

**Adult Social Care and Public Health**

**Invitation to Tender**

|  |
| --- |
| CONTRACT TITLE |
| **Leicester Dementia Support Service**  |

|  |
| --- |
| NAME OF ORGANISATION |
| **Alzheimer’s Society** |

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| --- |
| **This document should be completed and returned in accordance with the Instructions to Tenderers** |
| **Completed Questionnaires to be submitted by:** | **2 October 2014 15:00 hours**  |
| **eTendering Portal Address** | [**https://www.delta-esourcing.com/delta**](https://www.delta-esourcing.com/delta) |
| **Tender Access Code (TAC)** |  |



Leicester City Council

This authority has an environmental management System and its environmental performance is Reported to the public in accordance with the Eco-Management and Audit Scheme for UK Local Government, within the framework of the EC Scheme: (UK-U-0000036)

EC

ECO MANAGEMENT

AND

AUDIT SCHEME

FOR UK

LOCAL GOVERNMENT

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BUSINESS QUESTIONNAIRE

## SECTION A: GENERAL INFORMATION

**Note: If you have completed this questionnaire recently for the Advocacy Service Tendering (Ref: 57FY7U57Q9) and/or Information, Advice and Guidance Service Tenndering (Ref: J88Y6ES6W6) please only respond to complete the questions as indicated below:**

**Section A – General Information**

**A1: 1.1, 1.2, 1.6, 1.7, 1.8, 1.9**

**Section B – Financial & Insurance Information**

**B4:4.1 Insurance Information**

**Section C – Technical Resources and References**

**C5:5.1 Technical Resources**

**C6:6.1 References**

|  |  |
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| A1. | **BASIC DETAILS OF YOUR ORGANISATION** |
| 1.1 | Legal name of the organisation submitting this application(this must be the Company with the same legal entity that will contract with the Council) | ALZHEIMER’S SOCIETY |
| 1.2 | Contact person for enquiries about this form: |
| Name  |  |
| Job title | OPERATIONS MANAGER |
| Email address |  |
| Office telephone number | 0116 231 1111 |
| Mobile telephone number |  |
| 1.3 | Company Registered address including post code | Devon House58 St Katharine’s WayLONDONE1W 1LB |
| 1.4 | Legal status of organisation(please tick as appropriate) |           |
| 1.5 | Company registration number(if registered at companies house) | 2115499 |
| Certificate of Incorporation date | 26/03/1987 |
| 1.6 | Is the potential provider applying as a lead organisation in a consortium, joint venture or other arrangement, or intends to use third parties to provide some of the services |   |
| If Yes, please provide details of the member organisations of the consortium and their respective roles |
|       |
| Please provide details of the constitution, date of formation, and percentage shareholdings |
| **Organisation** | **Date of formation** | **Percentage shareholding** |
|       | Select Date |       |
|       | Select Date |       |
|       | Select Date |       |
|       | Select Date |       |
|       | Select Date |       |
| Please provide details of the composition and governance of the proposed supply chain, and areas of responsibility |
|       |
| 1.7 | Please indicate by ticking the appropriate box whether you are: |
| **Type A potential provider:**1. An organisation able to deliver all of the requirements itself, or
2. A prime contractor with the complete supply chain (sub-contractors) in place to deliver all of the requirements
3. The potential provider is a consortium
 |  |
| **Type B potential provider:**1. A prime contractor able to deliver all requirements but unable to confirm all sub-contractors at this stage

You will need to demonstrate satisfactory methodology and track record of delivering a supply chain. |  |

|  |  |
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| 1.8 | **Type A potential provider:**If your answer to 1.7 is (b) or (c) please indicate the composition of the supply chain, indicating the roles and services to be fulfilled and supplied by the Tenderer and each relevant organisation for the service applied for. Please provide details of any current partnership agreements (including a partnership dispute resolution). If considered not applicable, please state this and the reason why. If partnership agreements between members of the consortium are yet to be formed please provide details of what steps will be taken to ensure these agreements will be in place. |
| **Requirement** | **Organisation** | **How much of the requirement and what will they directly deliver (%)** |
|       |       |       |
|       |       |       |
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| 1.9 | **Type B potential provider:**If your answer to 1.7 is (d) please indicate the composition of your supply chain below (this may include the potential provider itself or solely be the potential provider) |
| **Requirement** | **Organisation** | **How much of the requirement and what will they directly deliver (%)** |
|       |       |       |
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|       |       |       |
|       |       |       |
| Please explain your methodology for procuring a supply chain leading to a successful solution. Support this with details of relevant experience of selection of supply chain members for this type of procurement. |
|       |

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| 1.10 | Are you a Small/Medium Sized Enterprise (SME)?1. Less than 9 employees (Micro)
2. Less than 50 employees (Small)
3. Less than 250 employees (Medium)
4. More than 250 employees (Large)

