

Surrey Health and Social Care

SURREY-WIDE COMMISSIONING COMMITTEES IN COMMON

AGENDA Part One

This meeting will be webcast live via the Surrey County Council website via: <https://surreycc.public-j.tv/core/portal/webcasts> with the agenda, papers and minutes being published on the Surrey County Council website.

Questions from the public are welcome and should be emailed to the Team in advance of the meeting so a response can be provided, via: syheartlandsicb.governance@nhs.net

Committees in Common between the following organisations:

NHS Frimley ICB	✓
NHS Surrey Heartlands ICB (SyHt ICB)	✓
Surrey County Council (SCC)	✓

Date	Wednesday 20 March 2024	Time	10:00- 10:55
Venue	Virtual meeting/ Woodhatch Place, Reigate (Surrey County Council)		

Members/ Attendees:

Name	Title/ Role	Att (✓)/ Apols (A)		
		SyHt ICB	Frimley ICB	SCC
Convener				
Andrew Lloyd	(Convener) Surrey-wide Commissioning Committees in Common Independent Convener			
Members				
Ian Smith	(Chair) Chair	A		
Clare Stone	Director of Multi-Professional Leadership and Chief Nurse	✓		
Karen McDowell	Acting Chief Executive Officer	A		
Matthew Knight	Chief Finance Officer	✓		
Vacant	Clinical member	-		
Tracey Faraday-Drake	(Chair) Director for Children and Young People and All Age Learning Disabilities and Autism		✓	
Sarah Bellars	Chief Nursing Officer		A	
Vacant	Vacant		-	

Name	Title/ Role	Att (✓)/ Apols (A)		
		SyHt ICB	Frimley ICB	SCC
Richard Chapman	Chief Finance Officer		A	
Cllr Tim Oliver	(Chair) Council Leader			✓
Cllr Clare Curran	Cabinet Member for Education and Learning			✓
Cllr Sinead Mooney	Cabinet Member for Children and Families			✓
Cllr Mark Nuti	Cabinet Member for Adults and Health			A
Attendees				
Jonathan Lillistone	Director of Integrated Commissioning, Adult Social Care & Integrated Commissioning, Surrey County Council		✓	
Danielle Bass <i>For item 7</i>	Procurement Partner, Surrey County Council		✓	
Anna Kwiatkowska <i>For item 7</i>	Head of Procurement, Surrey County Council		✓	
Helen Coombes <i>For item 8</i>	Executive Director Adults, Wellbeing and Health Partnerships, Surrey County Council		✓	
Natasha Moore	(Minute-taker) Governance Manager, Surrey Heartlands ICB		✓	

Item No.	Timings	Item	Action	Presenter	Paper No
1.	10:00 5 mins	Welcome, Introductions and Apologies a) Confirmation of Convener	Note	Convener	Verbal
2.		Declarations of Interest a) To receive confirmation from all members and attendees that their entry in the Register of Interests is up-to-date, accurate and complete. b) To receive any declarations of interest pertinent to items on this agenda.	Note	Convener	1
3.		Quorum *	Confirm	Convener	Verbal
4.	10:05 5 mins	Minutes from the previous meeting on 13/12/2023	Approve	Convener	2
5.		Matters Arising: Action Log	Action	Convener	3
6.		Questions from members of the public	Respond	Convener	Verbal
7.	10:10 10 mins	Annual Procurement Forward Plan 2024/2025	Approve (SCC only)	Danielle Bass/ Anna Kwiatkowska	4

Item No.	Timings	Item	Action	Presenter	Paper No
8.	10:20 15 mins	Mental Health Investment Fund: <i>Annual Report and Process to Allocate Remaining Funds</i>	Approve (SyHt ICB and SCC only)	Helen Coombes	5
9.	10:35 15 mins	Dynamic Purchasing System (DPS) for Care and Support with Community Accommodation (Working Age Adults) – <i>Notification Of Contract Award</i>	Note (all 3 committees)	Jonathan Lillistone	6
AOB					
10.	10:50 5 mins	AOB	To note	All	Verbal
11.	10:55	Meeting close	To note	Convener	Verbal

Date of future meetings for 2024/25:

(All hybrid meetings, with 'in person' facility at Woodhatch Place for SCC colleagues)

- Wednesday 31 July 2024; 10:00- 12:00
- Wednesday 18 September 2024; 10:00- 12:00
- Wednesday 11 December 2024; 10:00- 12:00
- Wednesday 19 March 2024; 10:00- 12:00

***Quorum** and membership agreed by organisations individually. Details on Quoracy and voting are included in the Terms of Reference for each organisation as below:

Organisation	Quorum
Frimley ICB	One member
Surrey Heartlands ICB	A minimum of three members
Surrey County Council	Any three Cabinet members

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REGISTER OF INTERESTS

Definition of an interest

A conflict of interest occurs where an individual's ability to exercise judgement, or act in a role is, could be, or is seen to be, impaired or otherwise influenced by his or her involvement in another role or relationship. In some circumstances, it could be reasonably considered that a conflict exists even when there is no actual conflict. In these cases, it is important to still manage these perceived conflicts in order to maintain public trust.

It is not possible, or desirable, to define all instances in which an interest may be a real or perceived conflict. It is for each Individual to exercise their judgment in deciding whether to register any interests that may be construed as a conflict. If any Individual is unsure as to whether an interest should be declared then he or she should seek guidance from the meeting secretary or, if relevant, from the committee or sub- committee chair. (Examples below are non-exhaustive.)

Financial Interests

This is where an individual may get Direct financial benefits from the consequences of a commissioning decision. This could, for example, include being:

- A Director, including a non-executive Director, or senior employee in a private company or public limited company or other organisation which is doing, or which is likely, or possibly seeking to do, business with health or social care organisations;
- A shareholder (or similar ownership interests), a partner or owner of a private or not-for-profit company, business partnership or consultancy which is doing, or which is likely, or possibly seeking to do, business with health or social care organisations;
- A management consultant for a provider.

This could also include an individual being:

- In secondary employment;
- In receipt of secondary income from a provider;
- In receipt of a grant from a provider;
- In receipt of any payments (for example honoraria, one-off payments, day allowances or travel or subsistence) from a provider;
- In receipt of research funding, including grants that may be received by the individual or any organisation in which they have an interest or role; and having a pension that is funded by a provider (where the value of this might be affected by the success or failure of a provider).

Non-Financial Professional Interests

This is where an individual may obtain a non-financial professional benefit from the consequences of a commissioning decision, such as increasing their professional reputation or status or promoting their professional career. This may, for example, include situations where the individual is:

- An advocate for a particular group of patients;
- A GP with special interests, e.g. in dermatology, acupuncture, etc.;
- A member of a particular specialist professional body (although routine GP membership of the RCGP, British Medical Association (BMA) or a medical defence organisation would not usually by itself amount to an interest which needed to be declared);
- An advisor for the are Quality Commission (CQC) or the National Institute for Health and Care Excellence (NICE);
- A medical researcher;
- GPs and Practice Managers, who are members of the Governing Body or Committees of the ICB should declare details of their roles and responsibilities held within their GP practice.

Non-Financial Personal Interests

This is where an individual may benefit personally in ways which are not Directly linked to their professional career and do not give rise to a Direct financial benefit. This could include, for example, where the individual is:

- A voluntary sector champion for a provider;
- A volunteer for a provider;
- A member of a voluntary sector board or has any other position of authority in or connection with a voluntary sector organisation; Suffering from a particular condition requiring individually funded treatment;
- A member of a lobby or pressure group with an interest in health.

Indirect Interests

This is where an individual has a close association with an individual who has a financial interest, a non-financial professional interest or a non-financial personal interest in a commissioning decision (as those categories are described above) for example:

- A spouse/partner;
- Close relative e.g., parent, grandparent, child, grandchild or sibling;
- Close friend; or
- Business partner.

A declaration of interest for a "business partner" in a GP partnership should include all relevant collective interests of the partnership, and all interests of their fellow GP partners

Whether an interest held by another person gives rise to a conflict of interest will depend upon the nature of the relationship between that person and the individual, and the role of the individual within the ICB.

REGISTER OF INTERESTS: Surrey-wide Commissioning Committees in Common Members

Interests **highlighted in yellow** have been updated since the last meeting.

Updated: 11/03/2024

Name	Role	Declared Interest (Name of the organisation and nature of business)	Type of Interest			Is the interest direct or indirect	Nature of interest	Date of Interest		Action taken to mitigate risk
			Financial	Non-financial Professional	Non-Financial Personal			From	To	
Andrew Lloyd	Surrey-wide Commissioning Committees in Common Independent Convener	Farnborough Air Sciences Trust	N	N	Y	Direct	Chair of Farnborough Air Sciences Trust (Aerospace related Charity)	27/06/2023	Present	Withdrawn from specific commissioning decisions
		Rushmoor Voluntary Services	N	N	Y	Direct	Chair of Voluntary Sector Charity: Rushmoor Voluntary Services	27/06/2023	Present	Withdrawn from specific commissioning decisions
		Members Group Prospect Trust	N	N	Y	Direct	Chair of Members Group Prospect Trust (Multi Academy Trust)	27/06/23	Present	Withdrawn from specific commissioning decisions
NHS Surrey Heartlands ICB										
Ian Smith	Chair, Surrey Heartlands ICB	Trilantic Partners	Y			Direct	Private Equity	01/01/2005	Present	N/A
		Allsripts	Y			Direct	US Healthcare IT	25/06/2018	Present	N/A
		Ministry of Defence	Y			Direct	Ministry of Defence	01/05/2018	Present	N/A
		Edyn.care	Y			Direct	Ordinary	01/01/2015	Present	N/A
		On the Mend	Y			Direct	Ordinary	15/12/2021	Present	N/A
		Time for Medicine	Y			Direct	Ordinary	01/05/2010	Present	N/A
		Blenheim Chalcot	Y			Direct	Ordinary	01/04/2000	Present	N/A
		Metabolic Health Institute	Y			Direct	Investment	17/05/2022	Present	Withdrawn from specific commissioning decisions
Clare Stone	Director of Multi-Professional Leadership and Chief Nurse	Nil declaration								
Karen McDowell	Acting Chief Executive	SWL ICB				Indirect	Close Family Member is employed as the Locality Finance Director for Wandsworth & Merton Place	23/07/2018	Present	Interest Noted
		Renewed Hope - Support for Homeless & Vulnerable	N	Y	N	Direct	Volunteer for the shelter at weekends supporting homeless and vulnerable people. Applied for role as Trustee on the board.	30/06/2023	Present	Interest Noted
Matthew Knight	Chief Finance Officer	Nil declaration								

