

Birmingham City Council

Report to Cabinet

26th May 2020



Subject: PUTTING PREVENTION FIRST: AMENDMENT TO CONSULTATION STRATEGY FOR THE COMMISSIONING OF VULNERABLE ADULTS SUPPORT FOR DISABILITIES AND MENTAL HEALTH

Report of: Professor Graeme Betts
Director for Adult Social Care

Relevant Cabinet Member: Cllr Paulette Hamilton - Health & Social Care
Cllr Tristan Chatfield - Finance & Resources

Relevant O &S Chair(s): Cllr Robert Pocock - Health and Social Care
Cllr Sir Albert Bore - Resources

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Are specific wards affected?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No – All wards affected
If yes, name(s) of ward(s):		
Is this a key decision?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
If relevant, add Forward Plan Reference: 007664/2020		
Is the decision eligible for call-in?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Does the report contain confidential or exempt information?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If relevant, provide exempt information paragraph number or reason if confidential:		

1 Executive Summary

- 1.1 This report provides details of progressing consultation in alignment to refreshed timetabling requirements for the recommissioning of the Integrated Prevention

Services (CO218) contract (Tranche 2). The existing contracts for these services were due to expire on 30th June 2021.

- 1.2 These services are vital in delivering against several Council priorities, which include corporate parenting, improved health and wellbeing, building resilient and independent communities and access to suitable and sustainable housing options for the most vulnerable.
- 1.3 Co-design activities had commenced with providers, key stakeholders and service users to begin to develop a picture of what the current market looks like and what we may wish to see in the future. This will help inform the consultation documents and shape future services.
- 1.4 Further targeted engagement, workshops and coproduction activities with providers, stakeholders and service users were planned to run alongside the proposed online consultation from 26th March 2020 – 6th May 2020.
- 1.5 Cabinet approval had been granted on 17th March 2020 to initiate the proposed online consultation via Be-Heard.
- 1.6 Because of the current circumstances related to Covid – 19 it is proposed to defer the consultation period to progress in alignment with the new proposed commissioning timetabling requirements, which will be outlined in a future report when circumstances are less challenging.

2 Recommendations

2.1 That Cabinet is requested to; -

- 2.1.1 Approve amendment to the recommendation made on 17th March 2020 to approve commencement of the proposal to undertake a 42-day public consultation via Be Heard on the recommissioning of Integrated Prevention Services (CO218) contract (Tranche 2).
- 2.1.2 Approve deferring the Cabinet approved 42-day public consultation via Be Heard on the recommissioning of Integrated Prevention Services (CO218) contract (Tranche 2) to progress in alignment to refreshed timetabling requirements due to the impact of Covid-19.
- 2.1.3 Note that a new proposed commissioning timetabling, including consultation, will be outlined in a future report when circumstances are less challenging. The new timetabling requirements will be dependent on a proposed 6- or 12-month contract extensions, which will also be outlined in a future report.

3 Background

- 3.1 On 16th April 2019 a report to Cabinet for the recommissioning of 'Vulnerable Adults Housing and Wellbeing Support Services' was agreed. This was part one of commissioning, which included support services for homelessness, domestic

abuse, young people, and people leaving institutional settings. These contracts went live on 1st December 2019

