



<b>Report to:</b>	Strategy & Resources Committee	<b>Date:</b>	June 29, 2015
<b>Report title:</b>	Information & Advice Offer – A vision and future requirements		
<b>Report from:</b>	Niall Bolger – Chief Executive		
<b>Ward/Areas affected:</b>	Borough wide		
<b>Chair of Committee/Lead Member:</b>	Chair - Cllr. Ruth Dombey, Leader of the Council Lead Member – Cllr. Simon Wales, Deputy Lead of the Council		
<b>Author(s)/Contact Number(s):</b>	Tom Alexander – Head of Strategic Business, 020 8770 4522		
<b>Corporate Plan Priorities:</b>	<ul style="list-style-type: none"> <li>• An Open Council</li> <li>• A Fair Council</li> <li>• A Smart Council</li> </ul>		
<b>Open/Exempt:</b>	Open		
<b>Signed:</b>		<b>Date:</b>	08/06/15

## 1. Summary

- 1.1 Our current information and advice (I&A) offer covers a large range of services that are both internally delivered and externally provided. There are more than 20 contracts in place with a total expenditure of roughly £640k but not all have I&A as a primary function. Some of these arrangements are long standing and have not been reviewed through the lens of a commissioning council and others have been recommissioned but not with sufficient consideration given to our longer term financial challenges. It is our intention to bring together I&A services wherever possible and recommission an offer that meets our obligations and the needs of our residents but drives out savings through better targeting, reduced duplication and more innovative practice.
- 1.2 This paper proposes a vision for an I&A offer based on a thorough needs analysis, market testing, best practice research and the development and adoption of a new I&A framework co-produced with the voluntary sector. It also sets out future requirements, an appraisal of options for delivery, proposed measures for success and a financial impact assessment based on the requirement to save money along with a timeline for recommissioning.

## 2. Recommendations

- 2.1 That the Committee agrees the services in scope (4.6) and the overall savings proposed.
- 2.2 That the Committee agrees the outcomes being sought (6.1) and notes the evidenced based approach we have taken to setting them.
- 2.3 That the Committee agrees to a restricted tender process with authority to complete this, including the final contract sign off, delegated to the Chief Executive.

## 3. Background

- 3.1 The coalition government that took office after the 2010 general election followed a policy aimed at reducing the public sector deficit, principally through reductions in public expenditure. As a



result, councils have had significant reductions in their funding from government grants. At the same time the Council has faced increasing demand for services due to demographic pressures and the consequences of other national government policies such as welfare reform and the Care Act. It is expected that the newly elected government will seek further reductions at the same if not greater levels.

- 3.2 The London Borough of Sutton is no different from other councils. In order to balance its budget the Council has needed to identify savings equivalent to 25% of its 2010 budget over a four year period. To address this, the Council identified £32m of savings through its Smarter Services Sutton (SSS) programme and the delivery of these changes will largely be complete by the end of the 2014/15 financial year.
- 3.3 Despite this, further funding and grant reductions are expected from national government over the medium term with a funding gap of £27.5m (subject to change) projected by 2018/19. To address this funding gap, the Council has initiated the Smarter Council programme to drive through the transformation of Council services. This programme is focused on four key themes: Opportunity Sutton, Prevention, Neighbourhood Working and Developing Our Own Organisation. The delivery of projects underneath these themes will fundamentally change the shape of the council and its services in Sutton over the next few years.
- 3.4 This report focuses on a vision, outcomes and key requirements of a revised I&A offer to be commissioned and in place by April 1st, 2016.
- 3.5 The Council adopted a Commissioning Framework in October 2011 which outlines 4 key stages for commissioners to follow:
  - Analyse
  - Plan
  - Do
  - Review
- 3.6 As noted, the analysis stage includes work undertaken to co-produce an I&A framework with the local voluntary sector. The intention of the framework was to help public and voluntary sector partners coalesce around a vision for I&A provision and goes beyond just the services the Council directly pays for. This has been agreed through our local Compact and adopted by many local organisations.
- 3.7 This spirit of collaboration has continued through the commissioning process with a working group that included representatives of our local voluntary sector and LBS officers who gave feedback on both our approach to market testing and our initial outcomes. They have also assisted in connecting commissioners with current users of services who have given invaluable and candid feedback about their experiences of our current provision. The customer journey mapping outlined below was particularly enlightening.



3.8 Our commitment, therefore, is not simply to consult with stakeholders but test ideas and validate our findings so as to deliver the best possible outcomes for Sutton residents. At this stage the following benefits are expected as a result:

- A more co-ordinated I&A offer both in terms of initial access and customer journey.
- A quicker and more proportionate process from initial contact to resolution.
- Increasingly positive outcomes for individuals (that are demonstrable to all stakeholders).
- A working principle to help people help themselves wherever possible.
- Reduced duplication of information.
- Reduced expenditure on I&A provision.
- A more accessible service with better adapted I&A.

#### 4. Current Provision

4.1 The current offer has been commissioned at various times by various parts of the Council to meet a number of different agendas. This has led to a comprehensive and, customer feedback suggests, valued offer. There are also signs of positive joint working between different I&A providers (a recent Big Lottery funded project, Sutton Advice Link and joint work between CAB & SCILL to integrate a bookings system). Many of the arrangements where there is a contract in place have been intentionally protected from financial cuts to date and there is an anecdotal view across the market that these are frontline services that should not be cut given the importance of their preventative role.

