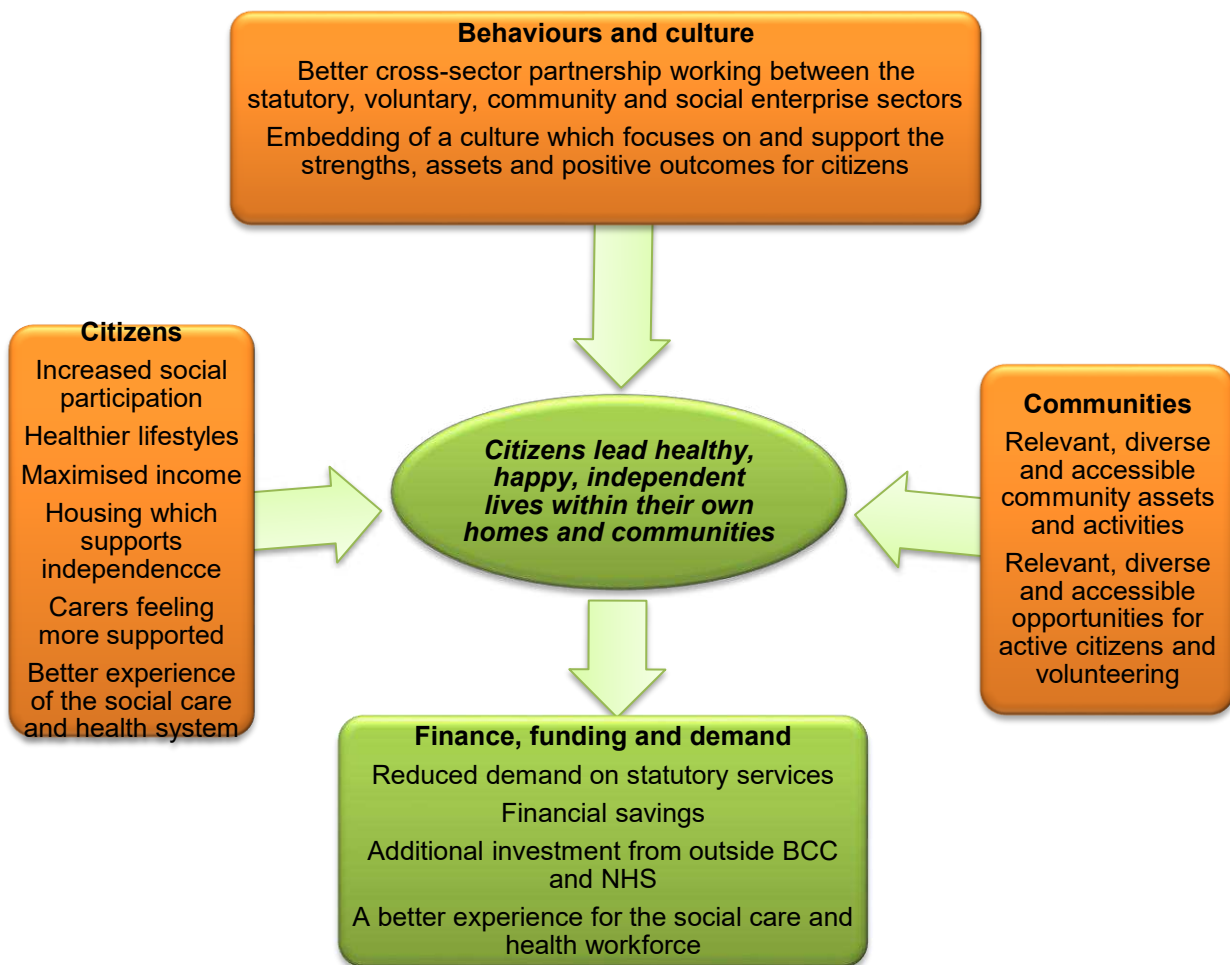


## Appendix 1: Prevention First Outcomes Framework



<b>“Prevention First” Outcomes</b>		<b>Examples of how evidence can be provided</b>
<b>System – Council and NHS</b>	<ul style="list-style-type: none"> <li>• Reduced demand on statutory services</li> <li>• Financial savings</li> <li>• Additional investment in the social care and health system</li> <li>• Happier, more productive workforce</li> </ul>	<ul style="list-style-type: none"> <li>• Reducing referrals to Adult Social Care &amp; Health</li> <li>• Reduced repeat presentations or admissions to statutory services</li> <li>• Costs for working with and supporting individuals compared to the costs of statutory interventions</li> <li>• Additional funding and resource accompanying BCC’s investment, including volunteering</li> </ul>
<b>Citizens</b>	<ul style="list-style-type: none"> <li>• Increased social participation</li> <li>• Healthier lifestyles (physical, mental and social)</li> <li>• Maximised income</li> <li>• Housing which supports independence</li> <li>• Carers feel more supported (as people and as carers)</li> <li>• Better experience of the social care system</li> </ul>	<ul style="list-style-type: none"> <li>• Case/citizen studies or stories</li> <li>• Citizen networks and connections</li> <li>• Positive changes to citizen perceptions and experiences</li> <li>• Satisfaction, confidence and support measures</li> <li>• Quality of life and independence measures</li> <li>• New money raised via unclaimed benefits</li> <li>• Employment and jobs</li> </ul>
<b>Communities</b>	<ul style="list-style-type: none"> <li>• Access to a relevant and diverse community offer</li> <li>• Access to more opportunities to participate in neighbourhoods</li> </ul>	<ul style="list-style-type: none"> <li>• Citizens accessing activities and services on their doorsteps</li> <li>• Citizens accessing group activities in local community or community of interest</li> <li>• Citizen perceptions and experience of community based activity</li> <li>• Onward referrals to community activities, organisations and groups</li> <li>• Volunteering by volume and type</li> <li>• Active participation in decision-making, consultation and engagement</li> </ul>
<b>System behaviour and culture</b>	<ul style="list-style-type: none"> <li>• Better internal partnership working across Council and NHS</li> <li>• Better cross-sector partnership working between the statutory, voluntary, community and social enterprise sectors</li> <li>• Embedding of a culture which focuses on and supports the strengths, assets and positive outcomes for citizens</li> </ul>	<ul style="list-style-type: none"> <li>• Referrals received from other organisations and groups across statutory, voluntary and community sectors</li> <li>• Case studies, stories and examples</li> </ul>