- 3.2 We are now commencing the second phase of recommissioning that covers the disabilities and mental health client groups.
- 3.3 The approach is like the first phase of commissioning, with a Positive Pathway consideration being used. Commissioners are working closely with CCG partners to ensure that there is a seamless step down for citizens, who move through statutory health and social care services into community-based living.
- 3.4 The current contracts (CO218) contract (Tranche 2) come to an end on 30th June 2021 with the new contracts expected to start 1st July 2021.
- 3.5 The current annual budget for current prevention services is £7.474m and is confirmed up to 30th June 2021.
- 3.6 The services are for vulnerable adults who:
- Have poor mental health
 - Have a learning, physical or sensory disability.
- 3.7 The types of services to be commissioned include:
- **Universal Prevention** - Services will be available to all vulnerable adults and will focus on self-enablement and accessing local community assets such as Neighbourhood Networks.
 - **Targeted Prevention** - Services will be client specific and delivered by a Navigator service to provide face to face support and access to relevant services aimed at providing prevention activity. Part of the Navigator and co-location of Navigator services is being considered with NHS commissioned mental health Hubs to enable support and medical requirements to be accessed in the same place. Lead Workers will provide a longer term and more personalised service including; initial and on-going engagement with clients and development of support plans. The intention is to provide support individuals need to overcome challenges and equip them to face and deal with challenges in the future.
 - **Transition** – services will provide support delivered into accommodation and maybe short or longer term delivered by a range of providers. There will also be an enablement service for people with learning disabilities.
- 3.8 Commissioned Services Alignment and Integration:

The design and specification of the services will facilitate clear pathways for support and ensure that a strong prevention first focus is built into every stage.

Dialogue relating to alignment, integration and opportunities for joint commissioning with partners is continually taking place in order to secure access into services for the most vulnerable. These include:

- Development of a joint mental health pathway with CCG and NHS provider trusts.
- Potential to co-locate services with NHS provider trusts.
- Access to community assets and local neighbourhood networks services, migration and resettlement support.

3.10 Existing Contractual Arrangements for these Services:

The existing Vulnerable Adult Support for disabilities and mental health contracts are due to expire on 30th June 2021. The future commissioning will continue to provide services to the existing cohorts of vulnerable adults; however, the design of future services will reflect a pathway approach as set out within this report.

3.11 Proposed Changes:

- 3.11.1 On 17th March 2020 Cabinet approved a 42 days consultation period commencing 26th March to 6th May 2020. But, due to potential changes to the procurement process timetables this will need to be deferred and aligned to progress with refreshed timetabling requirements.
- 3.11.2 At the current time with the impact of Covid-19 across the country our providers are focused on ensuring vulnerable adults with poor mental health or a learning disability can receive the support they require. Needs may now be new or different due to social isolation such as delivery of food or medication.
- 3.11.3 If the original procurement timetable is followed it would mean providers would have to divert valuable staff resources from the current pressures faced to bid writing and consultation is likely to be a low priority for recipients at this time.
- 3.11.4 A Covid-19 risk assessment can be seen at **Appendix A**. This was circulated to all providers seeking their views on the best way forward for our vulnerable adult clients. The feedback was in favour of deferring any commissioning plans including:
 - All staff resources are being diverted into front line duties.
 - Impact of Covid-19 is likely to continue into the autumn.
 - No resources to write bids.
 - Option 3 of the risk assessment to extend current contracts for 6 months was supported as it incurs the lowest risk and supports providers at this time to cover critical provision, but a year's extension provides the opportunity for providers and service users to stabilise again.
 - Providers are managing to keep services and customers at safe levels at this stage, but it is uncertain what we will face in the future.

- Focus needs to be on reducing impact for city and NHS.
- Midland Mencap stated “We think it’s best looking objectively at resources and scenarios, that we all focus on caring and protecting the vulnerable”.

4 Options considered and Recommended Proposal

4.1 Option 1:

Not undertake any further engagement with stakeholders. This is on the basis that whilst the proposed services will provide a very effective prevention response to vulnerable adults and will prevent or slow down the escalation of need into more costly statutory responses, the proposed services do not deliver direct care to individuals as a result of a statutory assessment.

4.2 Option 2: Recommended Option

To undertake a 60 day Be–Heard consultation for completeness to progress in alignment to refreshed timetabling requirements.

This recommended proposal will demonstrate an openness and desire to harvest any additional thoughts, views and opinions from service recipients, stakeholders and citizens. This will allow enough time for stakeholders and citizens to respond to the consultation considering their needs and vulnerabilities. By progressing the consultation in alignment to refreshed timetabling requirements citizens and stakeholders will be able to focus on the consultation at reflect their needs which may well be different at this current time due to Covid-19.

5 Consultation

- 5.1 Co design work commenced July 2019, with citizens, providers and a range of key stakeholders. This includes partners from across health, housing, social care, neighbourhoods, community and voluntary sector organisations.
- 5.2 NHS mental health commissioning partners have been involved in the design of the pathway to ensure links to their own commissioned services and pathways.
- 5.3 The vulnerable adults Citizens Panel have been consulted and engaged in the co-design of proposed services.
- 5.4 Alongside the proposed online consultation period, commissioning officers will be meeting with providers, key stakeholders and service users to help to refine commissioning principles. The proposed new timetable for consultation, procurement and mobilisation for 6- and 12-month contract extension period is shown in the table below.

Process	6 months	12 months
Be-Heard Online Consultation start	1 st November 2020	1 st May 2021
Be-Heard Online Consultation finish	30 th December 2020	30 th June 2021
Cabinet Approval (Procurement Strategy following consultation)	March 2021	October 2021
Proposed Procurement Timeline		
Invitation to Tender – Issue	6th July 2021	6 th January 2022
Invitation to Tender – Return	September 2021	March 2022
Evaluation Period	September/ November 2021	March/May 2022
DPR Approval (Award)	November 2021	May 2022
Contract Award	December 2021	June 2022
Mobilisation period including TUPE transfer	1st January – 30 th June 2022	1 st July – 31 st December 2022
Contracts Start	1 st January 2022	1 st July 2022

6 Risk Management

The risk management of this commissioning is overseen by the Vulnerable Adults and Housing Board which has formal responsibility for the Commissioning of these services. The Board is chaired by the Assistant Director of Commissioning Adult Social Care.

7 Compliance Issues:

7.1 How are the recommended decisions consistent with the City Council's priorities, plans and strategies?

7.1.1 The recommended decisions are consistent with the Council's priorities, plans and strategies and supports the Vision and Priorities in the Council Plan 2018-2022 as agreed by Cabinet across four priority areas:

Children – an aspirational city to grow up in: We will inspire our children and young people to be ambitious and achieve their full potential.

Jobs and skills – an entrepreneurial city to learn, work and invest in: We will create opportunities for local people to develop skills and make the best of economic growth.

Health – a fulfilling city to age well in: Citizens and communities will have choice and control over their care and improved resilience and independence.

Housing – a great city to live in: We will work with our partners to build a fair and inclusive city for all.

7.1.2 The decision within this report will contribute and support the delivery of the following strategies:

- Vision and Strategy to Modernise Adult Social Care 2017+
- Health and Well-Being Strategy 2017+
- Homeless Prevention Strategy 2017+
- Financial Inclusion Strategy 2016+
- Domestic Abuse Prevention 2018+
- Transition Strategy 2018+

7.2 Legal Implications

7.2.1 While there is no requirement to go out to formal consultation, for these services, for completeness of the engagement process and best practice a formal consultation should be considered.

7.3 Financial Implications

7.3.1 Future funding for these services has to be determined. This has been discussed with finance, but in this instance, there are no financial implications specific to the proposed consultation.

7.4 Procurement Implications (if required)

7.4.1 None identified for this proposed decision.

7.5 Human Resources Implications (if required)

7.5.1 None identified

7.6 Public Sector Equality Duty

7.6.1 A relevance test to decide whether the planned recommissioning and procurement of the vulnerable adults and housing support has any relevance to the equality duty contained within Section 149 of the Equality Act 2010 of eliminating unfair/unlawful discrimination and to promote equality and human rights commenced February 2019. The screening identified that there was no requirement to assess this further at this stage. As part of the re-commissioning the relevant risk logs will be maintained to allow further consideration which include contract award and mobilisation. The consultation will inform and help develop an Equality Assessment.

8 Background Papers

- 8.1 17th March 2020 Cabinet Report – Putting Prevention First: Strategy for the Commissioning of Vulnerable Adults Support for Disabilities and Mental Health

9 Appendices

Appendix A – Covid-19 risk assessment