

WIRRAL COUNCIL

HEALTH AND WELLBEING OVERVIEW AND SCRUTINY COMMITTEE:  
18 JANUARY 2011

REPORT OF THE INTERIM DIRECTOR OF ADULT SOCIAL SERVICES

## **COMMISSIONING AND PROCUREMENT FROM THE VOLUNTARY SECTOR**

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### ***Executive Summary***

*This report outlines the proposals for commissioning and procurement from the voluntary sector. This item falls within the Social Care and Inclusion portfolio.*

#### **1 Background**

- 1.1 The voluntary, community and faith sector is central to the provision of services to vulnerable people which promote wellbeing, reduce the risk of deterioration in an individual and which help to maintain independence at home. Within Wirral, the sector has held this position for many years.
- 1.2 Recent government policy emphasises the role of the voluntary sector within communities, as offering opportunities for meaningful occupation, and as a means of service delivery.
- 1.3 Since 2007, the emphasis on personalisation within Adult Social Services means that individuals have more choice and control over the services they receive. At the same time there is a shift towards early intervention and prevention, which includes the provision of information and advice so that people are fully informed to make choices, and practical support which can be accessed without first undergoing an assessment of need. These elements of the personalisation agenda may well deflect individuals away from more formal community care services or delay the need to ask for and receive costed packages of care.
- 1.4 The Department of Adult Social Services has a commitment to the voluntary sector of £2,137,000.14 in 2010/11. Services range from luncheon clubs through to advocacy, information and advice, through to support services for people with substance misuse, through to day care for older people. Many of the contracts have been in place for a number of years.

- 1.5 Developments within Adult Social Services over the past several years away from direct care provision seem set to continue. To date, the opportunities offered by such developments have been taken up by the independent sector. However, there is a drive to make better use of the voluntary, community and faith sector in the area of care provision. In order to do this, the Department needs to make use of intelligence gained by analysing need, tracking the current levels and patterns of service and forecasting trends to commission from the voluntary, community and faith sector.
- 1.6 In order to build the market within this sector, there may need to be some development work and also an approach to procurement which takes account of the role that voluntary agencies play in the life of local communities.
- 1.7 The Commissioning and Procurement Sub-Group of the Comprehensive Engagement Strategy has provided a vehicle to establish a set of principles by which the voluntary sector services will be commissioned and to deliver a framework in which there is a clear rationale for the commissioning and procurement of voluntary sector services. The Commissioning and Procurement Sub-Group is made up of senior representatives from several Local Authority Departments, NHS Wirral and Voluntary and Community Action Wirral.

## **2 Framework for Commissioning**

- 2.1 An Early Intervention Strategy for Wirral was agreed by Cabinet in July 2010. This follows the principle that at every stage of a person's life, there is the possibility of making sure that they stay well or, if they have a long-term condition or illness, that they do not deteriorate more quickly than they would if there was no intervention, or that they can be maintained in their own home for as long as possible, including up to their death. The Strategy is an essential part of the transformation agenda for social care and is primarily aimed at older people and people with a disability.
- 2.2 The model for early intervention is split across seven themes:
  - Building Communities
  - Citizenship
  - Healthier Communities
  - Information and Advice
  - Practical Support
  - Enablement
  - Maintaining Independence
- 2.3 It can be used in a variety of ways to help establish where the gaps in funding exist or where particular population groups are not receiving attention, or to increase targeting of resources: for example, in tackling health inequalities. The themes are cross referenced with population groups, e.g. older people, carers, people with a learning disability, unemployed people (the Framework is attached in Appendix 1).

2.4 Therefore, although the themes were developed primarily for social care, there is applicability across a wider area of possible commissioning.

### **3 Progress**

3.1 A set of principles based on good practice, the Compact and the aims and objectives has been established (please see Appendix 2 attached).

3.2 A timetable has been established, which is currently mapping all services delivered and funded by NHS Wirral and/or the Local Authority against the Early Intervention Framework.

3.3 In order to make sure that stability is maintained in the sector while the process is carried out, the proposal is to roll forward all voluntary sector contracts into 2011/12, in accordance with the Cabinet resolution of 9 December, in which all voluntary sector contracts will be renewed until the end of June 2011.

3.4 The following priority areas have been identified as those which will be targeted in the first instance:

- Information and Advice
- Practical Support
- Healthy Living

3.5 The three areas are all central to the “Vision for Adult Social Care: Capable Communities and Active Citizens”, a document which sets out ‘over-arching principles for adult social care and gives context for future reform’ (Department of Health 2010).

3.5.1 This means an approach whereby commissioning priority for future need is established. After discussions with Voluntary Community Action Wirral, the decision was taken to concentrate on the above three areas rather than try and address all of the voluntary sector services at once. Several organisations will provide services across the range of seven themes of the Early Intervention Strategy and this could cause confusion and unsettle whole organisations unnecessarily.

3.5.2 Notice has been served by the provider of two practical support services, which are long-standing and grant-aided; this affords an opportunity to re-examine how these services will be needed in the future and to clarify the target group.

3.5.3 There is an outstanding review of luncheon clubs from 2008 which will need to be completed.

3.5.4 A recent draft strategy on Information, Advice and Advocacy demonstrated the importance of these areas in any future provision of services.

3.5.5 The Public Health Department is taking the opportunity to review existing contracts within this framework.

- 3.6 A workshop for the community, voluntary and faith sectors on this approach (18 November 2010) has taken place and has been well received.
- 3.7 The original intention of the approach was to bring together all of the funding to the voluntary sector from the NHS and Council Departments, which are aimed at people over the age of 18. However, the recent White Paper for Health “Equity and Excellence: liberating the NHS” means that there will be significant changes to the way in which services are commissioned by the NHS. At this stage, therefore, the proposal will concentrate on voluntary and community services commissioned and procured by the Local Authority and, in particular, the Department of Adult Social Services.

#### **4 Conclusion**

- 4.1 The role of the community, voluntary and faith sector is central to maintaining the welfare of people in Wirral, particularly the most vulnerable.
- 4.2 It has, however, been reliant on short-term and sometimes uncertain funding. It has not enjoyed the same level of contractual arrangements as other organisations in the private sector. Many of the arrangements are long-standing and historical with a few monitoring arrangements in place. The sector is grant-funded for the most part, and while this may be suitable in some areas, there are others which may need to move to a different basis.
- 4.3 Current arrangements are not efficient or effective and statutory organisations are not always aware of each other’s funding arrangements. The Commissioning and Procurement sub-group will address and resolve these issues.

#### **5 Financial Implications**

- 5.1 The Department of Adult Social Services has a financial commitment to the voluntary sector of over £2 million in 2010/11. Internal Audit are currently undertaking an audit of all funding from every Department and this will be used to clarify the total amount of funding into this sector by the Local Authority.

#### **6 Staffing Implications**

- 6.1 There are no staffing implications.

#### **7 Equal Opportunities Implications/Health Impact Assessment**

- 7.1 Funding to the voluntary and community sector is aimed at the most vulnerable people in Wirral, either through age or disability or who are socially excluded in other ways.

## **8 Community Safety Implications**

8.1 There are no community safety implications from this report.

## **9 Local Agenda 21 Implications**

9.1 The report has relevance to Strategic Issue 4: healthy people, safer places and Strategic Issue 5: a caring environment for everyone, including the provision of equal access for all to information, people and services.

## **10 Planning Implications**

10.1 There are no known issues arising from this report.

## **11 Anti Poverty Implications**

11.1 Voluntary, community and faith sector organisations are central to the uptake of information and advice which reduces the risk of poverty.

## **12 Social Inclusion Implications**

12.1 Voluntary, community and faith sector organisations are central to social inclusion, providing opportunities for volunteering and meaningful occupation, as well as for service delivery.

## **13 Local Member Support Implications**

13.1 This report covers Wirral-wide services.

## **14 Health Implications**

14.1 The principles of healthy living are a key element of the approach to commissioning and procurement from the voluntary sector.

## **15 Background Papers**

15.1 An Early Intervention Strategy for Wirral; Cabinet Report, July 2010

## **16 Recommendations**

- (1) That the framework for commissioning and procurement from the voluntary sector is adopted by the Local Authority.
- (2) That the principles of commissioning from the voluntary, community and faith sector are adopted by the Local Authority.
- (3) That, following Cabinet resolution of 9 December, all Voluntary Sector contracts be renewed until June 2011.

**HOWARD COOPER**  
**Interim Director of Adult Social Services**

**EARLY INTERVENTION AND PREVENTION FRAMEWORK FOR COMMISSIONING AND PROCUREMENT FROM THE  
VOLUNTARY, COMMUNITY AND FAITH SECTOR**

<b>Target Group</b>	<b>Citizenship</b>	<b>Building Communities</b>	<b>Healthier Communities</b>	<b>Information and Advice</b>	<b>Practical Support</b>	<b>Enablement</b>	<b>Maintaining Independence</b>
Older People							
People with physical disability or long term conditions							
People with mental health needs							
People with a learning disability							
People with substance misuse challenges							
Carers							
Areas of deprivation							
Unemployed people							
BME Communities							

## Appendix 2

### **PRINCIPLES OF COMMISSIONING & PROCUREMENT FROM THE VOLUNTARY, COMMUNITY AND FAITH SECTOR**

- ◆ Understand the needs of users and other communities by ensuring that, alongside other consultees, we engage with the voluntary, community and faith sector organisations, as advocates, to access their specialist knowledge, and involve the voluntary, community and faith sector in setting priority outcomes for users.
  
- ◆ Ensure that outcomes for users are at the heart of the strategic planning process, which includes capacity building for provider and communities, where appropriate.
  
- ◆ Map the fullest practical range of providers with a view to understanding the contribution they could make to deliver those outcomes.
  
- ◆ Ensure contracting processes are transparent, fair and streamlined, facilitating the involvement of the broadest range of suppliers, including sub-contracting and consortia building, where appropriate.
  
- ◆ Ensure long-term contracts are given, where possible, as a means of achieving efficiency and effectiveness.
  
- ◆ Seek feedback from service users, communities and providers in order to review the effectiveness and impact of the commissioning process in meeting local needs.
  
- ◆ Priority will be given within the procurement process to organisations and services which can demonstrate added social value.
  
- ◆ Develop innovative approaches to commissioning and procurement, including pooling of resources, where possible.