## Appendix 2: Financial implications and investment per annum

	2019/20	2020/21	2021/22	2022/23	TOTAL
	£m	£m	£m	£m	£m
<b>Budget</b>			New grant cycle Oct 2021		
IAG Services (Contracts)	0.300	0.600	0.600	0.300	1.800
Community Opportunities* (Grants)	0.350	0.700	0.350		1.400
Community Inclusion* (Grants)	0.250	0.500	0.250		1.000
Prevention and Early Intervention* (Grants)	0.375	0.750	0.375		1.500
New and Emerging* (Grants)	0.250	0.500	0.250		1.000
<b>Total Budget for this report</b>	<b>1.525</b>	<b>3.050</b>	<b>1.825</b>	<b>0.300</b>	<b>6.700</b>
Existing 3rd Sector Projects end Sept 2019	1.374	0.000	0.000		1.374
For New Cycle Oct 2021			0.923	2.448	3.371
<b>Total planned budget for activity</b>	<b>2.899</b>	<b>3.050</b>	<b>2.748</b>	<b>2.748</b>	<b>11.445</b>

<b>Funded by;</b>					
Allocated Current Base Budget in Adults	2.748	2.748	2.748	2.748	10.992
Contingent grants/partner funds etc. (see text)	0.151	0.302			0.453
<b>Maximum funding</b>	<b>2.899</b>	<b>3.050</b>	<b>2.748</b>	<b>2.748</b>	<b>11.445</b>

The following therefore are key subtotals making up the £6.7m in regard to this reports funding:

- Total of Grants £4.9m
- Total of Procurements £1.8m

\*The current annual allocation to “Third Sector Grants”, which will be providing the core budget for the new activities and services, is £2.748 million per annum. The new budget exceeds that by £0.151million in 2019/20 and £0.302million in 2020/21.

Where the potential grant awards and IAG contracts exceed the £2.748million per annum figure within the existing budget then additional funding from within Adult Social Care will be considered. This might be linked to winter pressures grant or partnership funds. The winter pressures plans for November to March for 2019/20 are being worked on now and will be subject to further processes for necessary approvals etc.,.

Where there is not additional funding available in either 2019/20 or 2020/21 to the existing £2.748million per annum budget then grant awards will be prioritised, as per the assessment and evaluation process, to award grants (including part-funding) within the

allocated budget. All grants will also be subject to annual review and renewal, including funding awards.

The figures also set out the maximum amounts per sub-programme and across the programme as a whole. Within the IAG contracts, there is anticipation through competition and evaluation of pricing that the maximum budget allocated will not be required. Likewise for one or more of the sub-programmes the Council may not be able to award funding up the allocated budgets, because of a lack of quantity or quality of grant proposals received.

## **Appendix 3: Grant strategy, processes and timeline**

### **1 Grants strategy**

- 1.1 There are two reasons why grants are being used as the Council's preferred tool for some of the programmes. The first is the diversity of the activity and services, which are expected to be supported and which are known to have a positive impact on prevention and early intervention. This makes the process of defining and specifying services to be delivered on behalf of the Council very complex and unlikely to lead to a successful and effective procurement of services.
- 1.2 The second reason for adopting a grants approach to some of the investment in the programme is to ensure that micro, small and medium sized organisations and groups are able to apply for and be awarded funding from the Council. This applies to organisations and groups which have an income of less than £1million per annum, representing 97% of the VCSE sectors. A key element of the Adult Social Care and Health vision and strategy is the investment in community assets, which are most affiliated with the smaller parts of the VCSE sectors. However, these parts of the sectors are also significantly disadvantaged in public sector procurement processes due to a lack of appropriate skills and capacity to engage with these processes. A grants approach will ensure that these smaller, but essential parts of the sector are able to receive funding which supports the Council's investment in prevention and communities.
- 1.3 In order to qualify for a grant, applicants must be able to evidence how their proposal will benefit one or more of the following groups:
  - 1.3.1 Older people;
  - 1.3.2 People with disabilities;
  - 1.3.3 People with mental health conditions.
- 1.4 Proposals will also need to show the impact on one of the following themes. These have been identified as gaps and strategically important issues through the Three Conversations and community social work, stakeholder engagement, as well as an analysis of community assets undertaken through Neighbourhood Network Scheme activity:
  - 1.4.1 Advice and support (including peer support);
  - 1.4.2 Affordable warmth and fuel poverty;
  - 1.4.3 Arts and culture;
  - 1.4.4 Bereavement;
  - 1.4.5 Community and day opportunities;