How many staff does your organisation have in total?(include part-time staff and volunteers) |                *X*10,159 |
| 1.11 | Does your business fall within the category of the Voluntary and Community Sector (VCS)?Definition:*“The VCS is diverse in nature and identifies the following types of organisation as constituting the sector:* *Voluntary Organisations are formally structured, not-for-profit, independent and not part of government. They tend to be managed by unpaid, voluntary management committees or boards of trustees. They have paid employees and volunteers and may be registered as charities, companies limited by guarantee or friendly societies. Social enterprises and Community Interest Companies are also regarded as voluntary organisations.**Community Organisations are local and self-help groups. They tend to be less formal and are often made up of volunteers. Paid staff are likely to be part-time. They are independent and are often at the centre of community action and are formed in response to a local need.**Social Enterprises are businesses that trade in the market in order to fulfil social aims and reinvest profit (surpluses) in social projects.* *Umbrella Organisations are also referred to as Infrastructure Organisations. Umbrella organisations link the different levels and type of voluntary sector activity. In general, they fulfil four main functions; strategic development, support services to other organisations, liaison and representation. Examples of umbrella organisations in Leicester include Voluntary Action Leicestershire and The Race Equality Council.”*  |
|  |

|  |  |
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| A2. | **MANAGEMENT** |
| 2.1 | Please list the full names of the Directors, Partners, Associate and the Company Secretary or Trustees of your organisation | Dame Gill Morgan OBE (Chair)Ann Beasley CBE (Vice Chair)John Grosvenor (Hon. treasurer)Tom HavertyProfessor Robin JacobyAlan Wells OBEPippa GoughIan SherriffRichard FordSir Chris PowellSarah Weir OBEBernard Herdan CB |
| 2.2 | Please advise if any of the people listed in 2.1 1. have been employed by Leicester City Council in the last three years or
2. Currently Elected Members (Councillors) of Leicester City Council
 |  |
| If Yes, please enclose details |  |
| Please advise if any relative(s), partner(s) or associate(s) of the people listed in 2.11. have been Employed by Leicester City Council at a senior level or
2. Is an Elected Member (Councillor) or
3. have any involvement in other organisations that provide services to the Council
 |  |
| If Yes, please enclose details |  |
|  |  |

## SECTION B: FINANCIAL & INSURANCE INFORMATION

|  |  |
| --- | --- |
| B3. | **FINANCIAL INFORMATION** |
| 3.1 | Please state your total turnover in each of the last two financial years (if you are leading a consortium please state its aggregated turnover). | Year 1for year ended31/03/2014 | Year 2for year ended31/03/2013 |
| 3.2 | **At least one** financial document listed below is required. Please indicate which of the following documents has been enclosed: |
| X☐☐ | A copy of your audited accounts for the last two most recent years of trading (if applicable)A statement of your turnover, profit & loss account and cash flow for the most recent year of tradingA statement of your cash flow forecast for the current year and a letter from your bank outlining your current cash and credit position |
| 3.3 |  |
| Name and address of banker |  |
| 3.4 | Would the ultimate holding company/parent organisation be prepared to guarantee your contract performance as its subsidiary or can you provide other forms of security for contract purposes? |  |
| 3.5 | Has your organisation met the terms of its banking facilities and loan agreements (if any) during the past year? |  |
| 3.6 | Has your organisation met all its obligations to pay its creditors and staff during the past year? |  |
| 3.7 | If the answer to question 4.5 and 4.6 above is NO, please provide further details |
| Details Enclosed |  |
| 3.8 | Who is the person in the organisation responsible for financial matters? (this is the person to be contacted for further financial information if required) |
| Name |  |
| Job Title | Operations Manager |
| Email address |  |
| Contact number | Office: 0116 231 1111 | Mobile:  |
| B4. | **INSURANCE INFORMATION** |
| 4.1 | Please indicate the level of insurance cover that you hold:  |
|  | **Minimum Required** | **£Million** | **Date of Expiry** |
| Employers Liability | £10M | £ 10M | 30/06/2015 |
| Public Liability | £10M | £ 10M | 30/06/2015 |
|  |  |  |  |
| 4.2 | If you do not currently hold the minimum cover required, **please confirm that you are willing to get the required minimum insurance cover prior to agreement on this contract** |  |
| 4.3 | Has your organisation or any of its Directors been refused insurance cover within the last 5 years |  |
| If yes, please give details of refusal           |

## SECTION C: TECHNICAL RESOURCES & REFERENCES

|  |  |
| --- | --- |
| C5. | **TECHNICAL RESOURCES** |
| 5.1 | Please list the staffing levels in your organisation by completing the table below including professional, managerial and technical expertise that are available in your organisation to enable you to carry out work for this authority e.g. training, finance, experience etc. Please include qualifications of staff.**Note:** Your response must be in accordance with your response to the Section 6 Form of Tender 6.2.3 Service Provision and Client Groups. |
| **Staff/Position**  | **Number of Staff** | **Qualifications, Skills, Training & Experience**  |
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| **Organisational Chart enclosed** |  |

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| 5.2 | Please give details of membership of regulatory or professional bodies with which you are registered. Please state any registration numbers and provide copies of valid registration certificates and Statement of Purpose.(e.g.: General Quality Mark and Specialist Quality Mark – The Assessment Network (TAN) Framework standard)  |
| **Professional / Regulatory Body** | **Registration Number** | **Date of Registration** | **Registered Responsible Person** |
|  |  |  |  |
|  |  |  |  |
| Care Quality Commission | CRT1-1020348791 | 01.10.2010 |  |
| **Certificates and Statement of Purpose enclosed** |  |
|  |  |  |
|  |  |
| 5.3 | (OPTIONAL/ If applicable)Please confirm that if successful, prior to the commencement of the services you will have in place the necessary registration requirements for the provision of Advocacy Services |  |

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| C6. | **REFERENCES** |
| 6.1 | Please provide brief details of a **minimum of** **2 organisations/stakeholders** (e.g. funders, user/carer, accountant, etc.) for which the applicant has carried out work within the past 3 years in relation to Leicester Dementia Support Service or similar service provision.  |
|  |  |
|  | **Reference 1** | **Reference 2** | **Reference 3 (LCC if applicable)** |
| **Organisation Name** |  |  |  |
| **Contact Name** |  |  |  |
| **Job Title** |  |  |  |
| **Telephone Number** |  |  |  |
| **Email Address** |  |  |  |
| **Website Address** |  |  |  |
| **Contract Title** |  |  |  |
| **Date of Contract Award** |  |  |  |
| **Contract Value** |  |  |  |
| **Date Contract Completed** |  |  |  |
| **Brief Description of Contract (max 100 words)** | Providing a county-wide Memory Support Service to support people with dementia and memory loss and their carers. | Providing support groups for carers in East Leicestershire and Rutland  |  |

|  |  |
| --- | --- |
|  | If you cannot provide information on at least one reference contract, please explain why |
| Max 100 wordsNot Applicable |

|  |  |  |
| --- | --- | --- |
| 6.2 | Track record in respect of contract compliance in the last 3 years? |  |
| If No, please enclose details |  |

|  |  |  |
| --- | --- | --- |
| 6.3 | Within the last 3 years has your organisation ever had to pay financial penalties or contractual damages levied in respect of failure to perform the terms of contract? |  |
| If yes, please enclose details |  |

|  |  |
| --- | --- |
| C7. | **SKILLS & EXPERIENCE** |
| 7.1 | Please summarise your experience within the past 3 years of undertaking contracts similar or comparable to those for which you wish to tender, including contracts for local authority clients, other public sector bodies, Third Sector agencies and private sector organisations. |
| **Max 300 words** |

## SECTION D: BUSINESS APPROACH

|  |  |
| --- | --- |
| D8. | **QUALITY ASSURANCE** |
| 8.1 | Does your organisation apply documented quality management procedures? |  |
| 8.2 | Does your organisation hold a recognised quality management accreditation, for example [QMS]? |  |
| Certificate enclosed |  |
| 8.3 | If you do not have a quality certification or a quality management system, please explain why |
| **Max 250 words**Not Applicable |
| 8.4 | Does your organisation have specific procedures to ensure effective communication with your clients and customers |  |

|  |  |
| --- | --- |
| D9. | **BUSINESS CONTINUITY PLANNING** |
| 9.1 | Does your organisation have a formal Business Continuity Management Programme? |  |
|  |  |
| 9.2 | If your organisation does not have Business Continuity Management Programme for the service subject of this procurement then please confirm that if successful you will have a Business Continuity Management Programme in place within six months of the commencement of the contract |  |
|  |  |
| D10. | **DATA PROTECTION** |
| 10.1 | Does your organisation apply procedures for the protection of personal information about individuals in conformity with the Data Protection Act 1998? |  |

|  |  |
| --- | --- |
| D11. | **TRAINING** |
| 11.1 | Please describe briefly how your organisation maintains a structured programme of training and professional development for your staff throughout their employment |
| **Max 250 words**  |

## SECTION E: POLICIES & PROCEDURES

|  |  |
| --- | --- |
| E12. | **POLICIES & PROCEDURES** |
| 12.1 | In delivering the requirements of this contract, the Council will require the Provider to work to the principles set out in a number of National and Local Acts, policies and regulations. Please confirm that your Organisation will work to the following within the three months of the start of the contract.  |
| **No** | **Act/Legislation** |  |  |
| 1 | Companies Act |  |  |
| 2 | Data Protection Act |  |  |
| 3 | Disabled Persons (Employment) Act |  |  |
| 4 | Employment Relations Act and Regulations |  |  |
| 5 | Employment Rights Act |  |  |
| 6 | Equality Act 2010 |  |  |
| 7 | Freedom of Information Act |  |  |
| 8 | Health and Safety at Work Act and Regulations |  |  |
| 9 | Human Rights Act |  |  |
| 10 | National Minimum Wage Regulations |  |  |
| 11 | Bribery Act 2010 |  |  |
| 12 | Rehabilitation of Offenders Act |  |  |
| 13 | Safe Guarding Adults National Framework of Standards and the Leicester, Leicestershire & Rutland – “No Secrets – Safeguarding Adults: Multi-Agency Policy and Procedures for the Prevention of Abuse of Adults in need of Safeguarding” |  |  |
| 14 | Section 117(2) Local Government Act 1972 |  |  |
| 15 | Working Time Directive (EC Regulation) |  |  |
| 16 | Health and Social Care Act 2012 and subsequent secondary legislation |  |  |

|  |  |
| --- | --- |
| 12.2 | Please confirm that your Organisation either currently has these policies and procedures in place or will have them in place at the commencement of a Contract if awarded.  |
| **No** | **Policy/Procedure** |  |  |
| 1 | Acceptance of Gifts/Legacies |  |  |
| 2 | Access to Records |  |  |
| 3 | Business Continuity Planning |  |  |
| 4 | Code of Conduct  |  |  |
| 5 | Complaints and Commendations |  |  |
| 6 | Confidentiality and Disclosure |  |  |
| 7 | Critical incidents / accidents / emergencies responding / recording |  |  |
| 8 | Home Visiting (if applicable) |  |  |
| 9 | Declaration of Interest/Conflict of Interest |  |  |
| 10 | Lone Working |  |  |
| 11 | Personnel Issues (including grievance and disciplinary) |  |  |
| 12 | Professional Conduct |  |  |
| 13 | Quality Assurance Policy |  |  |
| 14 | Staff Training, Development, Mentoring and Supervision |  |  |
| 15 | Violence against staff |  |  |
| 16 | Whistle Blowing guidance/policy of Partners |  |  |
| 17 | Recruitment of Volunteers |  |  |
| 18 | Volunteer Expenses |  |  |
| You are not required to submit any policies and procedures with your tender, except for those stated elsewhere in the tender questionnaire. However, the Council will have a right to view these policies and procedures if required upon reasonable request.  |

## SECTION F: HEALTH & SAFETY

|  |  |
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| F13. | **HEALTH & SAFETY** |
| 13.1 | Any organisation employing **more than four employees** has by law to prepare and bring to the attention of employees a written Health and Safety Policy Statement. A Health and Safety Policy usually has three distinct sections namely:* **General Policy Statement** – a short statement outlining the organisation’s commitment to health and safety, signed and dated by the senior organisation official (for example the Managing Director)
* **Organisation** – how the organisation addresses health and safety; lines of communication between managers and staff; and any specific duties/responsibilities assigned within the organisation – this should be relatively straightforward for small organisations.
* **Arrangements** – the systems and procedures in place for ensuring employees’ health and safety at work. “System” means processes and procedures to ensure that health and safety is properly managed and that legal requirements are met.
 |
| Please enclose a copy of your organisation’s Health and Safety Policy and manual which demonstrates the above. This should be no more than two years old and should be signed and dated by your Chairman/Chief Executive/Managing Director or Company Secretary |
| **Policy Enclosed** |  |
| 13.2 | If your organisation has **less than 5 employees**, please provide a letter or statement of your commitment to comply with the Health & Safety at Work Act (1974) and the matters in regulation 4 of the Management of HSW Regulations 1999.  |
| **Policy Enclosed** |  |
| 13.3 | Name of Director, Partner or other person responsible for the implementation of the organisation’s Health and Safety Policy |
| Hayden Harris |
| 13.4 | Does your organisation have access to a Health & Safety advisor? |  |
| If Yes, please list details including qualifications, experience and professional membership status |
|  |
| 13.5 | Have there been any Improvement or Prohibition Notices or Prosecutions served on your organisation by the Health & Safety Executive or Local Authority in the last 10 years? |  |
| If Yes, please enclose details |  |

## SECTION G: EQUAL OPPORTUNITIES

|  |  |
| --- | --- |
| G14. | **EQUAL OPPORTUNITIES** |
| 14.1 | Is it your policy as an employer to comply with your statutory obligations to staff and applicants for employment under the following equality and non-discrimination laws: The Equality Act 2010 and any Regulations and Codes of Practice produced pursuant to that Act. |  |
| 14.2 | Do you observe the Equalities and Human Rights Commission Code of Practice on Employment, which gives practical guidance to employers and others on the application of the Equalities Act 2010, including the elimination of discrimination against people with protected characteristics of, age, disability, gender reassignment, gender identity, race or ethnicity, religion or belief, pregnancy or maternity, marriage or civil partnership, or sexual orientation? |  |
| 14.3 | Do you observe all the equality legislation referred to above and work to ensure that neither your employees nor service users face discrimination because of their age, disability, gender, gender identity, race or ethnicity, religion or belief, pregnancy or maternity, marriage or civil partnership, or sexual orientation? |  |
| 14.4 | Does your organisation have a written equal opportunities policy to ensure compliance with its obligations under the Equalities Act 2010? |  |
| If yes, is this policy enclosed? |  |
| 14.5 | If No to Question 16.4, please confirm that if successful you will have a written equal opportunities policy in place within six months of the commencement of the contract. |  |
| 14.6 | In the last 3 years, has any finding of unlawful discrimination or other breach of Equality Law been made against your organisation by any court or employment tribunal or Employment Appeal Tribunal? |
| If YES, please provide details and what steps were taken as a consequence of that finding: |
| Not applicable |
| 14.7 | In the last three years, has your organisation been the subject of a formal investigation by the Equality and Human Rights Commission or any previous equality commission on grounds of alleged unlawful discrimination? |
| If YES, please provide details and what steps were taken as a consequence of that finding: |
| Not applicable |
| 14.8 | Who is the person in the organisation responsible for dealing with equality obligations? |
| Name |  |
| Job Title | Head of Learning & Talent Development |
| Email Address |  |

|  |  |
| --- | --- |
| 14.9 | How does your organisation promote awareness amongst its staff, including supervisors and managers, of its need to eliminate unlawful discrimination, harassment, and other prohibited conduct, to advance equality of opportunity and the fostering of good relations between people who share a protected characteristic and those who do not, both in employment, access to services, and service delivery? |
|  |
| 14.10 | How does your organisation manage its obligations towards part time and agency workers?  |
|   |

SECTION H: SAFEGUARDING

|  |  |
| --- | --- |
| **H15.** | **WORKFORCE QUESTIONS ON SAFEGUARDING** |
| 15.1 | Where work to be undertaken is regulated or controlled under the Safeguarding Vulnerable Groups Act 2006 (SVGA), please confirm: |
| * 1. That you understand and will undertake the relevant responsibilities and duties under the SVGA
	2. That members of your organisation have not been convicted or been the subject of any adverse finding under any offence under the SVGA
	3. That you have policies, procedures and conditions in place as part of the employment of persons in regulated work under SVGA
		1. To make appropriate pre-employment checks
		2. To make appropriate checks during employment
		3. To monitor anyone subject to any conditions in the conduct of regulated activity
	4. That you follow the guidance issued by relevant authorities in the management of controlled activity under the SVGA
	5. That you will accept and comply with the Council’s safeguarding requirements pursuant to the Council’s policies and procedures in relation to safeguarding and the SVGA
 |
| Please confirm  |  |

## SECTION I: UNDERTAKING BY THE APPLICANT

I certify that the information supplied is accurate to be best of my knowledge and that I accept the conditions and undertakings requested in the questionnaire. I understand that false information could result in my disqualification from this shortlisting process.

I 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 disqualification from this shortlisting process.

|  |
| --- |
| **FORM COMPLETED BY** |
| **Name**  |  |
| **Position (Job Title)** | Operations Manager |
| **Date** | 30th September 2014 |

## SECTION J: STATEMENT RELATING TO GOOD STANDING

**STATEMENT RELATING TO GOOD STANDING — GROUNDS FOR OBLIGATORY EXCLUSION (IN ELIGIBILITY) AND CRITERIA FOR REJECTION OF CANDIDATES in accordance with Regulation 23 of the Public Contracts Regulations 2006 (as amended)**

|  |
| --- |
| **Contract Name / Description** |
| **Provision of Dementia Support Services** |

I/We confirm that, to the best of my/our knowledge, the Applicant is not in breach of the provisions of Regulation 23 of the Public Contracts Regulations 2006 (as amended) and in particular that:

### J1 Grounds for Mandatory Rejection (ineligibility)

The Applicant (or its directors or any other person who has powers of representation, decision or control of the named Organization) has not been convicted of any of the following offences:

1. conspiracy within the meaning of section 1 or 1A of the Criminal Law Act 1977 or article 9 or 9A of the Criminal Attempts and Conspiracy (Northern Ireland) Order 1983 where that conspiracy relates to participation in a criminal organization as defined in Article 2 of Council Framework Decision 2008/841/JHA;
2. corruption within the meaning of section 1(2) of the Public Bodies Corrupt Practices Act 1889 or section 1 of the Prevention of Corruption Act 1906; where the offence relates to active corruption;
3. the offence of bribery, where the offence relates to active corruption;

(ca) bribery within the meaning of section 1 or 6 of the Bribery Act 2010;

1. fraud, where the offence relates to fraud affecting the financial interests of the European Communities’ financial interests as defined by Article 1 of the Convention on the protection of the financial interests of the European Communities, within the meaning of:
	1. the offence of cheating the Revenue;
	2. the offence of conspiracy to defraud;
	3. fraud or theft within the meaning of the Theft Act 1968 and the Theft Act Northern Ireland)1969, the Theft Act 1978 or the Theft (Northern Ireland) Order 1978;
	4. fraudulent trading within the meaning of section 458 of the Companies Act 1985, article 451 of the Companies (Northern Ireland) Order 1986 or section 993 of the Companies Act 2006;
	5. fraudulent evasion within the meaning of section 170 of the Customs and Excise Management Act 1979 or section 72 of the Value Added Tax Act 1994;
	6. an offence in connection with taxation in the European Union within the meaning of section 71 of the Criminal Justice Act 1993;
	7. destroying, defacing or concealing of documents or procuring the execution of a valuable security within the meaning of section 20 of the Theft Act 1968 or section 19 of the Theft Act (Northern Ireland) 1969;
	8. fraud within the meaning of section 2,3 or 4 of the Fraud Act 2006;
	9. making, adapting supplying or offering to supply articles for use in frauds within the meaning of section 7 of the Fraud Act 2006;
2. money laundering within the meaning of section 340(11) of the Proceeds of Crime Act 2002;

(ea) an offence in connection with the proceeds of criminal conduct within the meaning of section 93A, 93B, or 93C of the Criminal Justice Act 1988 or article 45, 46 or 47 of the Proceeds of Crime (Northern Ireland) Order 1996; or

(eb) an offence in connection with the proceeds of drug trafficking within the meaning of section 49, 50 or 51 of the Drug Trafficking Act 1994; or

1. any other offence within the meaning of Article 45(1) of Directive 2004/18/EC as defined by the national law of any relevant State.

### J2 Discretionary Grounds for Rejection

**The Authority is entitled to exclude you from consideration if any of the following apply but may decide to allow you to proceed further. If you cannot answer ‘no’ to every question it is possible that your application might not get accepted. In the event that any of the following do apply, please set out (in a separate Annex) full details of the relevant incident and any remedial action taken subsequently. The information provided will be taken into account by the Authority in considering whether or not you will be able to proceed any further in respect of this procurement exercise.**

**The Authority is also entitled to exclude you in the event you are guilty of serious misrepresentation in providing any information referred to within regulation 23, 24, 25, 26 or 27 of the Public Contracts Regulations 2006 or you fail to provide any such information requested by us.**

The Applicant (or its directors or any other person who has powers of representation, decision or control of the named Organisation) confirms that it:

1. being an individual is a person in respect of whom a debt relief order has not been made or is not bankrupt or has not had a receiving order or administration order or bankruptcy restrictions order or a debt relief restrictions order made against him or has not made any composition or arrangement with or for the benefit of his creditors or has not made any conveyance or assignment for the benefit of his creditors or does not appear unable to pay or to have no reasonable prospect of being able to pay, a debt within the meaning of section 268 of the Insolvency Act 1986, or article 242 of the Insolvency (Northern Ireland) Order 1989, or in Scotland has not granted a trust deed for creditors or become otherwise apparently insolvent, or is not the subject of a petition presented for sequestration of his estate, or is not the subject of any similar procedure under the law of any other state;
2. being a partnership constituted under Scots law has not granted a trust deed or become otherwise apparently insolvent, or is not the subject of a petition presented for sequestration of its estate;
3. being a company or any other entity within the meaning of section 255 of the Enterprise Act 2002 has not passed a resolution or is not the subject of an order by the court for the company’s winding up otherwise than for the purpose of bona fide reconstruction or amalgamation, nor had a receiver, manager or administrator on behalf of a creditor appointed in respect of the company’s business or any part thereof or is not the subject of similar procedures under the law of any other state;
4. has not been convicted of a criminal offence relating to the conduct of his business or profession;
5. has not committed an act of grave misconduct in the course of his business or profession;
6. has fulfilled obligations relating to the payment of social security contributions under the law of any part of the United Kingdom or of the relevant State in which the organisation is established;
7. has fulfilled obligations relating to the payment of taxes under the law of any part of the United Kingdom or of the relevant State in which you are established;

|  |
| --- |
| **FORM COMPLETED BY** |
| **Name**  |  |
| **Position (Job Title)** | Operations Manager |
| **Date** | 30th September 2014 |

# FORM OF TENDER

## [Form of Tender](#_5.1_Form_of)

## [Pricing Schedule](#_Pricing_Schedule)

## [Method Statements](#_Method_Statements)

## [TUPE Regulations](#_TUPE_Regulations)

## [Tendering Certificate](#_Tendering_Certificate_1)

##  [Checklist](#_Checklist)

## Form of Tender

UNCONDITIONAL AND IRREVOCABLE OFFER TO LEICESTER CITY COUNCIL

**Re: Invitation to Tender dated 22 August 2014 for the Provision of Dementia Support Services**

To: **Leicester City Council, City Hall, 115 Charles Street, Leicester LE1 1FZ**

Having read carefully the Invitation to Tender**:**

**For Lot 1 (**Dementia Support Service): We offer to perform the Service specified and to complete the contract to meet the requirements of the Invitation to Tender

1. **Befriending service - number of relationships/ customers** 45 (5%)
2. **Advice and information service - no of hours** 240 (5%)
3. **Advocacy service - number of customers** 69 (5%)
4. **Training for carers - number of sessions** 2 (5%)
5. **Carer breaks and memory cafes/ activity groups - number of sessions** 72 (5%)
6. **Please complete the table below for your cost per annum**

|  |  |  |  |
| --- | --- | --- | --- |
| **Provider Name** | **Cost per Annum (£)** | **Tender Score****(Points)** | **Price Weighting %** |
| Alzheimer’s Society  | £110,455  |  | **5.0%** |

 **[Please provide breakdown of the amount in 6.2.2 – Full Cost Breakdown Table]**

**Note: The Council will eliminate any tender received for which the Price fails to stay within the Price envelope quoted by the Council for all the Service elements as quoted below in 6.2.1**.

* + 1. We agree that this Tender shall constitute an irrecoverable, unconditional offer, which may not be withdrawn for a period of 6 months from this date.
		2. We confirm that we have enclosed with this Form of Tender the following documents:
1. Business Questionnaire (5)
2. Form of Tender (6.1)
3. The Pricing Schedule (6.2)
4. Method Statements (6.3)
5. TUPE Regulations (6.4) (if applicable)
6. The Tendering Certificate (6.5) including
* Collusive Tendering declaration
* Declaration and Canvassing Certificate

## Pricing Schedule

**INSTRUCTIONS**

1. All prices entered must be gross and *exclusive* of VAT.
2. All prices quoted must include all costs and expenses (i.e. staffing, travel, administration, overheads, etc.)
3. Inflationary price increase may be awarded to the Service Provider, following an annual review and will be as determined by the Council. This does not guarantee that there will be an increase annually.
4. Please provide a full breakdown of your costs in the table below (6.2.2) indicating all the main elements involved to demonstrate how you have costed the provision of the service. Indicate all staffing and costs/margins, where relevant, associated with your costings including all preliminaries, overheads, profit, insurances, health & safety, environmental considerations, labour costs, mileage, parking permits.
5. The Council will eliminate any tender received for which the Price fails to stay within the Price envelope quoted by the Council for all the Service elements as quoted below in 6.2.1.

### 6.2.1 PRICING ENVELOPE FOR DEMENTIA SUPPORT SERVICES

The table below provides details of budget available for Lot 1

|  |  |
| --- | --- |
|  | **Maximum Annual Value £** |
| **Lot 1-** Dementia Support Services. | £110,455  |

### 6.2.2

### FULL COST BREAKDOWN FOR LOT 1

|  |  |
| --- | --- |
| **LOT 1:** Dementia Support Service**Please enter your costing in the Value column to show how you have calculated your quoted annual value** | **£Value (per annum)** |
| **Payroll** |  |
| Basic Salary |  |
| Employers National Insurance |  |
| Employer Pension Cost (Included in Operating Margin) |  |
| Holiday Pay including bank holidays (Included in Operating Margin) |  |
| Estimated Sick Pay Cost (Included in Operating Margin) |  |
| Direct Payroll Cost (A) |  |
| **Overheads** |  |
| Training Costs (Included in Operating Margin) |       |
| Travel Costs |  |
| Recruitment Costs |  |
| Establishment Costs (Rent, Utility, Insurance, Fixtures & Fittings) |  |
| Management Costs (included in operating Margin) |       |
| Finance Costs (e.g., Administration for invoices and others, Debt Collection; Stationery) (Included in Operating Margin) |       |
|  Overheads Costs (please specify and itemise) |  |
| Total Overheads Cost (B) |  |
| **Total Costs (Direct Payroll (A) plus Total Overheads Costs (B))** |  |
| Operating Margin (Includes Pension, Holiday pay, Sick pay and contribution towards Central Legal, HR, Finance, Health & Safety, Planning & Performance, Quality & Evaluation and Learning & Development & Training |  |
| **TOTAL COST CHARGEABLE TO LEICESTER CITY COUNCIL** | £110,455 |

**6.3 Method Statements**

Sectio**n** **A - Service delivery (18%)**

|  |
| --- |
| A1. Please describe how your organisation will deliver the service, including:* Key features of your overall service proposal with reference to how it meets the requirements of the service specification;
* Outline how you ensure the service handles the varying levels of presenting need;
* How does your service empower service users to speak up for themselves, so that they can self-advocate in future (beyond the life of the service)

 (6 %) |
|   |

|  |
| --- |
| A2. Please give a full start up implementation plan for the mobilisation of the service. This plan must include:* All activities by month for the first twelve months of activity after contract award.
* Plans for recruitment of staff (including training needed)
* A breakdown of the plan expressed in elapsed days/weeks from the date of the contract award through to full implementation
* An implementation risk assessment which identifies any risks and risk mitigations.

(6%) |
|  |

|  |
| --- |
| A3. How would you utilise venues in the community and ensure they are accessible? (2%) |
|  |

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| --- |
|  |
|  |

Section B – Workforce (13%)

|  |
| --- |
| **B1.** Please provide a detailed staffing plan that describes the staffing arrangements that will enable the delivery of the service for the duration of the contract. Please describe how you will ensure that all staff engaged in the delivery of the service have the necessary training, qualifications, experience, current competence and appropriate language communication skills to undertake their roles. Where appropriate to make the necessary arrangements to make the service accessible to all customers groups; e.g. the use of BSL or large print. Your proposal should provide full details of training policies and procedures including; * Induction training – this will include safeguarding vulnerable adult

 training in line with the lead commissioners guidance.* Top-up and refresher training
* Dementia Awareness

In addition, please provide information on* Proposed contingency arrangements to cover for planned and unplanned increases in workload and/or staff absences
* Management arrangements
* Use of Volunteers

 (13%) |
|  |

|  |
| --- |
| **B2.** Please confirm that all staff who will have access to vulnerable adults will have a DBS check prior to commencement of service and/or upon employment.**YES** - It is our policy that all staff who have access to vulnerable adults have a DBS check when they start employment with the society. |
| **NOTE: Yes/NO Question** |

### **Section C – User and Carer Focus (15%)**

|  |
| --- |
| C1. Please describe how the service ensures that the views and experiences of customers are listened to and acted upon. (4%) |
|  |

|  |
| --- |
| C2. Please describe how you will reach people from the diverse communities of Leicester and how you will provide a culturally appropriate service including assistance for individuals who do not speak, read or write English or who have communication difficulties, with specific reference to those who are deaf or hard of hearing. (7%) |
| . . |

|  |
| --- |
| C3. Please describe how you work with families and carers of those you are of service to, to ensure the service is holistic but with the customer’s needs as the main focus. (4%) |
|  |

### **Section D – Service Monitoring (5%)**

|  |
| --- |
| D1. Please provide details on how you will meet the requirements for reporting on service monitoring and evaluation data, as specified by the service specification. (5%) |
|  |

### **Section E – Partnership (5%)**

|  |
| --- |
| E1. Please identify your key partners and explain how and why you will want to work in partnership through involving and engaging with other organisations to ensure social inclusion? (5%) |
|   |

Section F – Social Value (4%)

|  |
| --- |
| F1. Please provide details of how you involve the local community in the delivery of your service, including volunteering opportunities and /or training opportunities that your organisation will offer to citizens of Leicester and proposals on how /where these will be promoted? (2%) |
|  |

|  |
| --- |
| F2. Please describe how you bring extra value to this contract including how you will develop opportunities for additional funding to be brought into the city of Leicester? (2%)  |
| .  |

### Section G – Continuous Improvement (3%)

|  |
| --- |
| G1. The needs of the service/contract may change during the duration of the contract; this could be for a variety of reasons, for example the demand for weekend provision. How adaptable is your team/organisation in responding to changes such as this? (3%)  |
|  **.**  |

### Section H – Lot Specific (7%)

|  |
| --- |
| H1. Please describe your experience at providing support services to people with Dementia and their Carers, including examples of where successful outcomes have been achieved. (7%) |
| . |

## TUPE Regulations

**For information purpose only:**

**Transfer of Undertakings (Protection of Employment) Regulations 2006**

TUPE Regulations may apply in respect of this contract. Tenderers will need to reach their own conclusion as to whether or not TUPE applies. Tenderers are strongly advised that they should seek independent professional advice on the consequences for them about TUPE and pensions if they are the successful bidder and the TUPE Regulations apply. For this purpose the Council has obtained from the existing service provider details about the staff that this existing service provider says perform the service which is the subject of this Invitation to Tender. These details are set out in **Appendix 4**. The Council is not in a position to warrant the accuracy of the information provided by the existing service provider. Tenderers are reminded that this information is provided on a strictly confidential basis and for the purpose of submitting this bid.

The Council is not in a position to warrant the accuracy of the information provided by the existing service providers. Tenderers are reminded that this information is provided on a strictly confidential basis and for the purpose of submitting this bid.

**TUPE**

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |

* + 1. Should TUPE apply please confirm that you will comply with any information and consultation requirements under TUPE:



* + 1. Please provide a transition plan for taking on staff under TUPE. This should demonstrate that your organisation understands and can manage obligations under TUPE and describe your intended approach to negotiation of measures with the workforce within a two month or lesser period between contract award and commencement of service.

## Tendering Certificate

To: LEICESTER CITY COUNCIL (“The Council”)

I certify that this is a bona fide tender, intended to be competitive and that I have not (either personally or by anyone acting on my/our behalf)

1. Fixed the amount of the Tender (or the rate and prices quoted) by agreement with any person.
2. Communicated to anyone other than the Council the amount or approximate amount or terms of my/our proposed tender (other than in confidence in order to obtain quotations, professional advice or insurance necessary for the preparation of the tender).
3. Entered into any agreement or arrangement with any other person that he shall refrain from tendering or as to the amount or terms of any tender to be submitted by him.
4. Canvassed or solicited any member, officer or other employee of the Council in connection with the award of this or any other Council contract or tender.
5. Offered, given or agreed to give any inducement or reward in respect of this or any other Council contract or tender.

### COLLUSIVE TENDERING DECLARATION

To: LEICESTER CITY COUNCIL

I the undersigned do hereby contract and agree on acceptance of this tender, to carry out the Service detailed in the Contract Documents, at the prices and terms quoted, and in accordance with the Conditions of Contract.

In submitting a tender against the contract, I have not done and I undertake that I will not do at any time before the notification of tender results any of the following acts:

1. Communicate to any person other than the person calling for the tenders the amount or approximate amount of the proposed tender, except where the disclosure, in confidence, of the approximate amount of the tender is necessary to obtain insurance premium quotations required for the preparation of the tender;
2. Enter into any agreement or arrangement with any person that he shall refrain from tendering or as to the amount of any tender to be submitted;
3. Offer to pay or give or agree to pay any sum of money or valuable consideration directly or indirectly to any person for doing or having done or causing or having caused to be done in relation to this or any other tender or proposed tender for the said work any act or thing of the sort described above. In the context of this clause the word ‘person’ includes any persons and any body or association, corporate or unincorporated; and ‘any agreement or arrangement’ includes any such transaction, formal or informal, and whether legally binding or not.

### DECLARATION AND CANVASSING CERTIFICATE

To: LEICESTER CITY COUNCIL

I hereby certify that I have not canvassed or solicited any member, officer or employee of the Council in connection with the award of this Tender or any other Tender or proposed Tender for the Works and that no person employed by me or acting on my behalf has done any such act.

I further hereby undertake that I will not in future canvass or solicit any member, officer or employee of the Council in connection with the award of this Tender or any other Tender or proposed Tender for the Service and that no person employed by me or acting on my behalf will do any such act.

|  |  |  |
| --- | --- | --- |
| SIGNED\* (1) |  |  |
| Name (Please print) |  | Mr Jeremy Hughes |
| Status |  | Chief Executive |
| SIGNED\* (2) |  |  |
| Name (Please print) |  |       |
| Status |  |       |
| For and on behalf of |  |       |
| Date |  | Click here to enter a date. |
| Signed |  |  |
| Name (please print) |  |       |
| Position |  |       |
| Name of Tenderer |  |       |
| Address |  |       |
|  |  |  |
| Email Address |  |       |

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