


<p style="text-align: center;"><b>Cabinet</b></p> <p style="text-align: center;">30 January 2019</p>	 <p style="text-align: center;"><b>TOWER HAMLETS</b></p>
<p><b>Report of:</b> Denise Radley, Corporate Director Health Adults and Community</p>	<p><b>Classification:</b> Unrestricted</p>
<p>An Integrated Information and Advice Plan for Tower Hamlets</p>	

<b>Lead Member</b>	Councillor Denise Jones Cabinet Member for Adults, Health and Wellbeing
<b>Originating Officer(s)</b>	Warwick Tomsett, Joint Director, Integrated Commissioning
<b>Wards affected</b>	All
<b>Key Decision?</b>	Yes
<b>Forward Plan Notice Published</b>	20 December 2019
<b>Reason for Key Decision</b>	Impact on Wards
<b>Strategic Plan Priority / Outcome</b>	Better health and well-being

## Executive Summary

1. The Council's provision of information advice and advocacy services for health and social care are currently provided in isolation from each other and from other services across the system, resulting in information and advice being provided in a disjointed and inconsistent way, often leading to duplication, gaps and confusion without clear signposting to the services available or where these services can be accessed.
2. This paper sets out how the council plans to develop an integrated information, advice offer across health and social care and provide a new approach to the provision of information and advice which is joined-up, consistent and accessible for all residents in the borough.
3. In order to plan, design and deliver an integrated information approach, Cabinet is requested to approve an eight month extension to the existing Information Advice and Advocacy contract (AHWB4183) from 1 August 2019 to 31 March 2020.
4. This will align its end date with the Clinical Commissioning Group (CCG) funded Tower Hamlets Health and Advice Link contract and the information and advice work funded through the Local Communities Fund (from 1 October 2019) to enable a borough-wide review and redesign of how information and advice is provided and accessed across the Council, CCG and partner

organisations.

5. In line with the Strategic Plan (2018-21) priorities, a redesigned integrated information and advice service will allow residents to help themselves to a dynamic outcomes based service that is digitally innovative and will empower and support them to make healthy choices.
6. Cabinet (27 February 2018) has previously given the authority for the Information Advice and Advocacy Service contract (AHWB4183) to be extended to July 2019.

### **Recommendations:**

The Mayor in Cabinet is recommended to:

1. Agree the recommendation in this paper and authorise an eight month extension for the Information, Advice and Advocacy contract (AHWB4183) to align the end date with other commissioned services, and in doing so, allow for an appraisal and re-design of the various information and advice services in the borough to inform a new integrated information model and offer.

### **1. REASONS FOR THE DECISIONS**

- 1.1 The eight month extension to Real DPO Ltd will cost approximately £323,000 and is above the RCDA threshold, therefore Cabinet approval is required.

### **2. ALTERNATIVE OPTIONS**

- 2.1 The following options have been considered but are not recommended:

- Decommission the existing Information, Advice and Advocacy service and tender for the Independent Advocacy under the Care Act 2014 element only.
- Retender a similar service for eight months from July 2019 to March 2020 so that any new service will be aligned with the end of the Tower Hamlets Community Advice Network contract and the Tower Hamlets Health and Advice Link contract.
- Retender an Information Advice and Advocacy service for three/five years which will put on hold any opportunity to integrate this service with other commissioned services.

### **3. DETAILS OF THE REPORT**

- 3.1 The Council's provision Information Advice and Advocacy (IAA) for health, social care and welfare are currently provided in isolation from each other and

from other services across the system, resulting in information and advice being provided in a disjointed and inconsistent way, leading to duplication, gaps and confusion about where a resident should go if they require information and advice.

- 3.2 There is an abundance of information services available to residents in the borough. In 2013 the Council awarded the IAA contract to Local Link, a consortium of seven voluntary and community sector providers, in an attempt to address the fragmented nature of much of the information and advice services available at that time.
- 3.3 Since then a lot has changed and a range of services have emerged in the commissioning landscape which we need to take into. Clinical Commissioning Group (CCG) and Public Health funded services that were not previously commissioned (or in some cases didn't exist) will be considered, alongside other services such as those that will be funded through the Local Communities Fund (LCF) from 1 October 2019 to ensure that resources are used effectively to meet the broad range of information and advice needs and that a more integrated offer is in place.
- 3.4 The challenge is to find a way to coordinate services currently available in a coherent and joined-up manner in line with the duty the Care Act 2014 places on local authorities. In amongst services providing information advice and advocacy in Tower Hamlets are a number of commissioned services that can be brought together under a single integrated IAA offer to reduce duplication and create more efficient services.
- 3.5 **Commissioning an Integrated Information and Advice Offer**  
An integrated information and advice offer will set out a clear approach to information and advice that is integrated across health and social care (using the Tower Hamlets Together Partnership) and prevent inappropriate use of health and social care services by ensuring people have increased access to universal services where appropriate, including the range of community based services that are available.
- 3.6 It is current thinking that the statutory provision of independent advocacy under the Care Act 2014 will remain as a separate commissioned service; this approach however will be tested and further explored with providers as part of the wider work around the integrated offer.
- 3.7 There are a number of key information and advice related contracts that are due for renewal/re-commissioning within a relatively close time-frame (see table at 3.9). This presents the Council with an opportunity to explore options of combining resources to be more strategic; reduce duplication and ensure that the mix of services meet the needs of all residents through a more coordinated approach.
- 3.8 Voluntary and community sector advice services currently funded through Mainstream Grants will end in Sept 2019 when MSG is replaced by the LCF from 1 October 2019. The information and advice providers funded through