Name	Role	Declared Interest (Name of the organisation and nature of business)	Type of Interest			Is the interest direct or indirect	Nature of interest	Date of Interest		Action taken to mitigate risk
			Financial	Non-financial Professional	Non-Financial Personal			From	To	
NHS Frimley ICB										
Tracey Faraday-Drake	Director for Children and Young People and All Age Learning Disabilities and Autism	Frimley ICB			Y	Direct	Close family member works as part of Frimley ICB finance bank team as an Invoice Validator, 12 hours per week whilst studying for a Banking degree at the University of Sussex	09/10/2022	Present	Works to a different budget and portfolio. Deputy CFO is aware of the relationship as is his manager.
		Red Kite Housing Association		Y		Indirect	Non Executive Director, Chair of Remuneration Committee	11/09/2023	Present	Will be managed in accordance with the Conflicts of Interest policy
Sarah Bellars	Chief Nursing Officer	FHFT			Y	Indirect	Two close family members work for FHFT	01/04/2021	Present	Seek the advice of other senior members of the executive and non-executive team if there is a potential conflict
Richard Chapman	Chief Finance Officer	Nil declaration								
Surrey County Council										
Cllr Tim Oliver	Council Leader	Surrey County Council	Y			Direct	Health & Wellbeing Board Member	23/05/2018	Present	Interest Noted
		County Councils Network		Y		Direct	Chair	01/01/2020	Present	Interest Noted
		Shooting Star Childrens' Hospital		Y		Direct	Vice President	01/01/2015	Present	Interest Noted
		Surrey County Council	Y			Direct	Employee	23/05/2018	Present	Interest Noted
		Surrey Heartlands ICS	Y			Direct	Independent Chair	01/04/2019	Present	Interest Noted
		University of Surrey		Y		Direct	Nominated to the Innovate Surrey Board (a board of the University of Surrey for educational purposes)	01/05/2023	Present	Interest Noted

Name	Role	Declared Interest (Name of the organisation and nature of business)	Type of Interest				Is the interest direct or indirect	Nature of interest	Date of Interest		Action taken to mitigate risk
			Financial	Non-financial Professional	Non-Financial Personal	From			To		
Cllr Clare Curran	Cabinet Member for Education and Learning	Bookham United Charities			Y	Direct	Trustee of Bookham United Charities	tbc	Present	Interest Noted	
		Bookham Residents' Association			Y	Direct	Director of Bookham Residents' Association	tbc	Present	Interest Noted	
		St Nicholas, Great Bookham			Y	Direct	Member of the Parochial Church Council at St Nicholas, Great Bookham	24/11/2021	Present	Interest Noted	
Cllr Sinead Mooney	Cabinet Member for Children and Families	Daybreak (Charity)		Y		Direct	Trustee	tbc	Present	Withdraw from specified commissioning discussion and decisions	
		Surrey and Borders Partnership NHS Trust Council of Governors	tbc	tbc	tbc	tbc	Member	tbc	Present	Withdraw from specified commissioning discussion and decisions	
Cllr Mark Nuti	Cabinet Member for Adults and Health	Chertsey Cricket Club			Y	Direct	Chairman	tbc	Present	Interest Noted	
		Henry Smith Charity			Y	Direct	Chairman of Trustees	tbc	Present	Interest Noted	
		Feoffees of Chertsey Market			Y	Direct	Trustee	tbc	Present	Interest Noted	
		Chertsey Almshouses			Y	Direct	Trustee	tbc	Present	Interest Noted	
		Chertsey Town Football Club			Y	tbc	Vice Chairman	tbc	Present	Interest Noted	
		Chertsey Black Cherry Fair			Y	tbc	Committee Member	tbc	Present	Interest Noted	
		Chertsey Christmas Goose Fair			Y	tbc	Chairman	tbc	Present	Interest Noted	
		Stepgates Community School	tbc			tbc	Co-opted Governor	tbc	Present	Interest Noted	
		Runnymede Borough Council	tbc			tbc	Borough Councillor	tbc	Present	Interest Noted	
CEASED INTERESTS/ PREVIOUS MEMBERS' INTERESTS (to remain on register for 6 months following cessation)											
Samuel Burrows Ceased as a member Feb 2024	Chief Transformation & Digital Officer, NHS Frimley ICB	Nil declaration									

Surrey Health and Social Care

SURREY COMMISSIONING COMMITTEES IN COMMON

MINUTES

Committees in Common between the following organisations:

NHS Frimley ICB	✓
NHS Surrey Heartlands ICB (SyHt)	✓
Surrey County Council (SCC)	✓

Date	Wednesday 13 December 2023	Time	10:00- 10:20
Venue	Virtual meeting/ Woodhatch Place, Reigate (Surrey County Council)		

Members/ Attendees:

Name	Title/ Role	Att (✓)/ Apols (A)			
		SyHt ICB	Frimley ICB	SCC	
Convener					
Andrew Lloyd	(Convener) Surrey-wide Commissioning Committees in Common Independent Convener				
Members					
Ian Smith	(Chair) ICB Chair	A			
Clare Stone	Director of Multi-Professional Leadership and Chief Nurse	✓			
Karen McDowell	Acting Chief Executive Officer	A			
Michael Pantlin <i>On behalf of KMc</i>	Acting Deputy Chief Executive and Chief People and Digital Officer	✓			
Matthew Knight	Chief Finance Officer	✓			
Vacant	Clinical member	-			
Tracey Faraday-Drake	(Chair) Director for Children and Young People and All Age Learning Disabilities and Autism		✓		
Sarah Bellars	Chief Nursing Officer		A		
Samuel Burrows	Chief Transformation & Digital Officer		A		
Richard Chapman	Chief Finance Officer		A		
Cllr Tim Oliver	Council Leader				✓
Cllr Clare Curran	Cabinet Member for Education and Learning				✓
Cllr Sinead Mooney	(Chair) Cabinet Member for Children and Families				✓
Cllr Mark Nuti	Cabinet Member for Adults and Health				A
Attendees					
Jonathan Lillistone	Director of Integrated Commissioning, Adult Social Care & Integrated Commissioning		✓		
Helen Coombes <i>For item 7</i>	Executive Director of Adults, Wellbeing and Health Partnerships, Surrey County Council		✓		
Sara Saunders <i>For item 7</i>	Health Policy Integration Lead, Surrey Heartlands Integrated Care System		✓		
Sarah Quinn	Regulatory Business Manager, Surrey County Council		✓		
Natasha Moore	(Minute-taker) Governance Manager, Surrey Heartlands ICB		✓		

Item No.	Discussion and actions raised	Who/ By When						
1	<p>Welcome, Apologies and Confirmation of Convener AL was confirmed as Convener for this meeting.</p> <p>The Convener confirmed that the SCC Committee were meeting 'in person' to fulfil their statutory decision-making requirements; Frimley and SyHt ICBs were meeting virtually.</p>							
2	<p>Declarations of Interest</p> <p>a) To receive confirmation from all members and attendees that their entry in the Register of Interests is up-to-date, accurate and complete.</p> <p>b) To receive any declarations of interest pertinent to items on this agenda. The Convener noted the register of members' and attendees' interests. The Convener invited members and attendees to report any new declarations; amendments to the register; or any conflicts pertinent to items on this agenda. The following was received:</p> <ul style="list-style-type: none"> SM noted an amendment required to her declaration regarding Daybreak (Charity) be amended as this was not nominated by Spelthorne Borough Council. ACTION: Register to be updated. 	<p>Natasha Moore 23/02/2024</p>						
3	<p>Quorum: The required quorum was met for all committees.</p>							
4	<p>Minutes from last meeting on 20/09/2023 The minutes of the last meeting were presented.</p> <p>Decision Applicable to:</p> <table border="1" data-bbox="236 891 869 987"> <tr> <td>NHS Frimley ICB</td> <td>✓</td> </tr> <tr> <td>NHS Surrey Heartlands ICB</td> <td>✓</td> </tr> <tr> <td>Surrey County Council</td> <td>✓</td> </tr> </table> <p>The Surrey-wide Commissioning Committees: APPROVED the minutes of the last meeting.</p>	NHS Frimley ICB	✓	NHS Surrey Heartlands ICB	✓	Surrey County Council	✓	
NHS Frimley ICB	✓							
NHS Surrey Heartlands ICB	✓							
Surrey County Council	✓							
5	<p>Matters Arising:</p> <p>a) Action Log (no open actions)</p> <p>b) Emergency/ Urgent Decision taken since the previous meeting: Better Care Fund Section 75 Agreements 2022/23 and 2023-25 The above decision was taken by the committees in October 2023.</p> <p>Decision Applicable to:</p> <table border="1" data-bbox="296 1328 930 1424"> <tr> <td>NHS Frimley ICB</td> <td>✓</td> </tr> <tr> <td>NHS Surrey Heartlands ICB</td> <td>✓</td> </tr> <tr> <td>Surrey County Council</td> <td>✓</td> </tr> </table> <p>The Surrey-wide Commissioning Committees: RATIFIED the decision.</p>	NHS Frimley ICB	✓	NHS Surrey Heartlands ICB	✓	Surrey County Council	✓	
NHS Frimley ICB	✓							
NHS Surrey Heartlands ICB	✓							
Surrey County Council	✓							
6	<p>Questions from members of the public No questions were received from the public.</p>							
7	<p>Mental Health Investment Fund (Helen Coombes and Sara Saunders) Request was sought to transfer existing delegations, previously given to Joint Executive Director for Public Service Reform, to the Executive Director Adults, Wellbeing and Health Partnerships, Surrey County Council; and the Joint Chief Medical Officer and Executive Director Adult Mental Health, Surrey Heartlands ICB roles. This reflected current Executive Director structures and governance for the Mental Health Investment Fund.</p> <p>The following points were raised by members:</p> <ul style="list-style-type: none"> How can stronger consideration be given within the decision-making process to 'voices' of communities the fund services? How can the process be strengthened to demonstrate 'return on investment'; effectiveness/ impact of schemes; and improving outcomes? Acknowledging that the governance approval followed funding streams, i.e. from SyHt ICB and SCC, how can Frimley colleagues be linked into this process where impact on Frimley residents? <p>HC confirmed that the fund made a large contribution in shifting towards 'community resilience'. Much of the investment aligned to the Surrey Health and Wellbeing Strategy, with outcomes evident.</p>							

Item No.	Discussion and actions raised	Who/ By When						
	<p>Agreed that further work could be done on ensuring input of 'community voices'; visibility of the comprehensive evaluation process; and liaising with Frimley to ensure input.</p> <p>Regarding strategic discussion across the SCC footprint, it was confirmed that the Surrey Commissioning Collaborative meeting be the forum for these discussions.</p> <p>Decision Applicable to:</p> <table border="1" data-bbox="236 389 799 488"> <tr> <td>NHS Frimley ICB</td> <td>N/A</td> </tr> <tr> <td>NHS Surrey Heartlands ICB</td> <td>✓</td> </tr> <tr> <td>Surrey County Council</td> <td>✓</td> </tr> </table> <p>Outcome: The above Surrey-wide Commissioning Committees:</p> <ul style="list-style-type: none"> • APPROVED the transfer of delegated decision making to be joint responsibility and accountability between the Executive Director Adults, Wellbeing and Health Partnerships, Surrey County Council; and the Joint Chief Medical Officer & Executive Director Adult Mental Health, Surrey Heartlands ICB, until the end of March 2024 when revised arrangements will be considered by CinC. • ACTION: Agreed for a further agenda item at the next CinC meeting in March to cover the above areas raised. 	NHS Frimley ICB	N/A	NHS Surrey Heartlands ICB	✓	Surrey County Council	✓	<p>Helen Coombes/ Sara Saunders 23/02/2024</p>
NHS Frimley ICB	N/A							
NHS Surrey Heartlands ICB	✓							
Surrey County Council	✓							
8	<p>AOB None.</p>							
9	<p>Meeting closed at 10:20.</p>							
<p>Date of next meeting: Wednesday 20 March 2024; 10:00- 12:00</p>								
<p>Signed and agreed by:</p> <p>Date: DD MMM YYYY Andrew Lloyd, Surrey-wide Commissioning Committees in Common Independent Convener</p>								

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Surrey-wide Commissioning Committees in Common Action Log- Part I

Last updated 19/12/2023; NM

Meeting where action raised	Agenda Number/ Item	Action	By whom	Deadline	Status	Update
13/12/2023	2. Declarations of Interest	SM noted an amendment required to her declaration regarding Daybreak (Charity) be amended as this was not nominated by Spelthorne Borough Council. ACTION: Register to be updated.	NM	23/02/2024	Completed	19/12/2023: Register amended.
13/12/2023	7. Mental Health Investment Fund	Agreed for a further agenda item at the next CinC meeting in March to cover the areas raised at the meeting (see minutes).	HC/ SS	23/02/2024	Completed	19/12/2023: Item scheduled on forward planner.

