **This section will be evaluated on a pass/fail basis** | **Answer Fields** |
| **THIS IS OUR ORGANISATION’S COMMITMENT TO HEALTH AND SAFETY:**   * To provide adequate control of the health, safety and welfare risks arising from our work activities which may affect workforce or others * Where required by law, to adopt a H&S Policy Statement and publish to employees * To consult with our workforce on matters affecting health and safety * To provide and maintain safe plant and equipment * To ensure safe handling and use of substances * To provide information, instruction and supervision for workforce * To ensure all workforce are competent to do their tasks, and to give them adequate training * To prevent accidents and cases of work related ill health * To maintain safe and healthy working conditions * To ensure sufficient funds are available to implement this statement; and; * To review and revise this statement as necessary at regular intervals not exceeding 12 months.   **Declaration:** In submitting this completed ARFQ, I/we agree to ensure that our entire workforce will comply with all relevant health and safety legislation, as well as any instructions from the Authority, whilst our organisation undertakes any work on behalf of the Authority.   |  | | --- | | **Yes**  **No** |   If the answer to the above question is **no**, please explain why not:   |  | | --- | |  |  |  | | --- | | **Criteria for Assessment**   * If Yes – Pass * If answered no but no details provided – Fail * If answered no and full details given: -   Taking into account the severity of the discrepancy, assess the extent to which this affects their ability to provide the works or services | | | |

Quality Assurance

|  |  |  |
| --- | --- | --- |
| Section 7 |  | **Answer Fields** |
| 7.1 | Does your organisation hold a recognised Quality Assurance Standard (e.g. BS/EN/ISO 9001 or service specific equivalent)?  If yes pleasewritten evidence..  If you have a Quality Assurance Standard but not to the above standards please provide relevant details or attachments of any measures that your organisation undertakes to ensure:   * Quality * Customer Care * Continuous Improvement | Yes  No  Enclosed  Enclosed |
|  |

Data Management

|  |  |  |
| --- | --- | --- |
| Section 8 |  |  |
| 8.1 | In the last three years has your organisation had contact made with you by the Information Commissioner in relation to any alleged breach of the Data Protection Act 1998, the Freedom of Information Act 2000 or Environmental Information Regulations 2004?  If you have answered Yes to 8.1, please provide basic information in connection with the nature of the case; findings of the Court; or result of the investigation/notice  If contravention was found, what steps have been taken to prevent a recurrence? Please provide written evidence. | Yes  No  Enclosed |
|  |

Safeguarding

|  |  |  |
| --- | --- | --- |
| Section 9 |  | **Answer Fields** |
| 9.1 | Does your organisation undertake adequate checks of staff including references, DBS checks etc.  Please tick | Yes  No |
| 9.2 | Do you have an up to date Single Central Record for Disclosure & Barring Service checks for staff and volunteers?  Please note that you will be required to provide a copy of your Single Central record and policies and procedures if you are offered a contract. | Yes  No |
|  |
| 9.3 | Do you have policies and procedures that comply with current HM Government (Home Office) legislation regarding changes to criminal records and barring arrangements?  Please tick. | Yes  No |
|  |

Safe Assessment

|  |  |  |
| --- | --- | --- |
| Section 10 |  | **Answer Fields** |
| 10.1 | Provide a safe assessment of the community where the placement is and identify any risks regarding gun & gangs, and child sexual exploitation and record detailed mitigation against any risks identified.  Please Enclose | Yes  No |

Essential Competencies

|  |  |  |
| --- | --- | --- |
| Section 11 |  | **Answer Fields** |
|  | The specification identifies the following essential skills, practice knowledge and service registration. Are you able to meet these requirements? | Y/N |

**PLEASE NOTE**:

* In the event of an emergency situation the council reserves the right to make a direct award.

**PART 2 – QUALITY QUESTIONS (worth 70% of Total Score)**

**Please be aware the word counts given include words contained within diagrams, tables etc. Arial Font is required, minimum font size acceptable is 11.**

|  |  |  |
| --- | --- | --- |
|  |  | ***Max Word Count*** |
| 1 | Demonstrate, through recent examples, how you have successfully undertaken similar work, including, experiences of successfully caring for a child or young person with similar needs to the child or young person described in this document. | ***500***  ***words***  ***33%*** |
|  | **Answer** |  |
| 2 | Please describe how you will bring positive skills to support the families behaviour management and understading. Providing positive role models? | ***500 words***  ***33%*** |
|  | **Answer** |  |
| 3 | Provide a description of your provisional plan for:   * Supporting the child or young person described on this document. * Meeting the specific outcomes associated with this child or young person as described in the person specification contained within this document. * Within your plan please highlight who will responsible for completing / reviewing care plans. | **500 words**  **34%** |
|  | **Answer** |  |

**PART 3 - PRICING SCHEDULE (30% of total Marks)**

All bids must be fully inclusive of all costs to be incurred by the Bidder in the provision of the goods, works and services. It is the bidder’s responsibility to ensure that they are fully familiar with the requirements and the bid is fully inclusive of all requirements (Exclusive of VAT).

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**Please provide details of the cost per week below.**

|  |  |
| --- | --- |
| Care staff costs |  |
| Management costs |  |
| Other back office costs |  |
| Other costs |  |
| **Total per week** |  |

**PLEASE NOTE**

The council’s standard payment terms are 30 days from receipt of a correct invoice.

**Checklist**

Information, which must form part of the quote, is detailed in the checklist below. This checklist has been provided in good faith to assist Bidders, but it is solely the Bidder’s responsibility to ensure that all relevant documents are completed and returned as instructed.

**It is your responsibility to ensure that the completed submission is uploaded successfully on The Chest by the deadline specified.**

|  |
| --- |
| Part 1 - Mandatory Information including Safe  Assessment |
| Part 2 - Responses to Quality Questions |
| Part 3 - Completed Pricing Schedule (Appendix A) |
| Signed Declaration |

**DECLARATION**

I/We certify that the information supplied by me/us in this document is accurate to the best of my/our knowledge. I/We understand that the giving of false or incomplete information could result in my/our exclusion from the quotation exercise and may result in Criminal Proceedings.

I/We also understand that it is a Criminal Offence, punishable by imprisonment, to give or offer any gift or consideration whatsoever as an inducement or reward to any servant of a public body and that any such action will empower the Council to cancel any contract currently in force and will result in my/our exclusion from the quotation exercise.

I/We certify that I/we have not now or will in the future, canvassed or solicited any member, officer or employee of the council and any other companies in the group of which the council forms part, in connection with this document and that to the best of our knowledge and belief no person employed by me/us or acting on my/our behalf has done such an act.

Signed for on the behalf of the Organisation:

Name:

Position/Status in the Organisation:

Date: