



REQUEST FOR PROCUREMENT OF ANY VALUE

(INCLUDING ALL CONSULTANCY & ICT REQUIREMENTS)

Forward to procurement@eastdunbarton.gov.uk

Contract Title	
Estimated Contract Value	
Available Budget	
Cost Centre /Ledger Code	
Is Budget Capital or Revenue?	
Lead Officer Name	
Lead Officer Telephone	
Lead Officer Email	
Contract Reference (to be completed by	
Corporate Procurement)	
Is this a new Requirement, a Re-Tender or	
an Emergency Placement?	
For HSCP - If an emergency placement,	
please refer to Appendix A to provide	
additional information in support of the	
approach/process applied.	
Please note that a follow up Procurement	
process may be required to secure a longer	
term placement/contract following review of	
the Service requirement. Will this be	
required?	
Data of request	
Date of request	
Do you require to report to Council before Award?	
Is a supporting business case/Options	
Appraisal/Emergency Placement Instruction	
available, If yes please attach a copy	

Please provide details of Key Stakeholders involved in this procurement	
Market Analysis /Demand Management	
Provide a brief summary of the contract requirements	
If you can, please provide brief information on potential suppliers, including the names of some suppliers who can provide the goods or services requested	
Anticipated Commencement Date	
Expected Length of Contract	
For HSCP - Is a further Procurement process required to formalise a temporary/emergency placement?	
Expected Contract Conditions?	
Is the publication of a PIN required?	

Environmental opportunities- Is the proposed contract requirement focused on mitigation (reducing CO2, or other greenhouse gas emissions) or adaptation (strengthening resilience to climate change)?	Mitigation/Adaptation/Both?
If Mitigation, does it tackle-	
Transport modal shift	Yes/No
Transport vehicle decarbonisation	Yes/No
Building Energy efficiency	Yes/No
Building heat decarbonisation	Yes/No
Renewable electricity generation	Yes/No
Waste	Yes/No
Water consumption	Yes/No
Nature-based solutions	Yes/No

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Awareness raising/behaviour change	Yes/No
Other (please specify) –	
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If not focused on mitigation or adaptation,	Yes/No
will the proposed contract requirement	
reduce emissions or improve resilience to	
climate change?	If Yes, please provide further information –
Overview of budget pressures affecting	
contract	
Savings Overview	
(Opportunities/work streams identified to	
secure best value/savings through this procurement exercise)	
Dependencies	
(Transformation Projects, Capital	
Programme, funding commitment	
timescales, etc)	
Actions/risks	
Authorised signature - Budget Holder, or for	
HSCP - Relevant Head of Service	
TIOOT TROIC VAILET TOUGH OF OCT VICE	
Date	
Baco	

To Be Completed by Finance:

Spend on Relevant Cost Centre	
Actual Spend Against Relevant Cost Centre	
Projected Spend Against Relevant Cost	
Centre	
Impact to Expected Out turn on Relevant	
Cost Centre	
If Grant Funded– please provide deadline	
date for money to be spent and whether	
criteria is a contract in place or	
complete/invoiced/ paid. (Insert which ever	
applies)	
Authorised signature - Finance	
Date	

To Be Completed by Requesting/Placement Officer:

DECLARATION OF IMPARTIALITY AND CONFIDENTIALITY
I, the undersigned, hereby declare that I shall execute my responsibilities honestly and fairly.
I am independent of all parties, which stand to gain from the outcome of this process.
To the best of my knowledge and belief, there are no facts or circumstances, past or present, or that could arise in the foreseeable future, which might call into question my independence in the eyes of any party; and, should it become apparent during the course of the process that such a relationship exists or has been established, I will immediately cease to participate in the process.
Name
Role
Signature
Date

For all contract requirements the following approvals are required	
Authorised Signature – Executive Officer- (Service)	
Or;	
For HSCP – Authorised Signature – Chief Social Work Officer and;	
Authorised by SLT	
Date	

CSO Appendix 4 – Social Work Contracts

- 10.2 For the purposes of paragraph 10.1 in Contract Standing Orders, the negotiated procedure without prior publication is available where in the opinion of the Chief Social Work Officer or Council employed Head of Service and/or the relevant Executive Officer/s (dependent on process and authorisations required in line with the Waiver process):-
 - (a) the needs of the individual(s) concerned would be best met by a particular provider; or
 - (b) due to the type and nature of the service and taking account of environmental and regulatory requirements there is only one provider capable of delivering the service to meet the needs of the individual(s) concerned: or
 - (c) the nature of the service is such that it should not/cannot be adequately specified in advance because of the nature of the social care needs of the individual(s) concerned; or
 - (d) there are special circumstances such as ownership of land or property, geographic locations or particular skills or experience of providers of social care which limit the choice to one provider; or
 - (e) the service user wishes in terms of the National Strategy on Self Directed Support to arrange services with a particular provider but wishes the Council to arrange this on his behalf; or
 - (f) it is in the best interests of the service user to use a particular provider; or
 - (g) there are reasons of extreme urgency brought about by unforeseen events which are not attributable to the Council.
- 16. The relevant approvals must be obtained for all Social Work contracts, whether there is a requirement to advertise, a direct award is being sought or an emergency process has been followed.

Please provide, from the above considerations, the decisions applied to the selection of the care provider, confirm those who have been consulted and authorised the emergency/temporary placement. Please attach the relevant communications, authorisations, contractual/specification/term detail and market considerations to this request.

NB – For emergency/duty of care short, term placements, the Relevant Head of Service/Chief Social Work Officer is required to authorise this request

Name	

Authorised Signature Title Date	Relevant Head of Service/Chief Social Work Officer
SLT Authorisation Date	