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Agenda item: 7

Paper no: 4

Title of Report:	Health and Social Care Commissioning: Surrey County Council's Annual Procurement Forward Plan 2024/25	
Status:	TO APPROVE	
Committee:	Surrey-Wide Commissioning Committees in Common	20/03/2024
Venue:	Virtual meeting/ Woodhatch Place for SCC Committee	
Presented by:	Anna Kwiatkowska, Head of Procurement, Surrey County Council Danielle Bass, Procurement Partner, Surrey County Council	
Author(s)/ Lead Officer(s):	Anna Kwiatkowska, Head of Procurement, Surrey County Council Danielle Bass, Procurement Partner, Surrey County Council	

Executive Summary:

In March 2019, Surrey County Council's Cabinet approved the recommendation to delegate authority and decision making, related to the strategic commissioning of Health and Social Care services across Surrey, to the Surrey-Wide Committees in Common (CiC), (which meets under 'in common arrangements' with Frimley ICB and Surrey Heartlands ICB).

This included the delegation of key decision-making authority regards specific commissioning functions (Core Better Care Fund, ASC Learning Disabilities, ASC Mental Health, Children's Community Services/Emotional Health and Wellbeing, Continuing Healthcare and Public Health services) to the Committee.

The revised Procurement and Contract Standing Orders agreed by the Council in May 2019 and further revised in March 2023, require the preparation of an Annual Procurement Forward Plan (APFP) during the business planning cycle for all goods/services over the regulatory threshold.

The APFP has been developed for the financial year 2024/25 and the Surrey-Wide Committees in Common is asked to give Approval to Procure for all the projects listed in the CIC Tab (Annex 1), allowing implementation of the identified procurement activity that is led or jointly procured with Health by Surrey County Council.

Governance:

Conflict of Interest: The Author considers:	None identified	✓
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Previous Reporting: (relevant committees report has previously been presented to)	N/A	
Freedom of Information: The Author considers:	Open – no exemption applies. Part 1 paper suitable for publication: Annex 1 CIC Annual Procurement Forward Plan 2024.2025 (Additional information to be presented under Part II of the agenda: Annex 2.)	✓

Decision Applicable to:

Decision applicable to the following Committee/s:	NHS Frimley ICB	-
	NHS Surrey Heartlands ICB	-
	Surrey County Council	✓

Recommendation(s):

The Surrey County Council Surrey-wide Commissioning Committee is asked to:

1. **GIVE APPROVAL** to Procure for the projects listed in the Annual Procurement Forward Plan for 2024/25 in accordance with Surrey County Council’s Procurement and Contract Standing Orders.
2. **AGREE** that where the first ranked tender for any Surrey County Council projects listed in Annex 1 is within the +5% budgetary tolerance level, the relevant Executive Director, Director, or Head of Service (as appropriate) is authorised to award such contracts while consulting with the relevant Cabinet Member as appropriate.
3. **AGREE** the procurement activity marked as ‘yes’ in Column R within the Annual Procurement Forward Plan will be returned to the Surrey-Wide Committees in Common for review of the commissioning and procurement strategy before going to the market.

Reason for recommendation(s):

1. To comply with the Procurement and Contract Standing Orders agreed by Surrey County Council in May 2019, and further revised in March 2023.
2. To provide the Surrey-Wide Committees in Common with strategic oversight of planned procurement projects led or jointly procured with Health by Surrey County Council for 2024/25.
3. To ensure the Surrey-Wide Committees in Common oversight is focused on the most significant procurements.
4. To avoid the need to submit multiple individual requests for Approval to Procure as well as individual SCC only contract award approvals for work taking place in financial year 2024/25.

Next Steps

1. The approved plans will be delivered during the financial year 2024/25.
2. The projects highlighted as per recommendation (1) will be returned to the Surrey-Wide Committees in Common for review of the commissioning and procurement strategy prior to going out to market.

1. Details:

- 1.1. Surrey County Council's Cabinet approved the Annual Procurement Forward Plan for procurement activity to be delivered throughout the upcoming financial year (2024/25) on 19 December 2023. This approval did not include specific commissioning functions (Core Better Care Fund, ASC Learning Disabilities, ASC Mental Health, Children's Community Services/Emotional Health and Wellbeing, Continuing Healthcare and Public Health services) which fall in scope of the SCC Surrey-Wide Committees in Common (which meets under 'in common arrangements with Frimley ICB and Surrey Heartlands ICB).
- 1.2. As decisions relating to the above commissioning functions were delegated to the Surrey-Wide Committees in Common as part of the Surrey joint health and wellbeing strategy in March 2019, the Approval to Procure for the services in scope must be sought from the Surrey-Wide Committees in Common. While the Surrey-Wide Committees in Common holds the decision-making authority for their delegated functions, the decision will be taken in line with the Surrey-Wide Committees in Common ethos to:
 - 1.1.1 consider and make collective decisions for all delegated functions.
 - 1.1.2 discuss strategic commissioning decisions across Surrey.
- 1.3. Annex 1 lists all known projects over £214,904 (inc. of VAT) that are in scope of the Surrey-Wide Committees in Common and due for procurement in FY 2024/25. They include services that are funded by Surrey County Council and those jointly funded with Health. These projects will be publicised in due time using the established e-procurement platforms.
- 1.4. Please note that there may be services included in Annex 1 for which the procurement is likely to be led by the Integrated Care Boards (ICBs) or another partner. They are included so that the Surrey-Wide Committee in Common can approve in principle the Surrey County Council funding for the service.
- 1.5. The Council is required to comply with The Public Contracts Regulations 2015, as amended, to advertise and conduct a public tender for supply and services contracts above the procurement threshold of £214,904 (inc. of VAT). In October 2024 The Public Contracts Regulations 2015, will be superseded by The Procurement Act 2023, which the Council will be required to adhere to. Furthermore, with effect from 1 January 2024, the Council is required to comply with The Health Care Services (Provider Selection Regime) Regulations 2023
- 1.6. Budgets will be agreed with the service, finance, and partners (where applicable) through the development of a detailed procurement report and finalised before going out to market.
- 1.7. Once the Approval to Procure is granted by the Surrey-Wide Committees in Common, SCC officers may proceed to procurement without delay. Award decisions for SCC contracts are delegated to Executive Directors, Directors, or Heads of Service, while consulting with the relevant Cabinet Member as appropriate. It is noted that for joint procurements the appropriate scheme of delegation will need to be followed for each contracting party.
- 1.8. There will only be additional approvals required at the award stage of each SCC procurement in the event that the outcome is outside a +5% tolerance of the

budget agreed when each project begins. Any project with an outturn not within tolerance will be reported and approved as follows:

- 1.1.3 Under £1m: Section 151 Officer
 - 1.1.4 Over £1m: Section 151 Officer and relevant service Portfolio Holder
 - 1.1.5 Over £5m: Section 151 Officer and Surrey-Wide Committees in Common
- 1.9. By approving the APFP in this way, there will be no need to gain Approval to Procure for each individual project for the remainder of this financial year. This will streamline governance processes and ensure focus on the most important projects throughout the year. However, it is likely that some unforeseen projects will arise, and officers will need to seek Approval to Procure for these separately.
- 1.10. Where significant transformation or material change to the delivery of a commissioned service is proposed these projects have been identified in grey in Annex 1 or 2. Depending on the nature of the changes, public consultation and equality impact assessments may also be necessary. Further situations not currently anticipated for the projects within Annex 1 or 2 may arise during the year. In any situation, the final proposed commissioning strategy and, if applicable, the outcome of any public consultation and equality impact assessment, will be brought back to the Surrey-Wide Committees in Common as an exception report for a new Approval to Procure.
- 1.11. Whilst the APFP is integral to the business planning cycle, it is not intended to set budgets for coming years, a task which is handled via the Council's annual budget report that is approved by Full Council in February each year. Where the contractual limits and the available budgetary provision are not in alignment, the lower of the two will generally prevail.

2. Consultation:

- 2.1. Consultation will take place for individual projects as appropriate to the products or services required.

3. Risk Management and Implications:

- 3.1. If Surrey County Council does not manage the contract renewal programme effectively and efficiently it could lead to a detrimental impact on value for money and required outcomes and benefits from our contracted services. Good forward planning will enable adequate resources and ensure sufficient time is dedicated to ensuring appropriate procurement strategies and commercial negotiations to take place.
- 3.2. Also, by bringing forward Member and partner approval to an earlier stage in the governance process, there will be the opportunity for the review and influence of plans in advance of any procurements being carried out.

4. Financial and 'Value For Money' Implications

- 4.1. The APFP approach has been designed to facilitate better planning, early engagement, and strategic oversight and, therefore, allows for more efficient and effective use of resources to support delivery of commissioning intentions.

- 4.2. The financial resources for each project will be reviewed and agreed based on the budget set for the relevant Council service in its Medium-Term Financial Strategy.
- 4.3. In the current financial climate with inflationary pressures continuing, all projects will be subject to a full procurement report which details the commercial considerations. The intention is that SCC will work closely with the supply market to form stronger relationships, mitigate risk and secure the appropriate procurement models to drive sustainability and affordability.

5. Section 151 Officer Commentary

- 5.1. Significant progress has been made in recent years to improve the Council's financial resilience and the financial management capabilities across the organisation. Whilst this has built a stronger financial base from which to deliver our services, the increased cost of living, global financial uncertainty, high inflation and government policy changes mean we continue to face challenges to our financial position. This requires an increased focus on financial management to protect service delivery, a continuation of the need to be forward looking in the medium term, as well as the delivery of the efficiencies to achieve a balanced budget position each year.
- 5.2. In addition to these immediate challenges, the medium-term financial outlook beyond 2023/24 remains uncertain. With no clarity on central government funding in the medium term, our working assumption is that financial resources will continue to be constrained, as they have been for the majority of the past decade. This places an onus on the Council to continue to consider issues of financial sustainability as a priority, in order to ensure the stable provision of services in the medium term.
- 5.3. In this context, the Section 151 Officer recognises the benefit of approving the Annual Procurement Forward Plan (APFP), which sets out the contracts expected to be tendered during the 2024/25 financial year. The Section 151 Officer confirms that SCC's Finance team has reviewed the content of the APFP and will work closely with SCC's ASC and Procurement services, and health partners where relevant, to support tendering of services set out in the APFP at best value.
- 5.4. It remains however, the responsibility of the relevant Executive Director, Director or Head of Service to ensure that any expenditure committed to as a result of these procurements remains within the approved budget envelopes and is consistent with the Directorate's Commissioning Strategy.

6. Legal Implications – Monitoring Officer

- 6.1. Surrey-Wide Commissioning Committee is being asked to give formal Approval to Procure for the projects listed in Annex 1 in accordance with the Council's Procurement and Contract Standing Orders. In making this decision, Surrey-Wide Commissioning Committee should be cognisant of its fiduciary duty to Surrey residents to ensure services are provided effectively while also maintaining a balanced budget.
- 6.2. Notwithstanding Surrey-wide Commissioning Committee giving Approval to Procure, the Council need to ensure that The Public Contracts Regulations 2015,

as amended, and any further legislation introduced (The Procurement Act 2023) as well as The Health Care Services (Provider Selection Regime) Regulations 2023, as appropriate, are complied with in relation to any procurement undertaken.

- 6.3. For projects where additional statutory duties arise at a later date, for example as a result of a change in commissioning strategy, the Approval to Procure given at this stage will no longer be valid. Once additional statutory requirements have been satisfied, a report will need to return to Cabinet for a new Approval to Procure. Legal Services will advise in relation to any such situations on a case-by-case basis.

7. Equalities and Diversity

- 7.1. Equality Impact Assessments will take place for individual projects as appropriate to the products or services required.

8. Other Implications:

- 8.1. There are no significant implications upon key council priorities and policy areas
-

Consulted:

Surrey County Council – Cabinet Members, Executive Directors, Service Directors, Finance, Legal, Head of Procurement

Annexes:

Annex 1 – “CIC Annual Procurement Forward Plan for 2024/25” Part 1

Annex 2 – “CIC Annual Procurement Forward Plan for 2024/25” Part 2 (presented under Part II of the agenda)

Sources/background papers:

Procurement and Contract Standing Orders March 2023

Surrey Strategic Health and Care Commissioning Collaborative

Report Executive Summary

Title of Report	Annual Procurement Forward Plan 2024/2025
Author	Danielle Bass
Date of Report	20 March 2024

Executive Summary	
<p>In March 2019, Surrey County Council’s Cabinet approved the recommendation to delegate authority and decision making, related to the strategic commissioning of Health and Social Care services across Surrey, to the Surrey-Wide Committees in Common (CiC), (which meets under ‘in common arrangements’ with Frimley ICB and Surrey Heartlands ICB).</p> <p>This included the delegation of key decision-making authority regards specific commissioning functions (Core Better Care Fund, ASC Learning Disabilities, ASC Mental Health, Children’s Community Services/Emotional Health and Wellbeing, Continuing Healthcare and Public Health services) to the Committee.</p> <p>The revised Procurement and Contract Standing Orders agreed by the Council in May 2019 and further revised in March 2023, require the preparation of an Annual Procurement Forward Plan (APFP) during the business planning cycle for all goods/services over the regulatory threshold.</p> <p>The APFP has been developed for the financial year 2024/25 and the Surrey-Wide Committees in Common is asked to give Approval to Procure for all the projects listed in the CIC Tab (Annex 1), allowing implementation of the identified procurement activity that is led or jointly procured with Health by Surrey County Council.</p>	

Governance		
Conflict of Interest: The Author considers:	None	
Previous Reporting: (relevant committees/ forums this paper has previously been presented to)	The Annual Procurement Forward Plan has been presented each year to Collaborative and Committees in Common under delegated authority by Surrey County Council Cabinet since 2019.	
Freedom of Information: The Author considers:	RESTRICTED: Annex 2	✓

Implications	
What is the financial/ resource required?	<p>The CIC report has Section 151 commentary and finance clearance on the 22 February 2024 from the following;</p> <ul style="list-style-type: none"> • Rachel Wigley Director of Finance Insight and Performance • William House Strategic Finance Business Partner
What legislation, policy or other guidance is relevant?	<ul style="list-style-type: none"> • Procurement Contract Standing Orders • Procurement Contract regulations 2015 • Provider Selection Regime 2024

Is an Equality Analysis required?	N/A
Any Patient and Public Engagement/ consultation required?	N/A

Recommendations

The recommendation being presented is for the delegated decision-making of the fund to be joint responsibility and accountability between the following two Executive Directors to continue to reflect the joint nature of the fund:

Recommendation(s):

Surrey-wide Committees in Common are asked to:

1. Give Approval to Procure for the projects listed in the Annual Procurement Forward Plan for 2024/25 in accordance with Surrey County Council’s Procurement and Contract Standing Orders.
2. Agree that where the first ranked tender for any Surrey County Council projects listed in Annex 1 is within the +5% budgetary tolerance level, the relevant Executive Director, Director, or Head of Service (as appropriate) is authorised to award such contracts while consulting with the relevant Cabinet Member as appropriate.
3. Agrees the procurement activity marked as ‘yes’ in Column R within the Annual Procurement Forward Plan will be returned to the Surrey-Wide Committees in Common for review of the commissioning and procurement strategy before going to the market.

Next steps

Next Steps

1. The approved plans will be delivered during the financial year 2024/25.
2. The projects highlighted as per recommendation (1) will be returned to the Surrey-Wide Committees in Common for review of the commissioning and procurement strategy prior to going out to market.

For further information, contact:	Danielle Bass, Procurement Partner. SCC danielle.bass@surreycc.gov.uk
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Surrey Wide Committees in Common

Directorate	Service	Contract Name (over Regulatory Threshold, £214,904 inclusive of VAT)	Contract Description (up to 250 characters)	Capital/ Revenue/Grant funded/Mixed	Contract Length in months (including extensions)	Current Contract End Date	Procurement Activity Required (Renewal of Existing/ Replacement with New Service/ New Procurement Requirement)	Route to Market	Start date of new contract(s) (enter as dd/mm/yy)	To be reserved by CiC to review commissioning and procurement strategy before going to market? (Yes / No)
Adults, Wellbeing and Health Partnerships	Adult Social Care	All age Autism outreach and therapy provision	Contract for the Provision of All age Autism outreach and therapy provision	Revenue	TBC	N/A	New Procurement Requirement	Open	TBC	No
Adults, Wellbeing and Health Partnerships	Adult Social Care	Housing Related Support	Support for individuals living in the communiyt (no CQC regulated)	Revenue	TBC	N/A	New Procurement Requirement	Open	TBC	No
Adults, Wellbeing and Health Partnerships	Adult Social Care	Carers: support for carers of people with dementia	Support carers of people with dementia	Revenue	TBC	N/A	New Procurement Requirement	Open	TBC	No
Adults, Wellbeing and Health Partnerships	Adult Social Care	Discharge to Assess	Contract for the Provision of Discharge 2 Assess	Revenue	TBC	N/A	New Procurement Requirement	Open	TBC	No
Adults, Wellbeing and Health Partnerships	Adult Social Care	Community Rehabilitation and Reablement	Contract for the Provision of Community Rehabilitation and Reablement	Revenue	TBC	N/A	New Procurement Requirement	Open	TBC	No
Adults, Wellbeing and Health Partnerships	Adult Social Care	Individual Service Funds Pilot	Contract for the provision of Individual Service Funds Pilot	Revenue	TBC	N/A	New Procurement Requirement	Open	TBC	No

Adults, Wellbeing and Health Partnerships	Adult Social Care	LDA Quality Trackers/ User voice Pilot	Contract for the provision of LDA Quality Trackers/User Voice Pilot	Revenue	TBC	N/A	New Procurement Requirement	Open	TBC	No
Adults, Wellbeing and Health Partnerships	Adult Social Care	Collaborative Reablement Service	This service delivers reablement care and support in the homes of people living in their own home.	Revenue	48	30/09/2024	Renewal of Existing	Open	01/10/2024	No
Adults, Wellbeing and Health Partnerships	Adult Social Care	Stroke Support Service	Service to support stroke survivors and their carers.	Revenue	36	31/08/2024	Renewal of Existing	Open	01/09/2024	No
Adults, Wellbeing and Health Partnerships	Public Health	Bridge the Gap Trauma Informed Assertive Outreach Service	Contract for the Provision of Bridge the Gap Trauma Informed Assertive Outreach Service	Revenue	24	N/A	Renewal of Existing	Light Touch Regime	01/07/2025	No
Adults, Wellbeing and Health Partnerships	Public Health	First Steps	Mental wellbeing phonenumber, SMS, webchat and email service	Revenue	TBC	N/A	New Procurement Requirement	Light Touch Regime	TBC	No
Adults, Wellbeing and Health Partnerships	Public Health	Young People's Substance Misuse	Contract for Young People's Substance Misuse	Revenue	84	30/04/2025	Renewal of Existing	Light Touch Regime	01/05/2025	No
Adults, Wellbeing and Health Partnerships	Public Health	Surrey Suicide Bereavement Support Service	Contract for the Provision of Suicide Bereavement Support Service	Revenue	24	31/01/2025	Renewal of Existing	Light Touch Regime	01/02/2025	No
Adults, Wellbeing and Health Partnerships	Public Health	Contract for the Provision of 24/7 telephone helpline	Support for individuals requiring 24/7 telephone helpline with Drug and Alcohol support	Revenue	72	31/03/2025	Renewal of Existing	Light Touch Regime	01/04/2025	No
Adults, Wellbeing and Health Partnerships	Public Health	Substance Misuse Workers (Women's support services)	Contract for the Provision of Substance Misuse Workers (Women Support Services)	Revenue	60	31/03/2025	Renewal of Existing	Light Touch Regime	01/04/2025	No
Adults, Wellbeing and Health Partnerships	Public Health	Contract for the Provision of Drug Related Deaths Counselling	Support for individuals coping with Drug Related Deaths	Revenue	72	31/03/2025	Renewal of Existing	Light Touch Regime	01/04/2025	No



Agenda item: 8
Paper no: 5

Title of Report:	Mental Health Investment Fund: 1. Annual Report and 2. Process to Allocate Remaining Funds	
Status:	TO APPROVE	
Committee:	Surrey-wide Commissioning Committees in Common	Date: 20/03/2024
Venue:	Woodhatch Place, 11 Cockshot Hill, Reigate, RH2 8EF	
Presented By:	Helen Coombes, Executive Director Adults, Wellbeing and Health Partnerships, Surrey County Council	
Author(s)/ Lead Officer(s):	Sara Saunders, Health Integration Policy Lead, Surrey County Council and Surrey Heartlands Health and Care Partnership	

Executive Summary:

1. This paper provides the annual report to the Committees in Common regarding funds allocated from the Mental Health Investment Fund (MHIF). It also makes recommendations on the process to allocate the remaining funds.
2. The MHIF is an all-age non-recurrent Surrey wide resource created by Surrey County Council in 2022 with £6m of funding allocated by SCC, and a contribution of £4.5m from Surrey Heartlands ICS bringing the total fund available to £10.5m.
3. Funds totalling £8.6m have to date been distributed through three principal routes:
 - a. Two open funding rounds administered by Surrey County Council, totalling £4.3m
 - b. A transfer of £1m to Community Foundation Surrey to match fund Community Foundations Mental Health Scale Up Fund
 - c. A transfer to adults and children’s integrated commissioning teams of £3.2m within authorised parameters.

The recommendation being presented is:

1. That the allocation of the £1.9m remaining funds is overseen by the executive sponsors (Executive Director for Adults, Wellbeing and Health Partnerships, SCC and Executive Director responsible for Adult Mental Health, Surrey Heartlands ICS) in a process led by heads of commissioning to co-design solutions to a small number of key problems Surrey residents currently experience.
2. As the period over which projects commissioned by the MHIF has extended to February 2027, it is also recommended that that the sum allocated to programme management and evaluation to include accelerating outcomes where possible is increased from £100,000 to £220,000. This is an increase from 1% to 2% of the

total fund. This will also provide oversight and due diligence to ensure the allocated monies are used for the stated purpose across the projects.

Governance:

Conflict of Interest: The Author considers:	None identified	✓
Previous Reporting: (relevant committees/ forums this paper has previously been presented to)	Committee name: Surrey Heartlands ICS Executive; 26/02/2024 Outcome: Noted Committee name: Surrey County Council CLT; 27/02/2024 Outcome: Noted Committee name: Surrey-wide Commissioning Collaborative; 01/03/2024 Outcome: Noted	
Freedom of Information: The Author considers:	Open – no exemption applies. Part I paper suitable for publication.	✓

Decision Applicable to:

Decision applicable to the following partners:	NHS Frimley ICB	
	NHS Surrey Heartlands ICB	✓
	Surrey County Council	✓

Recommendation(s):

The Surrey-wide Commissioning Committees in Common is asked to:

1. Note the annual report on the delivery of the Mental Investment Fund to date.
2. Agree the principles, process and decision making for the use of the remaining funds.

Reason for recommendation(s):

This fund was first formed in 2022 alongside a public commitment to focus on improving early help and prevention provision in an area of increasing need. The fund is a fixed amount and maximum value for money therefore needs to be made from its use.

There has been consistent feedback across multiple stakeholders that there is no appetite to repeat the same processes used to allocate the majority of the fund. We therefore need to identify a different process.

This reflects themes from recent events which have considered the strength of system partnership. There was consensus of the power and real impact when as a system we come together around specific challenges or problems backed up by funding on this scale. Within that definition of system partners, we include the voice of Surrey residents and people with a lived experience.

There is an appetite to focus on one or two problems or areas of need, including looking at opportunities to accelerate impact and not distribute/dilute the remaining funds too widely. Solutions to resolve the problems would be co-designed as a system. The recommendation also sets out the parameter of the allocations being made within a legally compliant process whilst not embarking on a fresh round of procurement.

1. Annual Report

- 1.1 The MHIF is a joint fund established by Surrey County Council and Surrey Heartlands ICB in September 2022 consisting of a £6m contribution from Surrey County Council and a £4.5m contribution from Surrey Heartlands ICB.
- 1.2 The fund originated through a direct allocation from the 2022/23 council tax to stop vulnerable populations falling further behind. There was public support for allocating council tax increases to targeting areas of need that were causing real concern for Surrey residents.
- 1.3 The MHIF is a Surrey wide, all age resource to enable the delivery of the outcomes in Priority Two of the Health and Wellbeing Strategy. This priority area is focused on prevention, removing barriers, and supporting people to become proactive in improving their emotional health and wellbeing. The fund is for new and/or expansion of existing non-statutory services.
- 1.4 In September 2022 the process, governance and criteria for the fund were agreed by CiC.
- 1.5 In June 2023 allocations of £2m were agreed to Integrated Commissioning for schemes which align to the criteria and a specific award of £1.2m to a schools-based needs intervention programme.
- 1.6 In December 2023, Committees in Common approved the transfer of responsibility and accountability for the MHIF jointly to the Executive Director for Adults, Wellbeing and Health Partnerships, Surrey County Council and Joint Chief Medical Officer and Executive Director Adult Mental Health, Surrey Heartlands ICB. The authority was specific to the allocations already agreed by CiC with an expectation to return and agree the process for remaining funds. A report on the allocation of funds to date is provided to inform the decision-making process for remaining funds.
- 1.7 The Mental Health Prevention (MHPB) MHIF Oversight Sub-Group provides oversight and assurance specifically for the MHIF in the form of the quarterly reporting from the round 1 and round 2 schemes. As commissioner overseen projects go live intelligence from contract oversight and assurance will also feed into the oversight group in a proportional way. The Sub-Group has so far met in September and December 2023 and has provided active suggestions as to how the oversight function of the programme can be iterated whilst remaining proportionate to the scale of the funding awards.
- 1.8 The core purpose of the Mental Health Prevention Board is to support the Surrey System to move forward on the most important priorities for prevention and early intervention in mental health. It influences the criteria, delivery and evaluation and provides oversight to the MHIF Oversight Sub-Group. Four progress reports have been provided on MHIF to the MHPB in 2023.
- 1.9 The MHIF featured as a spotlight in the Priority 2 reporting to the Health and Wellbeing Board in 2023. Further assurance was sought and provided about the allocation to commissioners and that the criteria remain consistent across the fund. The next spotlight item is due in March 2024.
- 1.10 The Mental Health System Committee receives regular reports from the MHPB, which the MHIF has featured at regular intervals. This Committee oversees and provides assurance to the ICS Executive that the system is working to deliver, improve and transform mental health services to the population of Surrey.

2. Use of Funds to date

2.1 Figure 1 MHIF Allocated Funds provides a breakdown of the funds allocated/committed to date. Of the £10,500,000 fund £8,614,887 is either spent, committed, or allocated.

Committed expenditure		
Community Foundation for Surrey	£999,999	Paid 22/23
Round one bids	£797,969	Payments being made as per agreed schedule
Round two bids	£3,471,405	Payments being made as per agreed schedule
Surrey Wellbeing Partnership	£1,200,000	Payments being made as per grant agreement
Integrated Adults Mental Health commissioning team	£634,918	Safe harbours project committed
MHIF programme manager x 2 years	£140,000	Overheads likely need to be increased
	£7,244,291	
Approved allocations but not yet committed		
Integrated Adults Mental Health commissioning team	£365,082	Approved by CiC, remaining allocation pending
Integrated Children's commissioning team	£1,005,514	Approved by CiC, allocations proposal expected
	£1,370,596	
Remaining MHIF funding		
ICB	£718,138	
SCC	£1,166,975	

Figure 1 MHIF Allocated Funds

- 2.2 Funds started to be paid to individual schemes in April 2023 but analysis of the distribution of commitments shows that the majority of the funds will actually be spent between January 2024 and January 2025 as the greater sums have been awarded more recently. Figure 2 in the annex show the distribution of funding over time.
- 2.3 Projects started delivery from April 2023 but round 2 contracts continue until February 2027, a longer duration than originally anticipated. This was driven by the type of bids that were received and being able to fund a project for the length of time required to make the intended impact for those residents. This extends the life of the programme overall and also impacts when final reports from the individual schemes are received to contribute to the evaluation of the impact and outcomes. Mapping of the projects and funding shows that the majority of benefit will be experienced by Surrey residents from February 2024 and January 2026. See figure 3 for the mapping over time.
- 2.4 Analysing the populations who will be helped by the projects we can see an equal split of funds within rounds 1 and 2 between children, young people and families (47%) and adults (45%), with older adults having benefited the least (8%). However when the other allocations are included the percentage for children, young people and families increases to 60% and adults reduces to 35% and older adults to 4%.
- 2.5 Analysing the neighbourhoods who will be helped by the new investment we can see a relatively equal distribution across the key neighbourhoods, with a slightly higher proportion in Reigate and Banstead. See figure 4 in the annex. We can also see a good spread of benefit for priority populations with the exception of over 80's and those in care homes. See figure 5 in the annex for detail.

3. Community engagement and promotion of the fund

- 3.1 There has [public facing announcements](#) with the outcome of both open funding rounds to date.
- 3.2 With the majority of funds committed the focus in 2024 shifts into delivery and there is an ambitious joint plan for monthly stories about the individual projects to promote awareness and accessibility as well as providing further information to existing providers within the landscape of mental health prevention.
- 3.3 Consideration will be given to how to incorporate the projects into existing directories and signposting platforms to aid public awareness.

4. Evaluation of impact and outcomes

- 4.1 The commitment in the original paper outlining the MHIF to CiC was to evaluate the impact and outcomes of the fund against the Priority Two outcomes by 2030. Evaluation of outcomes which are preventing demand will also include a return-on-investment evaluation in the context of demand modelling. The methodology to enable a future evaluation will be based upon that used across priorities 1, 2 and 3 of the Health and Wellbeing Strategy. A logic model is a visualisation tool for monitoring the process of change which separates cause (if we do this) and effect (then this will happen) by identifying inputs, the outputs, outcomes (or differences) and the impact (measurable improvement which affects system value).
- 4.2 All schemes have identified KPIs and a range of qualitative and quantitative indicators. There is an in-built premise that by intervening earlier this can prevent escalation of needs requiring statutory intervention and support, which overall is a more cost-effective way of meeting the needs of residents. Where relevant we are asking schemes to capture what impact the intervention has had on use of wider services and what the person might have done instead.
- 4.3 To date all schemes have identified the priority population and key neighbourhoods within the Health and Wellbeing Strategy that will benefit. Applying this methodology will be the programme focus from January 2024 with a clear plan to evaluate and provide interim reports developed.
- 4.4 To note resources to undertake evaluation activities were not included in the previously approved allocation of programme resources.

5. Options for allocation of the remaining funds

- 5.1 A robust log of lessons learnt was collated from the participants of the open funding rounds and has informed the development of potential options. There was a high degree of consensus across the feedback. Key themes:
 - A formal procurement process is not conducive to identifying specific problems and asset-based commissioning to provide the solution.
 - There was generally a lack of innovation and partnership working across the schemes, partially attributable to the process.
 - Engagement and collaboration are key to getting the best out of the sector
- 5.2 Further engagement about the long list of options identified the following:

- Consensus that the landscape has changed rapidly since 2022 and a strong desire to want to focus on here and now problems.
- Lack of consensus over what the most pressing here and now problems are, although challenges in access was the area most often mentioned.
- Consensus over retaining the main criteria/principles of non-statutory provision focussing on early help/prevention.
- There is a tension between wanting to see the investment benefiting Surrey residents as quickly as possible and identifying and delivering a compliant process supported legally to allocate this funding. The recommendation balances both these requirements.

5.3 Direct feedback and engagement was incorporated into the development and evaluation of the options for the remaining funds to refine them into a single recommendation with accompanying principles and outline process.

6. Recommendation:

1. That the allocation of the £1.9m remaining funds is overseen by the executive sponsors (Executive Director for Adults, Wellbeing and Health Partnerships, SCC and Executive Director responsible for Adult Mental Health, Surrey Heartlands ICS) in a process led by heads of commissioning to co-design solutions to a small number of key problems Surrey residents currently experience.
2. As the period over which projects commissioned by the MHIF has extended to February 2027, it is also recommended that that the sum allocated to programme management and evaluation to include accelerating outcomes where possible is increased from £100,000 to £220,000. This is an increase from 1% to 2% of the total fund. This will also provide oversight and due diligence to ensure the allocated monies are used for the stated purpose across the projects.
3. Delivered according to the following principles:
 - The remaining funds should be used for larger initiatives and benefit as broad a population distribution as possible.
 - The principle of focussing on early intervention and preventions as outlined in priority 2 of the HWB Strategy remains.
 - The principle of funding non-statutory provision remains, though we would want to consider opportunities for partnerships in delivery if that supports sustainability and better outcomes/accelerated innovation.
 - Introducing the principle of co-design to identify as a system the specific challenges and problems to address with the remaining funds.
 - Delivery should not extend beyond the current end date of the programme of February 2027.
 - Monies will be allocated through a legally compliant process.

Delivered within the following outline process:

- Executive sponsors with Heads of commissioning will facilitate a round table session which includes community representatives, place leaders, VCSE leaders and NHS providers to agree investment target areas that reflect some of the current pressures and collectively agree two to three problems statements relating to the here and now.
- The problem statements will provide the scope to map which existing contracts within P2 have the capacity and flexibility to address the identified need through variation or extension within the legal procurement parameters. Consideration for grants through key voluntary sector partners will also be considered in order to maximise opportunity to allocate monies.

7. Consultation:

- 7.1 No public engagement/consultation is required.
- 7.2 There has been engagement with a range of stakeholder in the development of these recommendations starting with feedback from panel members across statutory and non-statutory organisations involved in rounds 1 and 2 of the procurement process.
- 7.3 Commissioning, legal, finance and procurement input has also been sought in developing a feasible recommendation.
- 7.4 We have also incorporated the outcome of dialogue with representatives from the VCSE Alliance.
- 7.5 More formal discussions at the Strategic Commissioning Collaborative have also helped to shape the recommendation.

8. Risk Management and Implications:

Type of risk	Risk	Implication	Mitigation
Financial – value for money	The funds will further depreciate and ‘buy’ less for Surrey residents if a decision and action is not taken to allocate	The funds will ‘buy less’ as time goes on and provide less value for money from income received in 2022	Rapid implementation of the approved process
Financial – value for money	The financial impact of the schemes funded by the MHIF is unclear	The benefits derived from the MHIF are unclear meaning future investment decisions are less well informed	The evaluation process for the MHIF schemes will include clear assessment of their financial impact and benefits
Reputational	The MHIF was a joint commitment to the public in 2022 and there is a direct accountability to demonstrate how the money is improving outcomes. Evaluating	If the decision to allocate funds is not supported there is a risk this accountability to the public is not met	Delivering an evaluation that aligns to the Health and Wellbeing Strategy methodology of defining and

Type of risk	Risk	Implication	Mitigation
	impact and outcomes is not currently resourced.		quantifying outcomes and benefits.
Failure of delivery	Taking an all-age view there is a wide range of areas of challenge and need this fund could be targeted at. There is a risk that a co-design process does not provide a consensus on the most pressing problems	A deliverable solution is not identified within a reasonable timeframe	Data on the use of funds to date can be used to inform the process and narrow the range of issues

9. Financial and ‘Value For Money’ Implications

- 9.1 The MHIF monies are held in SCC’s reserves and are allocated out against approved expenditure.
- 9.2 It is expected that the projects funded out of the MHIF will have a range of whole system benefits through investment into preventative services therefore requiring less expenditure on mental health treatment and support services in subsequent years than would otherwise be required while also improving outcomes for Surrey residents. It will be important for the Mental Health Improvement Delivery Board to closely monitor the delivery of targeted outcomes and associated benefits, and for the financial impact of schemes to be assessed as part of the evaluation process.

10. Section 151 Officer Commentary

- 10.1 Significant progress has been made in recent years to improve the Council’s financial resilience and the financial management capabilities across the organisation. Whilst this has built a stronger financial base from which to deliver our services, the increased cost of living, global financial uncertainty, high inflation and government policy changes mean we continue to face challenges to our financial position. This requires an increased focus on financial management to protect service delivery, a continuation of the need to be forward looking in the medium term, as well as the delivery of the efficiencies to achieve a balanced budget position each year.
- 10.2 In addition to these immediate challenges, the medium-term financial outlook beyond 2023/24 remains uncertain. With no clarity on central government funding in the medium term, our working assumption is that financial resources will continue to be constrained, as they have been for the majority of the past decade. This places an onus on the Council to continue to consider issues of financial sustainability as a priority, in order to ensure the stable provision of services in the medium term.
- 10.3 In this context the Section 151 Officer can confirm that the remaining MHIF monies not yet committed of £1.9m are held in the Council’s reserves and will be deployed to fund approved expenditure in line with MHIF governance.
- 10.4 The Section 151 Officer recognises that effective deployment of MHIF monies should have whole system benefits that would support financial sustainability

across the system as well as delivering improved outcome for residents. The Section 151 Officer would emphasise the importance of tracking the impact of the deployed MHIF monies so learning can be used to ensure future allocations maximise whole system benefits and value for money.

11. Legal Implications – Monitoring Officer

12. Equalities and Diversity

12.1 The use of the MHIF is specifically being used to focus on priority populations and key neighbourhoods specified in the Health and Wellbeing Strategy. This priority area is focused on prevention, removing barriers, and supporting people to become proactive in improving their emotional health and wellbeing.

12.2 Any relevant commissioned services will need to complete an equalities impact assessment (EQIA).

Consulted:

Committee name: Surrey iCab
Meeting date: 05/03/2024
Outcome: Approved

Committee name: Surrey County Council CLT
Meeting date: 27/02/2024
Outcome: Noted with no comments

Committee name: Surrey Heartlands ICS Executives
Meeting date: 26/02/2024
Outcome: Noted with no comments

Annexes:

- Figure 2 1 Distribution of funding over time across round 1 and 2
- Figure 3 1 Project timelines round 1 and 2 schemes
- Figure 4 1 Distribution across key neighbourhoods
- Figure 5.1 Distribution across priority populations

Sources/background papers:

- Surrey All Age Mental Health Investment Fund Arrangement – Surrey Wide Commissioning Committees in Common – 21/09/2022
- Surrey All Age Mental Health Investment Fund (MHIF): process for use of funding - Surrey Wide Commissioning Committees in Common – 28/06/2023
- Mental Health Investment Fund Delegated Decision Making – 13/12/2023