- 1.4.6 Capital (including adaptations and improvements of buildings, which can support community inclusion);
- 1.4.7 Digital inclusion;
- 1.4.8 Employment, volunteering and skills;
- 1.4.9 Housing and hoarding;
- 1.4.10 Partnerships;
- 1.4.11 Sport and physical activity;
- 1.4.12 Transport.
- 1.5 Lastly, to qualify for a grant applicants must be able to meet the following minimum criteria (in addition to the minimum requirements in the Council's Conditions of Grant Aid):
  - Evidence or a robust logic model showing a financial benefit which will support the Council's objectives which is at least equal to the size of the grant being applied for;
  - And/or evidence or a robust logic model showing value, impact and outcomes concerning citizens, communities, behaviour and culture (which are indicative of a potential benefit to the Council's objectives).
- 1.6 These criteria will be assessed by citizens and officers to ensure quality and evidence of impact. Where grant applications to the "New and Emerging" sub-programme show great potential, but for a variety of reasons (particularly if they are a new concept) are unable to show the adequate level of evidence the Council might consider awarding a small development grant for a three month period, which is proportionate to the size of the overall bid. This would be to support additional research and activity to evidence the potential benefits of the Council's investment in the proposal. It would be with the assumption that providers currently funded through the Third Sector Grants programme do not require this additional support due to the evidence already being requested and provided. The costs of this small-scale investment will be offset from the potential overall gains of the programme and programmes as a whole.
- 1.7 Grant payments will be made to VCSE organisations and groups as per their agreed Conditions of Grant Aid. Depending on the organisation's size and financial resilience payments will either be made according to:
  - Quarterly in arrears subject to satisfactory evidence of delivery, value and impact;
  - 30% at the start of the grant funded activity, 40% at a mid-way point and 30% at the end of the year (subject to provision of satisfactory evidence of delivery, value and impact).

- 1.8 Grants will also be subject to annual review and only renewed for a second year where they continue to provide evidence of a contribution to preventing demand and costs to Adult Social Care – consistent with their Conditions of Grant Aid.
- 1.9 Grants will also only be awarded within the available budgets as set out in Appendix 2, including the use of additional funding linked to winter pressures or the reinvestment of funding from emerging underspends within the Adult Social Care budget. Where the financial value of the applications received, exceed the budget available then as per the assessment and evaluation process, proposals will be prioritised and/or awarded part-funding to ensure that the total awards made doesn't exceed the total budget available.

Year	Month	Activity
2019	May	<ul style="list-style-type: none"> <li>• Cabinet approval for Prevention and Communities Programme</li> <li>• Grant application packs released and promoted to VCSE sectors</li> </ul>
	June	<ul style="list-style-type: none"> <li>• Applications received for programmes and initial assessments made - Community Opportunities, Community Inclusion, Prevention and Early Intervention</li> <li>• Applicants invited to present and pitch their proposals to citizens audience, with assessment on appeal and outcomes concerning citizens and communities</li> </ul>
	July	<ul style="list-style-type: none"> <li>• Officer panel and assessment of applications for Community Opportunities, Community Inclusion, Prevention and Early Intervention programmes</li> <li>• Grant awards recommended to providers for Community Opportunities, Community Inclusion, Prevention and Early Intervention programmes</li> <li>• Development grants awarded to providers for Community Opportunities, Community Inclusion, Prevention and Early Intervention programmes</li> <li>• Conditions of Grant Aid agreed and commenced with providers for Community Opportunities, Community Inclusion, Prevention and Early Intervention programmes</li> <li>• Applications received for New and Emerging programmes and initial assessments made</li> <li>• Applicants invited to present and pitch their proposals to citizens audience, with assessment on appeal and outcomes concerning citizens and communities</li> </ul>
	Aug	<ul style="list-style-type: none"> <li>• Officer panel and assessment of applications for New and Emerging sub-programme</li> <li>• Grant awards recommended to providers for New and Emerging sub-programme</li> <li>• Development grants awarded to providers for New and Emerging sub-programme</li> <li>• Conditions of Grant Aid agreed and commenced with providers for New and Emerging sub-programme</li> </ul>
	Oct	<ul style="list-style-type: none"> <li>• Recipients of development grants for Community Opportunities, Community Inclusion, Prevention and Early Intervention programmes invited to resubmit applications</li> <li>• Officer panel and assessment of applications for Community Opportunities, Community Inclusion, Prevention and Early Intervention programmes</li> <li>• Grant awards recommended to providers for Community Opportunities, Community Inclusion, Prevention and Early Intervention programmes</li> <li>• Conditions of Grant Aid agreed and commenced with providers for Community Opportunities, Community Inclusion, Prevention and Early Intervention programmes</li> </ul>
	Nov	<ul style="list-style-type: none"> <li>• Recipients of development grants for New and Emerging sub-programme invited to resubmit applications</li> <li>• Officer panel and assessment of applications for New and Emerging sub-programme</li> </ul>