the LCF will deliver on an initial set of short/medium term outcomes and, alongside this, will work with the council and health partners, and their service users to coproduce longer term outcomes which will align with the new integrated approach.

3.9

<b>Service</b>	<b>Activities</b>	<b>Annual contract value</b>
Tower Hamlets Health and Advice Link (THHAL)	<p>Social welfare advice, improving access to mental health services as well as immigration, employment advice. Refers onwards to specialist agencies.</p> <p>Contract expires in March 2019 with the option to extend for up to two years with a 12 month break clause.</p>	£195,000
Local Link	<p>Information advice covering benefits and welfare, housing, employment adult social care. Also Care Act advocacy and general advocacy.</p> <p>Contract expires in July 2019.</p>	485,000
VCS advice and information services	<p>General and specialist welfare advice as well as advice with casework/specialist casework.</p> <p>Current funding arrangements end on 30 September 2019. From 1 October 2019, under the LCF, services will deliver on short/medium term outcomes, and work with the council on developing the integrated approach.</p>	980,000
<b>Total</b>		<b>£1,660,000</b>

3.10 In addition to the above, there are a number of other services delivering information and advice in its broadest sense, such as the Community Navigators funded by Public Health, Care Navigation provided by ELFT and Social Prescribing commissioned by the CCG. Although these services may not be in scope for any joint commissioning in the immediate future they will be a key part of an overall joined up approach to information and advice provision.

3.11 The development of a plan for a clear offer and approach to information and advice that is integrated across health and social care will cover three areas:

- Redesigning and commissioning of universal information and advice services.
- An integrated information offer – what, how and where information will be provided to residents.
- A joined up ‘front door’ to Adult Social Care.

These are set out in more detail below.

3.12 A project working group has been recently established and will report progress into the Tower Hamlets Together Living Well work stream. The working group currently has key stakeholders from the following agencies:

- LBTH Adult Social Care
- THCCG/LBTH Integrated Commissioning
- LBTH Corporate Customer Access
- LBTH Public Health
- LBTH Community Commissioning (Tackling Poverty)
- GP Care Group

3.13 Representatives from East London Foundation Trust (ELFT) and Bart’s are currently being sought. Children’s services will be approached to establish interest in working jointly as the GP Care Group and Bart’s are keen to include both adults and children’s. More discussion will take place with these partners to better understand and explore how we can work in a more joined up way.

3.14 Commissioners of the above services have committed to jointly undertake a borough-wide appraisal on how information health, social welfare and advocacy is provided and accessed across CCG as well as partner organisations that provide information and advice services.

3.15 The findings from the review will inform the development of an integrated approach. This may impact on the future commissioning decisions for the combined £1.66m, and would need to be agreed by summer 2019 so that any resulting tenders were completed by March 2020.