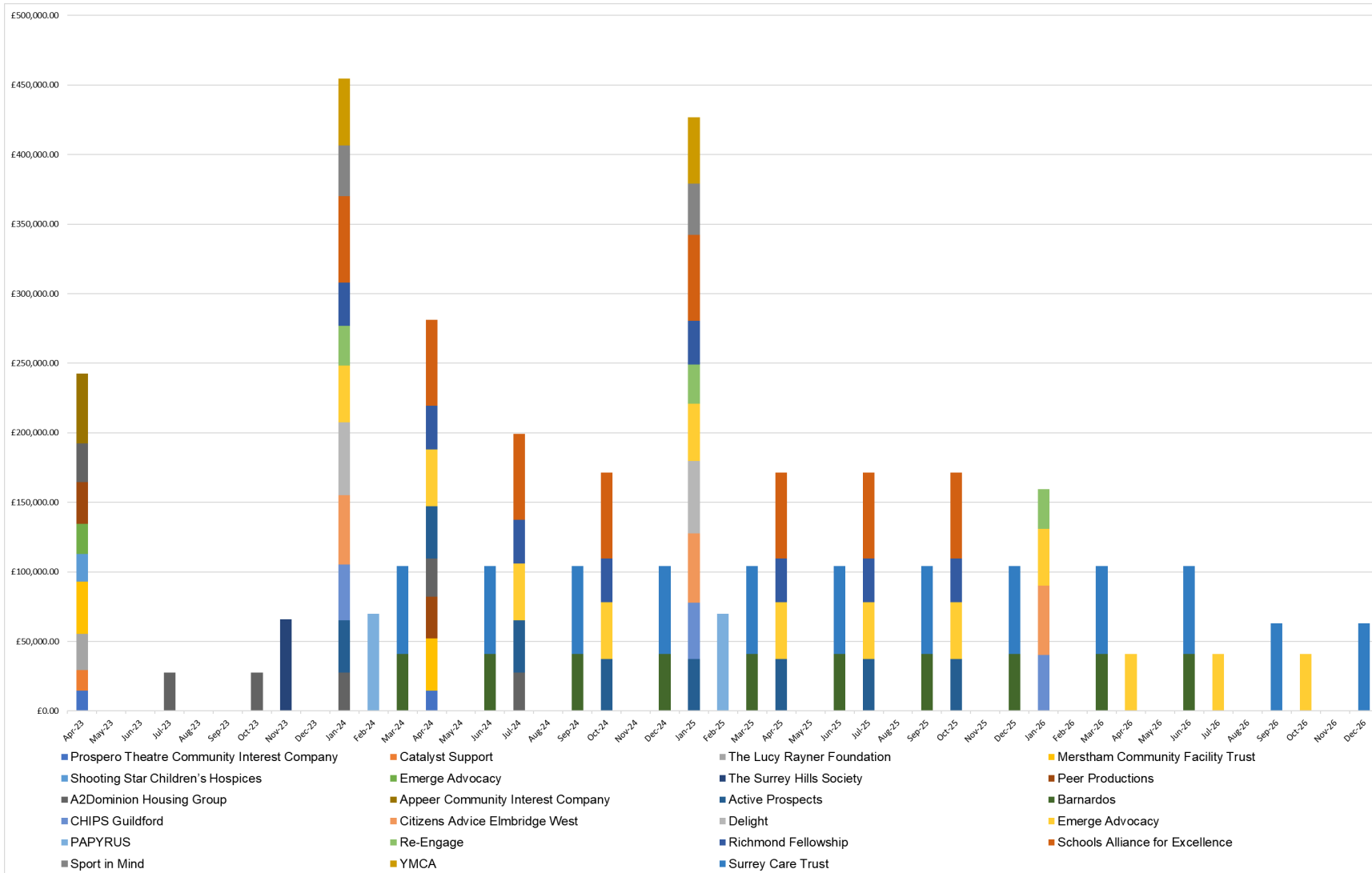


Figure 2 1

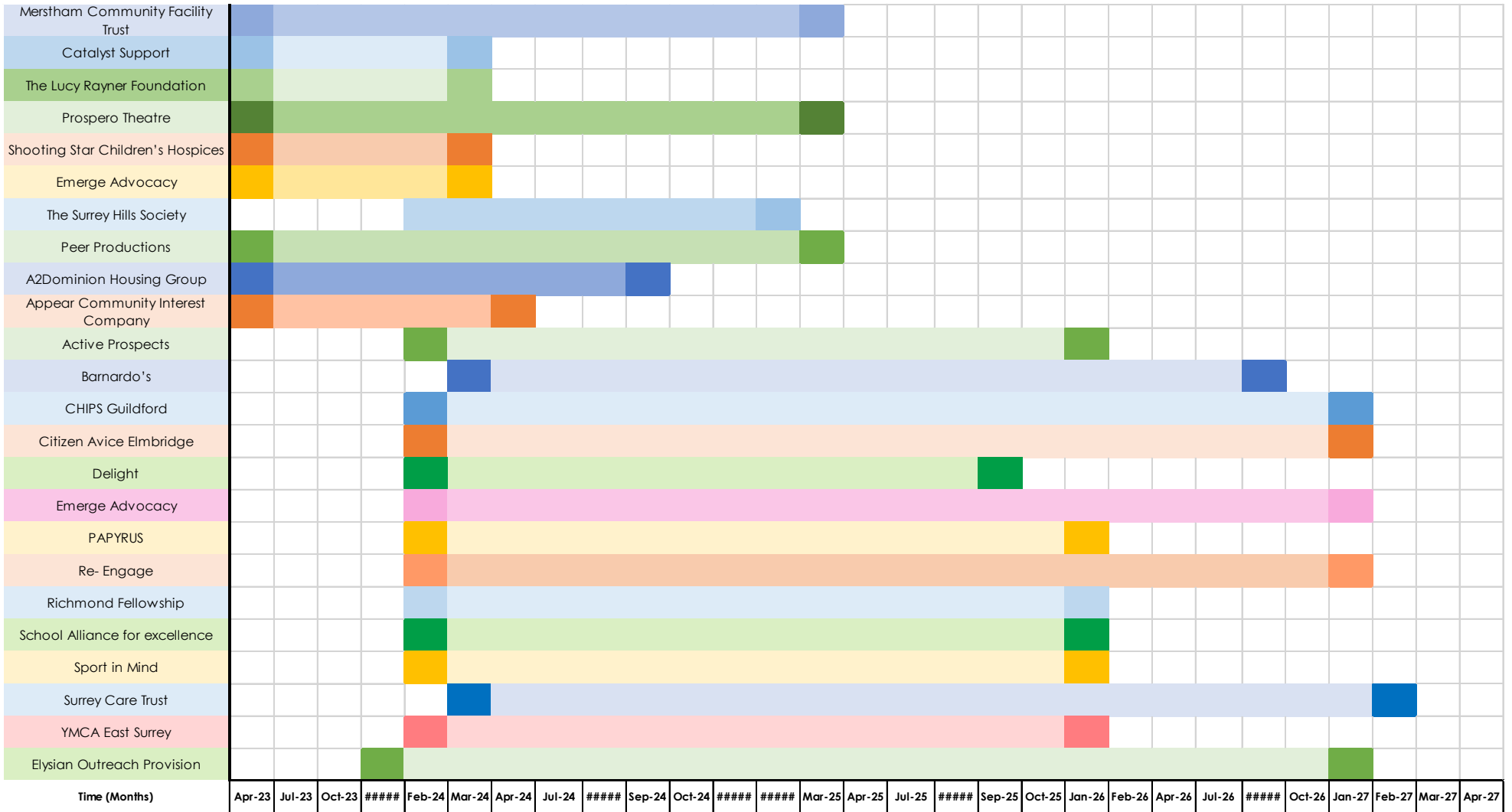


Figure 3 1

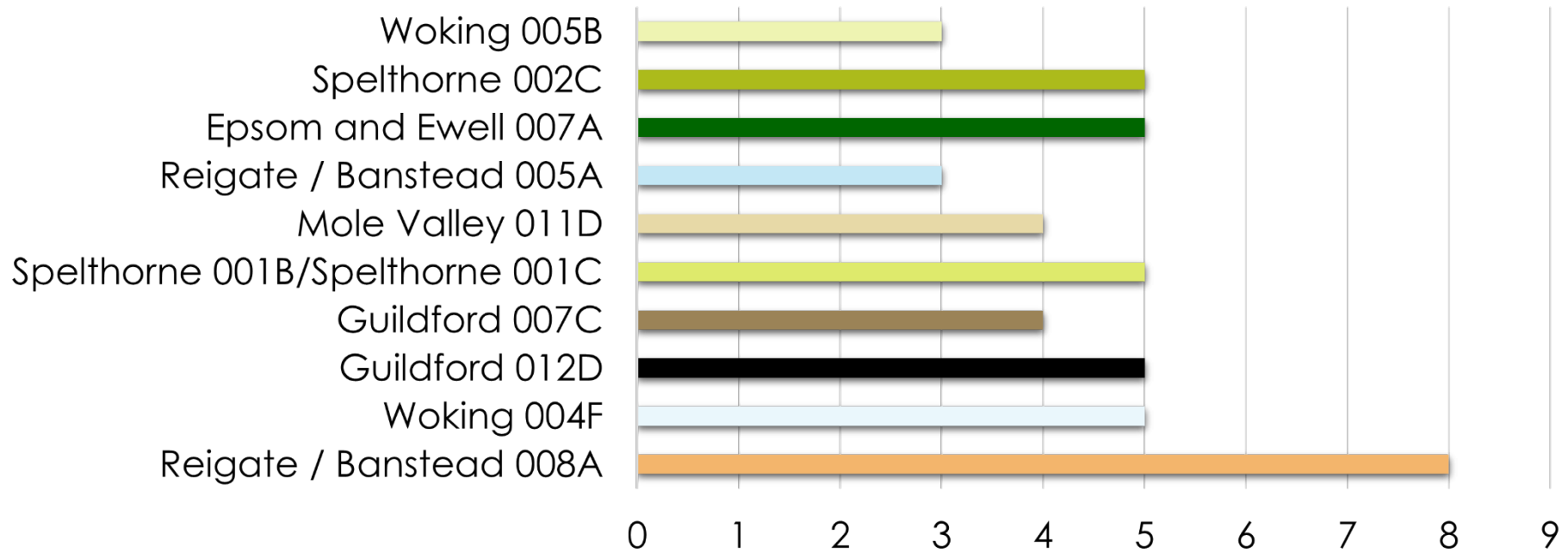


Figure 4 1



Figure 5 1

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Agenda item: 9
Paper no: 6

Title of Report:	Dynamic Purchasing System (DPS) For Care And Support With Community Accommodation (Working Age Adults) – Notification Of Contract Award	
Status:	TO NOTE	
Committee:	Surrey-wide Commissioning Committees in Common	Date: 20/03/2024
Venue:	Virtual meeting/ Woodhatch Place for SCC Committee	
Presented By:	Jonathan Lillistone	
Author(s)/ Lead Officer(s):	Anna Waterman Head of Disabilities Commissioning, SCC Laura Saunders, Head of Integrated Commissioning, SyH Sarah Ford, Senior Commissioning Manager Disabilities, SCC	

Executive Summary:

In September 2023 the Surrey-wide Committees in Common endorsed the introduction and procurement of a new Dynamic Purchasing System procurement route for Care and Support with Community Accommodation (DPS). The structure that the DPS provides will facilitate more robust contract management, quality assurance and cost effectiveness. The DPS agreement will run for a period of 5 years with two 1-year extension periods.

A Dynamic Purchasing System (DPS) is a contractual arrangement compliant with the Public Contract Regulations 2015. It is a fully electronic system used to award compliant contracts; it is not a commitment to spend money. Providers confirm at the time of application that they will comply with the terms and conditions of the DPS. This arrangement allows any provider who meets the minimum criteria to apply to join the DPS at any point during the lifetime of the contract.

Applications to join the DPS will be evaluated at least once each quarter, aiding choice and growing the market. This part 1 report sets out the outcome of the first round of the procurement process.

Governance:

Conflict of Interest:	None identified	✓
Previous Reporting: (relevant committees/ forums this paper has previously been presented to)	Accommodation with Care and Support Programme Board SCC ASC Senior Leadership Team Surrey Heartlands Commissioning, Contracting and Commercial Committee, 14 March 2024 Commissioning Collaborative, 1 March 2024	

Freedom of Information: The Author considers:	Open – no restriction applies. Part 1 Suitable for Publication. (There is an accompanying Part 2 paper.)	✓
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Decision Applicable to:

Decision applicable to the following partners:	NHS Frimley ICB	✓
	NHS Surrey Heartlands ICB	✓
	Surrey County Council	✓

Recommendation(s):

The Surrey-wide Commissioning Committees in Common are asked to:

1. Note the outcome of the procurement and award of contract.
2. Note the contract award to all successful providers will go-live from April 2024.

Reason for recommendation(s):

Surrey as a county needs more independent living accommodation if people are to remain within and be a part of their local community, retaining connections with their family and friends. The introduction of the joint Care and Support with Community Accommodation Dynamic Purchasing System (Community Accommodation DPS) will ensure a consistent procurement approach to supported independent living and ensure we deliver our Accommodation with Care and Support Strategy and our Community Vision for Surrey in 2030.

To this end, in late September 2023, on behalf of integrated commissioning, SCC commenced the tender for the Community Accommodation DPS. After a tender period of 40 days, the tender closed on 7th November 2023. All providers that submitted applications were informed of the outcome on 2nd February 2024.

Next Steps

- i. All applications that were unsuccessful on price alone will be able to submit just their revised pricing workbook in April when the DPS reopens for evaluation in May and, if successful, will see their inflationary uplift from April 2024. This group is being referred to as ‘tranche 1b’ and there will be an equivalent tranche for each round during the DPS. The purpose is to maximise the number of Providers who are part of the DPS, improving choice for individuals who draw on support and care and the size of the market, which in turn aids competition and thereby cost effectiveness.
- ii. All applications that were unsuccessful due to their responses to quality questions can submit revised applications when it reopens in April 2024.
- iii. Applications to join to DPS will be evaluated at least once each quarter (as per the Invitation to Tender), aiding choice and growing the market. Applications submitted in round two (April-June 2024) will be evaluated and moderated in June/July. Successful applications will receive the inflation linked increase backdated to the end of June 2024.

1. Tender process

- 1.1 The DPS was opened for provider submissions on 28th September 2023 and closed on 7th November 2023, allowing a total of 40 days.
- 1.2 For some bids, clarification was sought from the provider, for example an embedded link to provider policies/processes would not open, or the submission was incomplete, to ensure that all bids were given due consideration.
- 1.3 Evaluation of bids was undertaken during November and December, Moderation during December and January.
- 1.4 In order to maximise the number of Providers who are part of the DPS, improving choice for individuals who draw on support and care and the size of the market, which in turn aids competition and thereby cost effectiveness, all bids that were unsuccessful on price alone will be able to resubmit the pricing workbook in April for evaluation in May. There will be an equivalent facility for each round during the DPS.

2. Outcome of the procurement and award of contract:

- 2.1 349 compliant applications were received, the breakdown for each of the 8 lots is as follows:

- Lot 1, Level one LDA Supported Independent Living: 77
- Lot 2, Level two LDA Supported Independent Living: 70
- Lot 3, Level one PDSI Supported Independent Living: 41
- Lot 4, Level two PDSI Supported Independent Living: 39
- Lot 5, Level one Mental Health: A Place to Call Home: 50
- Lot 6, Level two Mental Health: A Place to Call Home: 41
- Lot 7, Level one Mental Health: Support to Recover: 35
- Lot 8, Level two Mental Health: Support to Recover: 27

This equated to 1,000 financial templates (the majority of providers have more than one setting; there might be a mix of lots at settings).

- 2.2 Successful Bids: Evaluation and moderation of bids (including general questions, quality questions and price) has resulted in the following successful number of bids for each Lot through tranche 1a:

Lot	No. of providers	No. of settings	Capacity
LD & A Lot 1:	17	133	399
LD & A Lot 2:	10	54	217
PDSI Lot 3:	4	5	22
PDSI Lot 4:	2	4	8
MH Lot 5:	5	22	93
MH Lot 6:	8	21	86
MH Lot 7:	5	17	79
MH Lot 8:	8	21	81

All successful providers, including those who are successful through tranche 1b, will receive inflationary uplift from April 2024.

2.3 Unsuccessful Bids: The number of unsuccessful bids in relation to each Lot is as follows:

- LD & A Lot 1: 60
- LD & A Lot 2: 60
- PDSI Lot 3: 37
- PDSI Lot 4: 37
- MH Lot 5: 45
- MH Lot 6: 33
- MH Lot 7: 30
- MH Lot 8: 19

2.4 All providers were informed of the outcome of their bids on 2 February 2024.

2.5 Membership of the DPS is a pre-requisite for receiving referrals for new business (unless no appropriate DPS provider can be procured) and a pre-requisite for the application of any inflationary increase in April. Providers that join the DPS in future rounds will be eligible following their application for any inflationary uplift. The DPS therefore offers financial controls and acts as a budget management tool.

3. Consultation

3.1 This report builds on that brought to Committees in Common at their meeting in September, which detailed the user engagement structures which informed the development of the specifications used for the DPS (please see Appendix 1).

3.2 There is a project group comprising Commissioners from SCC and Surrey Heartlands, Procurement Officers, Finance Officers and Brokerage Officers which meets on a weekly basis and there are discussions on a monthly basis with operational staff.

3.3 The ongoing oversight of the DPS rests with the with Accommodation Care and Support Programme Board.

4. Risk Management and Implications:

4.1 Financial risks

Currently the vast majority of LDA packages, regardless of funding source, are secured through spot contracts which do not facilitate cost effective budget management or quality assurance.

Without a Commissioning framework in place to establish a structured approach to rates, Commissioners receive many ad hoc requests for rates increases, each of which can have unbudgeted cost implications and divert potentially significant resource from more strategic work.

Risk Mitigation: The structure that the DPS provides will facilitate more robust contract management, affording quality assurance and cost effectiveness.