Year	Month	Activity
		<ul style="list-style-type: none"> <li>• Grant awards recommended to providers for New and Emerging sub-programme</li> <li>• Conditions of Grant Aid agreed and commenced with providers for New and Emerging sub-programme</li> </ul>
2020	July-Nov	<ul style="list-style-type: none"> <li>• Grants reviewed and assessed by monitoring officer and Commissioning Manager, with recommendations to renew grant for second year</li> <li>• New applications received for the Community Inclusion sub-programme for assessment and evaluation</li> <li>• Grants extended for further 12 months or new grants awarded from the Community Inclusion sub-programme</li> </ul>

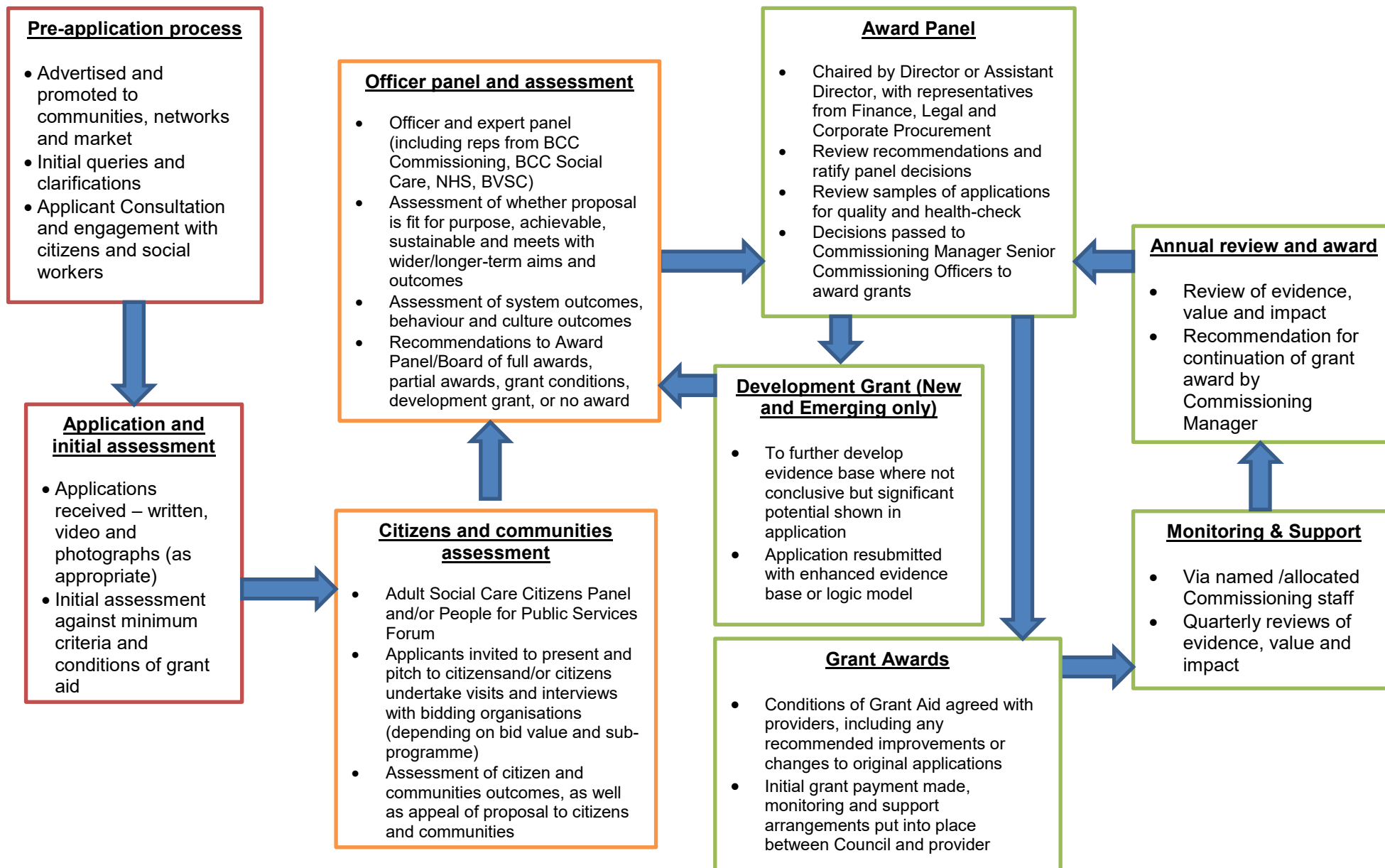
### Grant programme and sub-programme scope and specifications

Sub-programme	Brief description	Eligibility and process	Value
<b>Cross-cutting (applicable to all)</b>	<ul style="list-style-type: none"> <li>Prevention and Communities activity and services which are aligned with the following themes: <ul style="list-style-type: none"> <li>Community and day opportunities;</li> <li>Advice and support (including peer support);</li> <li>Capital (including adaptations and improvements of buildings, which can support community inclusion);</li> <li>Employment and skills;</li> <li>Arts and culture;</li> <li>Digital inclusion;</li> <li>Sport and physical activity;</li> <li>Housing and hoarding;</li> <li>Partnerships;</li> <li>Transport.</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>Applicants would be required to show benefits and outcomes to citizens, communities, behaviour and culture elements (Prevention First outcomes framework)</li> <li>Applicants required to show consultation and engagement with citizens and adult social care.</li> <li>Organisations and groups are permitted to submitted only one application per sub-programme and three overall</li> </ul>	Up to a maximum of £4.9million in total
<b>Community Opportunities</b>	<ul style="list-style-type: none"> <li>Supporting community opportunities (otherwise referred to as day services) which are not exclusively for people with assessed care needs and receipt of adult social care services.</li> <li>Applicable to activities and services attended by a mixture of citizens with and without assessed care needs in order to promote inclusion and community networks;</li> <li>Designed to diversify the income and funding of community opportunities through self-funders and direct payments;</li> <li>Grant based with organisations invited to submit applications for part-funding – with the remainder being provided through self-funders, direct payments</li> </ul>	<p>At least 50% of attendees must not have an assessed care need</p> <p>Funding of up to 70% of the service or activity costs</p> <p>Applicants required to show potential financial benefits and outcomes to the Council</p> <p>Restricted to organisations and groups currently funded through the Third Sector Grants Programme</p>	<p>Up to £700K per annum for two years – reviewed and renewed annually</p> <p>Upper limit of awards of £200K pa for single organisation bids and £100K pa per organisation within partnership bids</p>

Sub-programme	Brief description	Eligibility and process	Value
	and volunteers (in-kind equivalent to Living Wage). This to essentially provide an annual top-up grant to ensure that activities and services are financially viable;	Restricted to one bid for single organisation bids and one bid as the lead organisation in a partnership bid	
<b>Community Inclusion</b>	<ul style="list-style-type: none"> <li>Supporting inclusion of people with disabilities and/or mental health conditions in community activities, services and networks;</li> <li>Smaller scale activities and services, training and development of community assets, as well as capital improvements to aid accessibility for excluded groups;</li> <li>Similar approach to Constituency based Neighbourhood Network schemes, but with centrally run process and programme where applicants would need to evidence a gap in locality provision through consultation and coproduction with beneficiaries, relevant social work and health professionals and practitioners.</li> <li>Grants made as one-off (if capital), one year or two years.</li> </ul>	<p>Grant based programme for annual grants of up to £25K</p> <p>Restricted to organisations and groups with an annual revenue of less than £100K per annum</p> <p>Locality/ Constituency/ Community based services and activities for people with disabilities, mental health conditions and/or other vulnerable characteristics (e.g. homelessness)</p>	<p>Up to £500K per annum for two years– reviewed and renewed annually</p> <p>Upper limit of awards of £25K pa</p> <p>Lower limit of awards of £10K pa</p>
<b>Prevention and Early Intervention</b>	<ul style="list-style-type: none"> <li>Supporting the full variety of activities and services, which can support prevention and early intervention</li> <li>Aimed primarily at existing Third Sector Grants programme providers (exclusively for orgs currently funded by Adult Social Care or funded in the last two years) , particularly those with a consistent green RAG rating through the quarterly review process;</li> </ul>	<p>Grant based programme for grants of £25K or more</p> <p>Restricted to organisations and groups currently funded through the Third Sector Grants Programme</p>	<p>Up to £750K per annum for 2 years - reviewed and renewed annually</p> <p>Upper limit of awards of £200K pa for single</p>

Sub-programme	Brief description	Eligibility and process	Value
	<ul style="list-style-type: none"> <li>Services which duplicate commissioned IAG services excluded</li> </ul>	<p>Applicants required to show potential financial benefits and outcomes to the Council</p> <p>Restricted to one bid for single organisation bids and one bid as the lead organisation in a partnership bid</p>	<p>organisation bids and £100K pa per organisation within partnership bids</p> <p>Lower limit of awards of £25K pa</p>
<b>New and Emerging</b>	<ul style="list-style-type: none"> <li>Opportunity to consider ideas from arts and culture, digital, sports and physical activity, history and heritage, communities etc. which have not traditionally been funded by Adult Social Care but show alignment of potential impact and outcomes</li> <li>Likely to require some development grants to be awarded to assist promising applications to develop their evidence and logic model to a criteria which might result in a grant being awarded</li> </ul>	<p>Grant based programme for grants of £25K or more</p> <p>Restricted to organisations and groups not currently funded through the Third Sector Grants Programme or Adult Social Care in general</p> <p>Restricted to organisations and groups with an annual revenue of less than £1million per annum</p> <p>Restricted to one bid for single organisation bids and one bid as the lead organisation in a partnership bid</p>	<p>Up to £500K per annum for 2 years - reviewed and renewed annually</p> <p>Upper limit of awards of £200K pa for single organisation bids and £100K pa per organisation within partnership bids</p>

## Grants application, assessment and award process



## **Appendix 4: Information Advice & Guidance Services scope and specification**

### **1 Introduction and summary**

- 1.1 Services will be commissioned for citizens, their friends and family (as carers), who require information, advice and guidance to adapt to and manage a new or emerging life-changing condition. This is for the purposes of assisting citizens and their carers to engage with expertise and support at the earliest opportunity, which will help them maintain their independence for the longest time possible. As well as preventing and delaying the need for statutory services, these services will also ensure that citizens are able to better navigate through new and complex processes and systems in social care, health and benefits.
- 1.2 These services support the development of the Adult Social Care and Health Vision and Strategy, which includes a community model of delivering Information Advice and Guidance to citizens. They also support the new Adult Social Care Customer Journey, providing high quality information, advice and guidance, which is easy to access. The services will provide opportunities for self-help and self-service, an alternative to the Adult Social Care front door, as well as provide alternative options for citizens and their carers when contacting that front door.
- 1.3 The commissioned IAG services will provide an alternative option for citizens to access advice and support without contacting Adult Social Care. They will also provide an additional option for referral for citizens contacting Adult Social Care for the first time, about a specific and specialist issue. When citizens contact Adult Social Care, it is important that they are given a positive response and support to help resolve the issues they face. This would be achieved by emphasising what citizens can do for themselves, what support is available from other organisations and what support is available in the community.
- 1.4 The approach being proposed is consistent with the Council's existing Advice Strategy (2015), especially the preferred engagement, advice and support methods. There will also be a requirement in the specification for the preferred suppliers to deliver elements of the services through the public service hubs being developed in each Constituency. This is consistent with and will support the Council's emerging property strategy.
- 1.5 The IAG services will be delivered through three year contracts, with the option to extend for a further year, subject to performance and funding availability. This will be across four different contract lots, each providing services for a particular set of life-changing health conditions.

### **2 Procurement strategy**

- 2.1 The tender opportunity will follow the open route and will be advertised via Contracts Finder, Find It In Birmingham and the Official Journal of the European Union (OJEU).

- 2.2 The evaluation of tenders will be conducted in two stages. Stage 1 will consider “company information” and will consist of a mandatory pass/fail considerations. Tenderers must pass this stage in order to be considered in Stage 2, which will be an evaluation of quality, social value and price elements of the tendering questionnaire.
- 2.3 The contract awards will be based on the providers who receive the highest scores across the quality and price criteria in accordance with a pre-determined evaluation model. The quality element will account for 70%, the price element 20% and social value 10%. This balance has been established having due regard for the corporate documents “Evaluating Tenders Procedure v3.0” which considers the complexity of the services to be provided and the degree of detail in the specification.
- 2.4 The reasons for the increased focus on quality, with an 70% weighting is for two reasons. Firstly the contract values for each lot are £450K (based on £150K per annum over three years) and are based on the known costs of existing and similar services already funded through the Third Sector Grants programme. It is therefore not anticipated that there will be significant deviations in the costs provided by tenderers for providing the specified services. Additionally, the increased focus on quality reflects the complex nature of the subject matter and services which will be required. As a result there needs to be more weighting to reflect the expertise and specialisms which are required to deliver the outcomes specified within the contracts.
- 2.5 The quality of the each tender’s submission will be assessed in relation to specific requirements set out in the tender documents. Tenderers which score less than 70% of the quality threshold, i.e. a score of 49 out of a maximum quality score of 70 may not proceed to the next stage. This threshold has been applied to reflect the complexity of the services which are required to be delivered and to provide a credible level of assurance to the Council that the tenderers have the expertise, skills and capacity to successfully delivery the contract outcomes. Tenderers which meet the minimum quality threshold will proceed to the price evaluation.
- 2.6 Tenderers will be expected to submit a price on the basis of service delivery. The tenderer with the lowest acceptable price is given the maximum possible weighted price score. The other tenderers’ weighted price scores will be calculated on a pro rata basis.
- 2.7 The proposed contracts will be awarded to the first ranked tenderers with the overall highest scores for each lot. The tenders for each lot will be scored and evaluated against specific criteria to that lot, which considers the specific care and health conditions for which IAG services are being procured.
- 2.8 The evaluation will be undertaken by the Commissioning Manager and accompanying Senior Commissioning Officers for the “Prevention and Communities Programme”. It will also be undertaken by representatives from

Adult Social Work, NHS Birmingham & Solihull Clinical Commissioning Group and the Adult Social Care Citizens Panel, who will provide additional expertise and knowledge. The panel will not exceed five people for any individual lot and will be moderated by the Procurement Manager.

- 2.9 The Corporate Procurement approach is to follow the Council Risk Management Methodology and the Procurement Team is responsible for local risk management. Corporate Procurement maintains a risk management register and documentation relevant for each contract. The risk register for the service has been jointly produced and owned by Adult Social Care Commissioning and Corporate Procurement with arrangements being put in place to ensure operational risks are appropriately mitigated.
- 2.10 The proposed timeline and implementation plan is set out in Appendix 3. Contracts will be managed by the Commissioning Manager and delegated Senior Commissioning Officers using the Council's contract management process and toolkit. This will include the regular monitoring of key performance indicators with providers. The key performance indicators are based on the knowledge and experience accrued by Adult Social Care from comparable services delivered through the current Third Sector Grants programme.
- 2.11 The value of the contract awards for each lot means that BBC4SR will apply as the total value of contracts awarded to a single provider exceeds the £0.200m threshold (for revenue and services). In that situation a social value plan will be requested from the recommended provider, in order to qualify for the contract awards.
- 2.12 The Living Wage Policy does apply, meaning that all staff employed by providers to deliver the contracts awarded through this procurement process will be required to be paid the Birmingham Living Wage.

### **3 Scope and specification**

- 3.1 The Council will procure services according to four lots. Each lot will be required to provide a range of engagement, advice and support services and resources for citizens and their carers, as follows:
- Self-help factsheets, leaflets and relevant literature;
  - Website and social media based information and advice;
  - E-mail and phone enquiries;
  - Face to face enquiries and interviews, including in community venues and at home (where appropriate);
  - Applications for support, including benefits, welfare, disability related;



- Training and capacity building, including courses concerning safety at home and in the community, as well as wellbeing and healthy living sessions;
- Referrals and signposting to specialist services, community networks and activities;
- Peer to peer networking and mentoring opportunities.

3.2 The information, advice and guidance provided through these activities and resources will need to be appropriate and consistent with the specialist nature of some conditions, as well as key adult social care messages and communication to citizens.

3.3 The lots are:

- Lot 1: Visual loss and impairment
- Lot 2: Hearing loss and impairment
- Lot 3: Neurological conditions and associated disabilities
- Lot 4: Physical conditions and associated disabilities

## **4 Tender structure**

4.1 Stage 1 evaluations which will be pass/fail will consider the following criteria:

- Part 1 – Information about the applicant
- Part 2 – Grounds for mandatory exclusion
- Part 3 – Grounds for discretionary exclusion section 1
- Part 4 - Grounds for discretionary exclusion section 2
- Part 5 – Economic and financial standing
- Part 6 – Technical and professional ability
- Part 7 – Additional Questions
- Environmental Management
- Insurance
- Compliance with Equalities Duty
- Compliance with Health and Safety
- Compliance with BBC4SR
- Part 8 – Previous Experience
- Part 9 - Declaration

## 5 Evaluation of tenders

- 5.1 The quality of each tenderer's submission will be assessed in relation to specific requirements set out in the tender documents. These will be consistent across the four lots, as per the following:

Criteria	Overall Weighting	Sub-weighting
Early engagement and intervention with citizens in Birmingham, including anticipated outputs and outcomes	70%	30%
Availability and accessibility of information, advice and guidance across Birmingham's neighbourhoods and communities, , including anticipated outputs and outcomes		30%
Guidance and support to achieve outcomes for citizens and their carers, , including anticipated outputs and outcomes		30%
Quality and relevance of three year timeline and milestones		5%
Quality and relevance of risk management		5%

- 5.2 Tenderers will be required to achieve a minimum score of 49 (70% of the quality weighting) in order to be considered eligible for a contract.
- 5.3 The tenderer with the highest acceptable quality score is given the maximum possible weighted score.
- 5.4 The added social value of each tenderer's submission will be assessed based on a social value plan which is submitted in the tender documents. These will be consistent across the four lots, as per the following:

Criteria	Overall Weighting	Sub-weighting
Partners in Communities	10%	100%

- 5.5 Tenderers who score less than the threshold of 40% of the social value weighting i.e. a score of 4 out of a maximum social value score of 10 may not proceed to the next stage of the evaluation

- 5.6 Only suppliers that meet the minimum quality and social value thresholds will proceed to the price Evaluation.
- 5.7 Tenderers will be expected to submit a price on the basis of service delivery for the duration of the contract.
- 5.8 The tenderer with the lowest acceptable price is given the maximum possible weighted price score. The other tenderers' weighted price scores will be calculated on pro rata basis:

Criteria	Overall Weighting	Sub-weighting
Price	20%	20%

## 6 Timeline and implementation plan

6.1 This is as follows:

Procurement Strategy Approval (subject to Cabinet Call-In)	Wednesday 22 <sup>nd</sup> May 2019
ITT Issued	22 <sup>nd</sup> May 2019
ITT Return	21 <sup>st</sup> June 2019
Evaluation Period	24 <sup>th</sup> June-5 <sup>th</sup> July 2019
DPR Approval (Award)	8 <sup>th</sup> July 2019
Contract Award	19 <sup>th</sup> July 2019
Standstill period ends	29 <sup>th</sup> July 2019
Contract start	1 <sup>st</sup> October 2019
Contract end (without extension)	30 <sup>th</sup> September 2022

## 7 Performance, outputs and outcomes

7.1 Contract performance measures will include both outputs and outcomes. These will be:

Lot	Outputs (minimum and per lot)	Outcomes
Lot 1: Visual loss and impairment	<ul style="list-style-type: none"> <li>1,500 citizens supported per annum through initial phone and on-line</li> </ul>	1.6 Citizens feel informed and empowered about their options and the
Lot 2: Hearing loss and		

impairment	enquiries	support available
Lot 3: Neurological conditions and associated disabilities	<ul style="list-style-type: none"> <li>• 200 citizens per annum provided 1to1 advice and casework support</li> </ul>	1.7 Citizens and their carers are in receipt of all relevant benefits and other financial support available
Lot 4: Physical conditions and associated disabilities	<ul style="list-style-type: none"> <li>• 100 citizens per annum introduced to and engaged with neighbourhood, community and peer to peer groups and activities</li> <li>• 200 citizens per annum participating in training and health and wellbeing sessions</li> <li>• 100 professionals and practitioners per annum participating in briefing sessions to build wider knowledge and expertise</li> </ul>	<p>1.8 Citizens are active in their communities with a support network featuring several key contacts</p> <p>1.9 Citizens are living independently without the need for adult social care services</p> <p>1.10 Statutory and voluntary sector professionals and practitioners are more knowledgeable about specific life-changing health conditions</p>