#### **4. Redesigning and commissioning of universal information and advice services**

- 4.1 The appraisal and the resulting work to develop commissioning intentions/specifications will include both providers and service users (co-production) to ensure that any future model has the appropriate buy-in. Tower Hamlets Council and CCG will appoint an external partner to support the production of:
- An appraisal of existing health, social care and welfare advice provision commissioned by the Council and the CCG
  - A needs assessment for health and social welfare advice in Tower Hamlets.
- 4.2 A range of views will be sought from providers and service users about the effectiveness of the commissioning and operational arrangements for the provision of health, social care and welfare advice in the borough. This will be achieved through the following objectives:
- Establish current levels of need for health, social care and welfare advice provision in Tower Hamlets
  - Gather insight into the experience of residents who health, social care and welfare advice services in Tower Hamlets
  - Assess the performance and effectiveness of current partnership arrangements
  - Explore how primary and social care services and advice providers can work more effectively coordinate/integrate in order to address the wider social determinants of health
  - Make recommendations for how provision of health, social care and welfare advice should evolve and innovate.
- 4.3 The appraisal will run from January to April 2019. The estimated budget for this piece of work is £30,000. The review will make use of a range of data sources held by the Council and CCG to produce an appraisal of current arrangements and a needs assessment for health, social care and welfare advice in Tower Hamlets.
- 4.4 No decision has been made on who will carry out this appraisal. A number of local organisations that have the capacity and experience to carry out the appraisal of this nature, such as Toynbee Hall, Queen Mary University of London and Advice UK will be considered. In appointing an organisation we will do so in accordance with the Council's procurement rules.
- 4.5 Based on these outputs, the Council and the CCG will work with local providers to co- design and commission a model of provision which both meets the needs of the local population and achieves the best possible value for money.
- 4.6 Through this work, we will have up-to-date data on the IAA needs in the borough and will be in a better position to determine whether a bespoke

information and advice service or whether a more co-ordinated, integrated approach through existing services is more appropriate.

**5. An integrated information and advice offer**

- 5.1 An integrated information and advice offer will set out how, what and where people access information and advice e.g. through the Council's and partner organisations webpages. It will ensure that wherever people access information and advice, whether on line or in a setting, the information and advice is coordinated and consistent.
- 5.2 Currently information about adult social care exists on the Council webpages, but this is limited, with few links across to health related information or to Tower Hamlets Together. Information could be provided in a more joined up and seamless way for residents. Previous work started as part of the Tower Hamlets Together vanguard around a public facing portal will be revived and brought under the integrated offer.
- 5.3 The Council, through Agilisys, commissions Public Consulting Group (PCG) to provide an 'Assist' information portal, community catalogue and e-market place. However, only the community catalogue function is currently live, so there is underused functionality, that if utilised could support the Council and its partners to deliver a full range of Care Act compliant information/sign-posting service that could prevent people needing to be unnecessarily brought into the health and social care system by diverting them to appropriate universal support.
- 5.4 In addition to the information and advice pages, the directory and the e-marketplace, the Assist portal can provide a range of other functionality. Some of these would be at additional cost and will be explored as part of other projects, such as the Independent Living Project (around equipment and assistive technology). Additional functions include:
- Links to NHS Choices
  - Online equipment store
  - Self-assessment forms / triage for referral directly into Initial Assessment 'front door'
  - Online support plans
  - Virtual Wallets (similar to payment cards)
  - Social prescribing solution – including condition code matching to directory providers and face to face booking system
  - Micro commissioning and dynamic purchasing functionality
  - Mobile apps
  - Artificial intelligence chat bots
  - Contract performance monitoring
- 5.5 Initial discussions with the GP Care Group around the portal have been positive and they have agreed to be part of the project working group to take this forward. As noted above representation from ELFT and Bart's is being sought.



- 5.6 As part of the development of the Information Plan the underused functionality will be addressed with a clear plan for rollout of the functionality and work will be undertaken to explore the other functionality that could support the wider information and advice offer, including how it links with other existing solutions such as the Open Objects directory used by Public Health and the Idea Stores.
- 5.7 The contractual arrangements via Agilisys will need to be novated back to the Council so there are opportunities to review the system to ensure it can meet the information and advice requirements of the Council and its partners.

## **6. A joined-up 'front door'**

Discussions around potential opportunities for joining up the Council's front door (customer contact centre) with the adult social care front door (initial assessment team) is ongoing and there has been some exploration of other potential join-up with health services such as the Single Point of Access. This is at an early stage and there is still some confusion around different language being used across partners and what is really meant by a joint front door.

- 6.1 The existing joint front door/single point of access work will move into this project to ensure that any proposals are formulated as part of an overall offer for information and advice that is supported by universal services and the right technology e.g. an online portal. A representative from the Council's corporate customer access team will join the project working group.

## **7. Options**

### **7.1 Option 1: (The preferred option) Redesign and commission a universal information and advice service**

An integrated information and advice offer will set out a clear approach to information and advice that is integrated across health and social care and prevent inappropriate use of health and social care services by ensuring people have increased access to universal services where appropriate, including the range of community based services that are available.

- 7.2 In order to plan, design and deliver an integrated information approach, an eight month extension to the Information Advice and Advocacy will align the end date with the Tower Hamlets Health and Advice Link contract and the VCS advice services as they move from Mainstream Grant Funding to the LCF.
- 7.3 This will also allow for a borough-wide appraisal and re-design of how information is provided and accessed across the CCG and partner organisations that provide information and advice services.