4.2 Strategic risk:

Some Providers submitted applications that proved unsuccessful, including a small number that are on the current Mental Health DPS (which ends at the end of March 2024).

Risk Mitigation:

- The relationship managers of providers with unsuccessful applications in the first round of the DPS are encouraging resubmission in the second round.
- Any concerns regarding quality are being discussed with individual providers.
- Existing business will remain with providers despite unsuccessful applications to ensure continuity of care.
- Applications to join to DPS will be evaluated at least once each quarter, to maximise the number of Providers that are part of it. This will serve to improve choice for individuals who draw on support and to grow the market, which in turn aids competition and thereby cost effectiveness.

5. Financial and 'Value for Money' Implications

- 5.1 SCC currently spends approx. £100m on Supported Independent Living services that relate to lots 1-8 that are proposed to go live at the start of the new DPS for 1,700 individuals. In many cases Supported Independent Living offers better value for money than other forms of care e.g. Residential Placements. The DPS does not commit any expenditure but sets out a contractual framework for the provision of Supported Independent Living.
- 5.2 Currently SCC receives c. £9m of funding from Surrey's ICBs for Supported Independent Living packages that are commissioned by SCC.
- 5.3 The new Community Accommodation DPS will help to facilitate increased commissioning of services to support people in the community at lower cost than alternative services and enable improved financial management and consistency across the market in the context of SCC's ever more finite resources.
- 5.4 Settings that have been successful in the first tranche and will move onto the DPS from April 2024 equate to c. £17m of the current Supported Independent Living services that SCC purchases, so roughly 17% of the total £100m SCC currently spends on Supported Independent Living services. To achieve the full financial benefits it will be important that the market share on the DPS continues to grow through work planned to enable more providers and settings to join the DPS in the future. The conclusion of tranche 1b outlined above for providers who only failed their initial application due to price and are being given the opportunity to resubmit prices to be evaluated in April, is expected to increase the market share on the DPS.
- 5.5 As set out earlier in the report, settings that have successfully joined the DPS in the first tranche will receive the agreed inflationary uplifts for 2024/25 on their existing care packages from April 2024. Settings that are accepted onto the DPS in further tranches during the financial year will receive the agreed inflationary uplifts for 2024/25 on their existing care packages from the applicable date for each tranche.

- 5.6 The prices agreed for settings accepted onto the DPS will initially apply to all new care packages sourced at those settings from the date settings join the DPS, and existing care packages as they are reviewed.
- 5.7 During 2024/25, and as the DPS develops beyond, there will be a need to closely monitor the financial implications as more providers join the DPS and existing care packages are converted onto the new DPS prices, and also for achievement of the wider financial benefits expected to be secured through the DPS. The Finance service will work closely with colleagues in Adult Social Care to ensure this is undertaken effectively so that the financial implications are appropriately reflected in budget monitoring forecasts and Medium Term Financial Strategy budget planning.

6 Section 151 Officer Commentary

- 6.1 Significant progress has been made in recent years to improve the Council's financial resilience and the financial management capabilities across the organisation. Whilst this has built a stronger financial base from which to deliver our services, the increased cost of living, global financial uncertainty, high inflation and government policy changes mean we continue to face challenges to our financial position. This requires an increased focus on financial management to protect service delivery, a continuation of the need to be forward looking in the medium term, as well as the delivery of the efficiencies to achieve a balanced budget position each year.
- 6.2 In addition to these immediate challenges, the medium-term financial outlook beyond 2023/24 remains uncertain. With no clarity on central government funding in the medium term, our working assumption is that financial resources will continue to be constrained, as they have been for the majority of the past decade. This places an onus on the Council to continue to consider issues of financial sustainability as a priority, in order to ensure the stable provision of services in the medium term.
- 6.3 In this context the Section 151 Officer recognises the importance of successfully implementing new DPS for Community Accommodation for Working Age Adults to improve market management, quality assurance and cost effectiveness, with the first tranche of providers joining from April 2024.
- 6.4 SCC's 2024-29 Medium Term Financial Strategy's includes assumptions about the financial implications to SCC of the new DPS, both in terms of changes to prices at the start of the DPS and future benefits through more effective contract management and standardised terms and conditions. It is essential that there is effective monitoring of the DPS to assess the actual financial implications against budget assumptions, with action taken wherever possible to manage within the budget envelope. Outcomes will be built into the next iteration of SCC's MTFS. The Finance Service will work closely with colleagues in Adult Social Care to ensure this happens effectively.
- 6.5 SCC will also continue to liaise with its ICB partners to outline the financial implications for any care packages that ICBs jointly fund that are to be commissioned by SCC under the DPS, so ICBs can take this into account in their own financial planning.

7 Legal Implications – Monitoring Officer

- 7.1 The Council have procured the services in accordance with The Public Contracts Regulations 2015, as amended, and the Council's Procurement and Contract Standing Orders.
- 7.2 Contracts will be entered into with the various providers and Legal Services will make arrangements to have them sealed by the Council.

8 Equalities and Diversity

- 8.1 An EQIA was undertaken prior to the tender, which suggested it could make a significant contribution to the ability of the system to ensure that provision of community accommodation is allocated equitably, through the increased cost effectiveness and market management it facilitates.
- 8.2 Gaps in data were recorded, for example relating to sexual orientation, and these are picked up in the focus in the specifications on providers' ability to demonstrate personalisation.
- 8.3 The current EQIA is available on request. It will be updated after the first year of the DPS's establishment to identify the progress made and potential action that should be taken to optimise the benefits the DPS brings.

9 Other Implications:

The potential implications for the following priorities and policy areas have been considered. Where the impact is potentially significant a summary of the issues is set out in detail below.

9.1 Corporate Parenting/ Looked After Children Implications

One of the DPS 'ghost' lots specifically seeks to grow this portion of the market. There is a joint project group with SCC's Children with Disabilities Team concerned with addressing the challenges for this cohort, including the availability of appropriate Community Accommodation. This project group will inform the development of the ghost lot.

Improvement to HRS services will have a positive impact for residents who have left care, and previously been a Looked After Child. User engagement has identified that this cohort of people do make use of the HRS services currently, and the aim of these services is to improve the experience for this cohort of people.

9.2 Safeguarding Responsibilities for Vulnerable Children and Adults Implications

The DPS is expected to improve the accommodation offer for vulnerable people. This can be expected to have a positive impact, ensuring that vulnerable adults can live within safe, secure environments with appropriate support services designed around their needs and aspirations. The effective management of Safeguarding and the requirements for reporting incidents is specified in the contract with care providers.

9.3 Environmental Sustainability Implications

Care and Support with Community Accommodation services maximise the value of accommodation being near community facilities including public transport.

Providers approved for the DPS may encourage providers to invest in their own properties due to long term stability of the contract period. This may include changes in the infrastructure of their property, improving insulation or decorative amendments.

9.4 Public Health Implications

Care and Support with Community Accommodation services can positively impact on public health outcomes including:

- Increased wellbeing and reduced isolation and/or loneliness through social inclusion, active participation in community life and engagement in learning opportunities / with support offers to employment.
- Improved health outcomes resulting from improved contact with community health services.
- Improved wellbeing resulting increased independent living skills, e.g., financial management, exercising choice and control.

Consultation:

Appendix 1: Groups that have informed the design of the DPS

LDA Leadership Team

Karina Ajayi, Programme Director for Learning Disabilities, Autism & Children's Complex Health Needs Surrey Heartlands

Philippa Asiriloglu, Director of Services for People with Learning Disabilities, Surrey and Borders Partnership NHS Foundation Trust

Jenny Brickell, Assistant Director Children With Disabilities, Surrey County Council

Laura Saunders, Head of Integrated Commissioning SyH

Fadzai Tande, Acting Director of Disabilities, ASC, SCC

Anna Waterman, Head of Commissioning for Disabilities, ASC SCC

Liz Williams, System Convenor

Mental Health Management Board

Chaired by Liz Uliasz, Chief Operating Officer, ASC SCC

Care and Support with Community Accommodation DPS Steering Group

Fiona Atkinson, Commissioner, ASC SCC

Ian Clark, Strategic Procurement Manager, ASC SCC

Sai sarinka Jirjadhan-Dabydeen, Commissioner, SyH

Sarah Ford, Senior Commissioner, ASC SCC

Nicky Goddard, Finance Business Partner ASC SCC

Marisa Rosato, Senior Commissioning Manager - Specialist Mental Health, SyH

Laura Saunders, Head of Integrated Commissioning SyH

Jeremy Taylor, Head of Commissioning and Contracts Support Service, ASC SCC

Anna Waterman, Head of Commissioning for Disabilities, ASC SCC

Andy Wickes, Senior Finance Business Partner ASC SCC

Dave Wimblett, Senior Commissioner, ASC SCC

LDA Joint Legal and Procurement Steering Group:

Danielle Bass, ASC Procurement Partner, SCC

Niki Baier, Director of Acute and Collaborative Contracts, SyH

Chris Esson, Senior Commissioner, ASC SCC

Julia Gannon, Head of Collaborative Contracts, SyH

Anna Gavrilov, Associate Director of Finance, SyH

Greta O'Shea, Senior Solicitor Contracts, Procurement and Projects, SCC

Laura Saunders, as above

Fadzai Tande, as above

Tom Moore, Senior Commissioner, ASC SCC

Anna Waterman, as above

Andy Wickes, Senior Finance Business Partner ASC SCC

SCC ASC Accommodation with Care and Support Board:

Chaired by Jonathan Lillistone, Director of Integrated Commissioning.

SCC ASC MH Accommodation with Care and Support Project Group

Chaired by Simon Montgomery, Programme Manager, Accommodation with Care and Support

Market Engagement events:

Thirteen July 2021 – Sep 23. Attendees are Commissioning Officers from SCC ASC and SyH; Procurement Officers from SCC ASC; Providers; Health and Social Care Practitioners.

LDA Partnership Board:

Comprises Commissioning Officers from SCC ASC and SH; Providers; Health and Social Care Practitioners; Individuals who access support and care; Individuals' Families.

Autism Partnership Board:

Comprises Commissioning Officers from SCC ASC and SH; Providers; Health and Social Care Practitioners; Individuals who access support and care; Individuals' Families.

Valuing People Groups:

Four groups, one for each of the Surrey 'Quadrants': Comprise Commissioning Officers from SCC ASC and SH; Providers; Health and Social Care Practitioners; Individuals who access support and care; Individuals' Families.

ASC MH Engagement process

During February to May 2023 the ASC MH Commissioning Team completed an engagement process with individuals living in current Supported Independent Living, ASC Operational Teams and providers (including SABP). This included:

- Four site visits to SIL projects involving 21 service users
- Meetings with ASC MH operational teams, including Forensic and Substance Misuse, Hospital Discharge Team and Joint Brokerage Team; meetings with SABP clinical representatives.

- Providers were involved via a ASC MH provider forum held in 14/3/23 involving ASC, Health, Housing, MH supported living and housing related support providers.
- A meeting in April with Surrey and Borders Partnership NHS Foundation Trust.

Sources/background papers:

Adult Social Care Accommodation with Care and Support Strategy for Extra Care Housing for Older People and Independent Living Schemes for adults with a learning disability and/or autism

<https://mycouncil.surreycc.gov.uk/ieListDocuments.aspx?CIId=120&MIId=6328&Ver=4>

Community Vision for Surrey in 2030 <https://www.surreycc.gov.uk/council-and-democracy/finance-and-performance/our-performance/our-organisation-strategy/community-vision-for-surrey-in-2030>
