

EXECUTIVE BOARD DECISION



REPORT OF: Executive Member for Children, Young People and Education, Executive Member for Public Health and Wellbeing and Executive Member for Adult Services & Prevention

LEAD OFFICERS: Director of Adults and Prevention, Director of Children's Services, Director of Public Health & Wellbeing

DATE: 13 June 2019

PORTFOLIO/S AFFECTED: Adult Services & Prevention Children, Young People & Education, Public Health & Wellbeing

WARD/S AFFECTED: All

KEY DECISION: YES ☒ NO ☐

SUBJECT: Voluntary, Community and Faith Sector Core Offer Contract

1. EXECUTIVE SUMMARY

To update the Executive Board on the current position regarding the procurement of a new Voluntary, Community and Faith Sector Core Offer and make recommendations for the new commission commencing 1 October 2019.

2. RECOMMENDATIONS

That the Executive Board:

1. Note the contents of the report of 7 May 2019 to the Blackburn with Darwen Clinical Commissioning Group's (CCG) Joint Commissioning Recommendations Group (JCRG) to go out to tender for new service provision from 1st October 2019.
2. Agree a 10% efficiency saving for Adult Social Care, Children and Young People, and CCG to be applied to the contributions to the current cost of the contract in line with the Council's budget recovery plans. Efficiencies will be shared proportionately across the funding providers for reinvestment or to take as savings.
3. Agree a £129,415 infrastructure support cost to be delivered in-house.
4. Note that the service offer would sit under the Director of Adults and Prevention, and be managed by the Head of Service Prevention, Learning and Neighbourhood Services as part of the wider prevention offer. Joint management and oversight of the contributions, delivery and outcomes by the Children's, Young People and Education Directorate, Public Health and Wellbeing Directorate and the CCG will ensure that statutory accountability and responsibilities are maintained.
5. Approve the procurement approach set out in the report and in the attached timetable
6. Agree to delegate authority to the Director for Adults and Prevention to enter into contract with

the successful tenderers. This to be done in consultation with the relevant Executive Members within the council

7. Notes the Director for Adults and Prevention shall consult the Blackburn with Darwen Clinical Commissioning Group in relation to the tender process and contract awards.

3. BACKGROUND

The Council and Blackburn with Darwen CCG jointly invested £1,258,033 in 2018/19 into this contract which is delivered by a number of voluntary, community and faith sector (VCFS) services. The services include: information advice and guidance, carers services; engaging vulnerable groups and emotional wellbeing services. The service offer is funded at varying levels from the CCG via the Better Care Fund, the Adult Social Care budget, Children's Services and the Public Health Grant.

Current Services under this contract include:

1. **Age UK - Age Well/Befriending:** *Befriending/buddying*
2. **Age UK - Here to Help:** *To improve resilience, wellbeing and self-care of residents with significant health and social care needs, supporting residents to stay out of statutory health and social care.*
3. **Care Network Helpdesk/Safe Trader Scheme:** *One point of access for support and advice in Blackburn Town Centre*
4. **YSYC / Care Network:** *One point of access for support and advice in Blackburn Town Centre.*
5. **CANW - Young Carer:** *To support young carers and their families*
6. **Child Action NW – MEAM (Making Every Adult Matter):** *MEAM will work with the most chaotic and excluded MALE adults in the Borough*
7. **Lancashire Women's Centre – MEAM (Same as above for FEMALES)**
8. **Lancashire Mind:** *To improve resilience, wellbeing and self-care of residents with significant health and social care needs, supporting residents to stay out of statutory health and social care.*
9. **Older People's Forum:** *acting as a voice for people over 50 – acting as a voice for people over 50 in the Borough.*
10. **CVS - Coordinated Substance Misuse:** *The Project will recruit, train and develop a bank of Recovery Support Volunteers to work in the Substance Misuse Sector*
11. **Newground - Engaging Vulnerable Young People:** *targeted interventions for young people in partnership with other agencies as part of an integrated neighbourhood team response to address the root cause of young people's behaviours.*
12. **East Lancs Deaf Society (ELDS):** *Mentoring, 1-1 support and advice and social activities for the Deaf and hearing impaired community*
13. **Bootstrap Enterprises:** *Development of specialist volunteers to support staff and clients to support accessing and maintaining employment.*
14. **Carers Service:** *To deliver information, advice and guidance to carers who live in Blackburn with Darwen, or (by arrangement) who care for someone who does.*
15. **FHWB Consortia:** *The Consortia manage the IAG service and co-ordinate all the reports, gathering of data and attend all reviews.*

Coordination and performance management is currently provided via a consortium based approach, funded via a small base cost, but augmented by a percentage financial contribution from each of the

commissions detailed above.

It should be noted that there are many other specific contracts and commissions in the borough that sit with the VCFS that are provided outside of this contract e.g. delivery of day services to older people which are outside the scope of this report. The commissions within this VCFS contract have been reviewed in the light of the new NHS long term plan and the Council's strategic priorities. The report outlines a new approach to service provision based on a review started in 2017.

The review has included:

- Service provider engagement
- Further understanding of health and social care needs within the wider Primary Care Neighbourhood developments
- Alignment of Council, CCG and NHS developing strategic priorities including social prescribing

A key recommendation from the review has been the need for greater transparency, coordination and a new overarching outcomes based performance management framework to ensure that delivery is targeted, makes a sustainable difference to individuals and families, reduces the demand on statutory services and provides value for money.

4. KEY ISSUES & RISKS

The overall aim of the new offer is to develop co-ordinated pathways to preventative services and self-care opportunities to enable people to stay happier and healthier in their own homes for longer. Importantly, the emerging support themes from the review which will form the basis of the contract, are all based around need and not structured by existing or historical service provision. That said, specific elements of support e.g. carers, information advice and guidance, mental health, support for older people, and supporting "hard to reach" and vulnerable adults and young people will still be delivered within the themes.

It is proposed that the funding for coordinated substance misuse provided by Public Health does not form part of this VCFS contract going forward, and instead is aligned to support services being developed as part of the Vulnerable People's Strategy.

The delivery of carers services will be redesigned to provide a distinct offer for young carers.

The Themes of the new contract will cover: Health and Wellbeing; Work and Money; Safety and Managing Risk and Carers. The themes will also form the 'lots' in the procurement process for which the sector can bid.

In terms of delivery, the model of provision consists of a tiered approach to supporting individuals and families. Approaches will include:

- Self-help, information and guidance, to support access to appropriate services
- Action planning for those facing multiple challenges – which includes support for people to develop their own tailor-made action plans and direct service provision where appropriate
- More sustained individual co-ordination and case management (in-house support)
- Coordination to ensure that the social prescribing pathway is robust and effective

Providers will be required to demonstrate their adoption of nationally recognised making every Adult Matter (MEAM) and Adverse Childhood Experiences (ACE) informed approaches.

Service providers will need to develop a joined up offer with wider health and social care services. This will enable more effective pathways, especially for hard to reach individuals, families and communities. In each themed area, bidders will need to demonstrate how they will add value to an integrated approach to support people with the help they need. All 'lots' will require bidders to

demonstrate how they will operate within an emerging Primary Care Neighbourhood model.

The proposed outcomes-based performance management framework will measure the impact of the commission against these areas of need. Commissioning outcomes as opposed to commissioning services will enable innovative practice, financial efficiencies and economies, reduction of duplication and identification of gaps which need to be addressed via future service development.

It is proposed to replace the current consortium arrangements with robust capacity within the council. Details of proposals to bring performance management in house were included in the report submitted to the JCRG on 7 May 2019 (Appendix 1) – including the integration of commissioned activity with the wider strategic direction of the Integrated Health and Care Partnership. This will give extra capacity to integrate the VCFS activity with wider strategic developments including Primary Care Neighbourhoods, the NHS Personalised Care model including social prescribing and community based support. Bringing programme management “in house” will also integrate VCFS activity with corporate delivery around prevention, health and wellbeing and support the sector to maximise outcomes and attract other complementary funding streams.

Following feedback from JCRG, agreement has been reached to provide £129,415 from the available budget for infrastructure. This will fund a strategic lead role, a performance and quality officer and engagement support. The function will be managed through the Head of Service Prevention, Learning and Neighbourhood Services as part of the wider prevention offer.

Whilst the arrangements provide a single strategic approach with VCFS investments that are aligned and integrated, the VCFS allocations emanating from the public health budget will need to remain managed and accountable to the Director of Public Health as this is a statutory requirement under the Public Health Grant. The JCRG will continue to provide a forum for joint decision-making in respect of the new contracts.

The shift of funding from consortium arrangements to the in-house coordination function will provide greater transparency, alignment and flexibility in responding to need at a neighbourhood level and integrate the delivery of social prescribing which is a key element of the new primary care contract.

Contracts will be issued for up to four years. The exact contract details will be developed as part of the specification with appropriate break clauses introduced to ensure performance and value for money is maintained.

Bids will be evaluated on a basis of 30% financial cost and 70% quality. The number of contracts issued per theme will be determined by the specifications that are being developed.

Efficiency savings have been identified and are required as part of the council’s agreed savings plans, however, the review has demonstrated that there is considerable scope to enhance rather than reduce the offer to vulnerable people in the Borough. Current and historic arrangements have led to inefficiencies through duplication of services outside of this contract, a lack of effective coordination and transparency, and an underdeveloped opportunity to support to grass roots organisations working in neighbourhoods.

Efficiencies identified on re-procurement will be available pro-rata to existing funding contributors for re-investment or to offset other cost pressures in service delivery.

5. POLICY IMPLICATIONS

There are no current policy implications changes and services have been operating in a Care Act compliant manner since 2014. Any mandatory policy change will be implemented during lifetime of this contract as and when required.

6. FINANCIAL IMPLICATIONS

The budget consists of funding from the Council, and the CCG via the Better Care Fund. In line with other Council efficiencies a 10% efficiency saving for Adult Social Care, Children and Young People, and CCG will be applied to their contribution to the current cost of the contract in line with the Council's agreed budget recovery plans.

The new budget available will be aligned to themes in terms of need identified through the JSNA and the council and CCG priorities. There has been some indicative allocations for each theme, however as the service specifications are developed for each lot, these may be slightly adjusted within the overall VCFS budget available to ensure efficient service delivery. Efficiencies identified on re-procurement will be available pro-rata to existing funding contributors for re-investment or to offset other cost pressures in service delivery.

The budget available for the new contract is shown in the table below:

VCFS Commissions 2018-19	Total across funders
Phase 1	£499,014
Phase 2	£546,538
Phase 3	£212,481
Total	£1,258,033
Less PH CVS Coordinated Substance Misuse (out of scope for new contract)	£42,800
Less PH grant reductions of 4% applied on Care Network contract only)	£3,200
Less 10% efficiency/savings	£100,267
Less proposed Infrastructure cost	£129,415
Total for commissioning contract from October 2019	£982,351

7. LEGAL IMPLICATIONS

The tender process will need to comply with the EU procurement rules and the Councils Contract and procurement procedure rules.

The Contract will be in a form approved by Legal Officers in the Council's legal team.

Application of the Transfer of Undertakings (Protection of Employment) Regulations 2006 (TUPE) will need to be considered as part of the process including whether the in-house support results in a transfer to the Council.

8. RESOURCE IMPLICATIONS

This area of work will fall under the Head of Service Prevention, Learning and Neighbourhood Services and the in-house infrastructure described above.

9. EQUALITY AND HEALTH IMPLICATIONS

Please select one of the options below. Where appropriate please include the hyperlink to the EIA.

Option 1 ☐ Equality Impact Assessment (EIA) not required – the EIA checklist has been completed.

Option 2 ☐ In determining this matter the Executive Member needs to consider the EIA associated with this item in advance of making the decision. (*insert EIA link here*)

Option 3 ☒ In determining this matter the Executive Board Members need to consider the EIA associated with this item in advance of making the decision. (*insert EIA attachment*)

10. CONSULTATIONS

A significant amount of consultation has been undertaken with both internal and external stakeholders/service providers. at events during 2018 and 2019. These events have included provider events and World Café style consultation. Service users have also been consulted as part of the quarterly and annually service monitoring during 2018.

11. STATEMENT OF COMPLIANCE

The recommendations are made further to advice from the Monitoring Officer and the Section 151 Officer has confirmed that they do not incur unlawful expenditure. They are also compliant with equality legislation and an equality analysis and impact assessment has been considered. The recommendations reflect the core principles of good governance set out in the Council's Code of Corporate Governance.

12. DECLARATION OF INTEREST

All Declarations of Interest of any Executive Member consulted and note of any dispensation granted by the Chief Executive will be recorded in the Summary of Decisions published on the day following the meeting.

VERSION:	6
CONTACT OFFICER:	Mike Banks
DATE:	4 June 2019
BACKGROUND PAPER:	Appendix 1 Extract from JCRG Report: Voluntary, Community and Faith Sector Commission 7 May 2019 Appendix 2 VCFS Commission Timetable