**7.4 Option 2: Decommission the existing Information, Advice and Advocacy service and tender for the Independent Advocacy element only.**

An impact assessment would need to be carried out to ensure that needs of service users accessing this service can be satisfactorily met by other information and advice provision in the borough. Under this proposal, an independent advocacy service under the Care Act 2014 will need to be commissioned.

7.5 Also, the Council would be less able to utilise the knowledge and experiences of the existing provider to contribute to the review, and would probably lead to less successful engagement / co-production as there would have a shorter period to engage with them (compared to Option 1).

7.6 Real DPO is the lead organisation in a consortia model for the IAA service. Real DPO are also the existing provider for the Direct Payments Support Service (DPPS) – which is out for tender now. The organisation primarily supports people with a disability. According to their website, all board members and 75% of front-line staff are disabled.

7.7 As an organisation they are overly dependent on the two contracts they hold with the council. Any changes to these two funding streams would need to be carefully managed to negate any potential damage to the council's reputation, and the impact on Real's service users.

**7.8 Option 3: Retender a similar service for eight months from August 2019 to April 2020**

This will align the new service with Tower Hamlets Community Advice Network contract and the Tower Hamlets Health and Advice Link contract and allow for an integrated information offer to be developed (see Option 1).

7.9 However, an eight month contract would not be appealing to the market and any procurement exercise for an eight month contract period is likely to be unsuccessful.

**7.10 Option 4: Retender an Information Advice and Advocacy service for three/five years**

This option would put on hold any opportunity to integrate this service with other commissioned services and a procurement exercise would have to begin by the end of December/start of January 2019 to be completed in time for a service start date of August 2019.

## **8. Next steps**

The project working group arrangements will be finalised and a detailed project plan with key milestones and tasks will be developed in order to redesign and deliver an integrated universal information and advice service. This will include benchmarking with other councils to see what approaches are being taken and the type of models that are being implemented.

## **9. EQUALITIES IMPLICATIONS**

- 9.1 A full equalities impact assessment will be included in the appraisal of existing information and advice type services. It is considered that by co-designing and delivering a new integrated information and advice offer, the service will be an improvement on the existing array of services and will contribute to minimising inequality in the borough and produce better outcomes for residents.

## **10. OTHER STATUTORY IMPLICATIONS**

### **10.1 Best Value Implications**

The Best Value duty requires the Council to make arrangements to secure continuous improvement in the way its functions are exercised having regard to a combination of economy, efficiency and effectiveness. The proposed option will provide a more cost effective method of service provision and improve services to residents.

### **10.2 Consultation**

The Council and the CCG will work with local providers to co-design and commission a model of provision which both meets the needs of the local population and achieves the best possible value for money. The proposed model (Option 1) will create efficiencies in service delivery and in monitoring requirements.

- 10.3 In setting up the LCF a series of workshops with organisations that deliver an information and advice service has already taken place. The planned appraisal will use the findings from these workshops and build on this work by gathering insight into the experience of residents who use health, social care and welfare advice services in the borough.

## **11. COMMENTS OF THE CHIEF FINANCE OFFICER**

- 11.1 The information, advice and advocacy service contract (Local Link) was previously extended to July 2019 following approval at Cabinet in February 2019. This report is requesting a further eight month extension to March 2020, which will align the end date with a number of other commissioned services, and support the appraisal and design of a new integrated information model and offer across both the Council and Health.
- 11.2 The eight month extension will cost £323,000, and will be met from the existing budget for this service provision.
- 11.3 The appraisal work to develop commissioning intentions and a specification for the proposed integrated information model is estimated to cost £30,000, and will be jointly funded by Health, Adults and Community and Resources directorates within existing resources.

## **12. COMMENTS OF LEGAL SERVICES**

- 12.1 The Council has a legal duty to subject the purchases it makes to competition. This is in order to demonstrate Best Value and to comply with the law generally relating to Procurement.
- 12.2 However, in this case there are compelling reasons that this purchase should not be subjected to competition at this stage. This is because to do so would not allow for the Council to align this service with other contracts for which the Council has recently become the responsible commissioner.
- 12.3 The procurement law generally is designed to prevent contracting authorities from acting anti-competitively. The actions in the report are to be taken in order to align the relevant services rather than to avoid competition. The realigned services will also then be subject to competition following the review.
- 12.4 At this stage the decision will cause a continuation of the same services and therefore it is unlikely that this decision will require any further considerations in respect of the Council's Equality Duty.

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## **Linked Reports, Appendices and Background Documents**

### **Linked Report**

- None

### **Appendices**

- None

**Background Documents – Local Authorities (Executive Arrangements)  
(Access to Information)(England) Regulations 2012**

- None

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