## Appendix 5: EQUA277

Title of proposed EIA	Putting Prevention First: Investing in Communities
Reference No	EQUA277
EA is in support of	New Service
Review Frequency	Annually
Date of first review	15/05/2019
Directorate	Adult social care & health
Division	Commissioning
Service Area	
Responsible Officer(s)	<a href="#">Austin Rodriguez</a>
Quality Control Officer(s)	<a href="#">Gordon Strachan</a>
Accountable Officer(s)	<a href="#">Kalvinder Kohli</a>
Purpose of proposal	To commission and recommission services and activities for older people, people with disabilities and mental health conditions
Data sources	Consultation Results; relevant reports/strategies; Statistical Database (please specify); relevant research
Please include any other sources of data	Workshop discussions with existing providers; Adult Social Care Vision and Strategy; Adult Social Care data; Neighbourhood Network Scheme asset mapping.
ASSESS THE POTENTIAL IMPACT AGAINST THE PROTECTED CHARACTERISTICS	
Protected characteristic:	Wider Community
Age	
Age details:	The programme of investment will specifically benefit older people through providing services and activities which encourage greater community inclusion, as well as prevention of crisis and assessed care needs. This will include funding organisations which work specifically with older people, targeting areas and activities which are tailored specifically to older people.
Protected characteristic:	Wider Community
Disability	
Disability details:	The programme of investment will specifically benefit people with physical and learning disabilities through providing services and activities which encourage greater community inclusion, as well as prevention of crisis. This will include funding organisations which work specifically with these groups, targeting areas and activities which are tailored specifically for people with different disabilities and conditions.
Protected characteristic:	Not Applicable
Gender	
Gender details:	
Protected characteristics:	Not Applicable
Gender reassignment	
Gender reassignment	

details:	
Protected characteristics: Marriage and Civil Partnership	Not Applicable
Marriage and civil partnership details:	
Protected characteristics:	Not Applicable
Pregnancy and Maternity	
Pregnancy and maternity details:	
Protected characteristics: Race	Not Applicable
Race details:	
Protected characteristics: Religion or Beliefs	Not Applicable
Religion or beliefs details:	
Protected characteristics: Sexual Orientation	Not Applicable
Sexual orientation details:	
Please indicate any actions arising from completing this screening exercise.	Ensuring that funding and commissioning opportunities arising from this new programme of investment are well promoted and marketed with organisations and groups already working with and trusted by older people and people with disabilities.
Please indicate whether a full impact assessment is recommended	NO
What data has been collected to facilitate the assessment of this policy/proposal?	Adult Social Care data showing the profile of demand and need for statutory services
Consultation analysis	Older people and people with disabilities are disproportionately represented in adult social care services. This is either through volume or levels of cost and risk.
Adverse impact on any people with protected characteristics.	There is an unknown potential impact on any activities and services currently benefiting these groups, which are not funded through this programme which will replace the existing Third Sector Grants programme. This is being closely monitored.
Could the policy/proposal be modified to reduce or eliminate any adverse	There is already support being provided for all organisations and groups funded through the Third Sector Grants programme to increase to enable them to access the new funding and commissioning arrangements.

impact?

How will the effect(s) of this policy/proposal on equality be monitored? The outcome of the grant and contract award process, along with the annual review and renewal of grants.

What data is required in the future? Citizen engagement with funded services and activities ensuring that they reflect the profile of need and population the programme has been developed and designed for and with.

Are there any adverse impacts on any particular group(s)?  
No  
If yes, please explain your reasons for going ahead.

Initial equality impact assessment of your proposal The proposal is specifically designed and developed to encourage greater inclusion of excluded groups in their communities. This includes older people, people with disabilities and mental health conditions. If the programme of investment is successful with these aims it will help to reduce inequality and create the conditions for greater cohesion in the city's communities.

Other characteristics such as race, faith and gender are not being actively considered.

Consulted People or Groups

Informed People or Groups

Summary and evidence of findings from your EIA Through data analysis and stakeholder engagement, a need to improve inclusion of the groups subject to this proposal has been identified as a priority for investment. The stakeholder engagement has included citizens, current funded providers and social workers. Data has included adult social care demand data, as well as asset mapping data collected and analysed from Birmingham's Neighbourhood Network Schemes.

The information and intelligence taken from these activities has identified the types of activity and services which may be needed to enable inclusion as well as to best engage the groups subject to this proposal.

No analysis has been done concerning gender, race or faith though these characteristics will also need to be monitored to ensure that there is fair and equal access to these groups within the new commissioning programme.