4.2 However there is, undoubtedly, duplication across I&A provision in Sutton in the form of documentation, websites and face to face support. Nor is all provision fully aligned leading to conflicting messages (whether perceived or actual) being given to residents. There has been, historically, differing standards of provision, hence the recent work that has gone into the new I&A framework. This situation has evolved for largely organic reasons as commissioners have put services in place at a moment in time to meet a specific need whereas the future will require a more strategic and co-ordinated vision.

4.3 We have undertaken some detailed customer journey mapping with people that have used some of our existing commissioned services. We approached a number of providers and asked for a sample and, during the course of 9 in-depth interviews along with some more informal discussions with a wider group, we have found the following key issues:

- **Timely provision** of available information, advice and even support, before people reach crisis point or before an issue becomes overwhelming. This is clearly different in each case but feedback suggests that the current offer contains a wealth of information that is not necessarily adapted to be

meaningful when someone is in a pressured situation. This is as much the case for a vulnerable adult suddenly in crisis as it is for a private individual seeking planning information.

- **Personal approach** where providers of information and advice are sensitive to the circumstances of the individual seeking help. Again we found that, across the board, a more personalised approach leads to better outcomes. That does not mean people require face to face contact but that someone deals with their issue from start to finish, even where they may 'hand off' for specific parts of the customer journey. This increasingly felt like a 'broker-lite' model as it does not suggest people want someone to take forward their issue on their behalf but to be a source of consistency for the period until the issue is resolved.
- **The right communication** – appropriate to need, using plain English and avoiding brown paper envelopes. From our analysis, there appears to be a number of related issues about how I&A is positioned and dispensed. People inadvertently placed significant trust in people they perceived to be credible. This could be based on professional or life experience, local knowledge or which organisation they represented. The salient point is that, often without knowing it, people perceived the I&A they received to be more effective based on their assessment of the individual providing it – even if it was the same material they had received from another source.

This was similar when people talked about accessibility of information. The focus tended to be on whether it was written or spoken in a way the receiver understood rather than being about where it was made available (possibly a characteristic of a small Borough). Therefore using plain English standards (or similar) may not actually improve customer experience as how someone receives the I&A they are being given is dependent on so many personal factors in that particular instance.

Finally, an oft-repeated and striking example was the use of brown envelopes that, in a number of cases, raise unnecessary anxieties as, particularly vulnerable adults, report that they fear the contents. In a handful of cases, this led to people ignoring posted information that would have helped them and, in at least two cases, led to serious deterioration of circumstances (with an associated increase in costs to the public purse). This is mentioned as there seems to be a clear case for considering what can be better achieved through 'nudge' techniques as part of the new I&A offer.

- 4.4 We have deliberately taken a 'sweat the details' approach to our recommissioning as we have found that there are small things which could make a considerable difference to local people. On that basis, it will be important to ensure that, whatever the eventual potential combination of providers, there is some element of standardisation of approach to ensure unnecessary barriers are removed. This will, of course, be supplemented by the new I&A framework.
- 4.5 There is also a tension between the provider and customer perspectives. As discovered when undertaking the customer journey mapping and through other direct feedback, customers have experienced multiple and confusing hand-offs. Some of this is the inevitable consequence of



trying to offer such an all-encompassing service. However, when analysing feedback to the I&A framework, it became clear that service providers believe what currently works well are:

- Effective and timely referrals
- The knowledge and awareness amongst each provider of what different organisations do.

This implies that providers believe the way they manage referrals between each other and signpost other services is effective – it would be fair to say this has improved and, in specific instances, is demonstrably excellent as joint working examples referred to earlier indicate – however this perception is not always evidenced by customer feedback.

- 4.6 The current offer is commissioned across all Council directorates from a range of internal and external providers. This does not include the other services that also provide some level of information either because we pay indirectly as part of another service or because that organisation has received funding from another source. This means a comprehensive offer but not a particularly co-ordinated or cost effective one. The externally commissioned services are summarised in the table below:

Directorate	Annual Value	Notes
<i>Chief Executives</i>		
Citizens Advice Bureau	£291,000	
Healthwatch	£30,000	(ringfenced)
<i>Resources</i>		
Translation Service	£40,000	
<i>People</i>		
Various contracts with voluntary sector	£300,000	estimate
<b>TOTAL (excl. Healthwatch)</b>	<b>£631,000</b>	

- 4.7 The current savings expectations for the relevant Council directorates are:

- CED - £75k to £100k p.a.
- People Directorate - £75 to £100k p.a. (already included in savings target)
- EH&R – No savings target as the I&A provided is considered part of the individual services. These services will, however, need to be linked to the future provision and may act as a conduit/outlet for more I&A than they do currently. Early discussions suggest that the new offer could operate from some of our existing buildings and/or those services could also function explicitly as a first contact point



for customers becoming part of the potential customer journey set out in the specification.

- Resources – N/A

4.8 There has been, however, limited strategic vision for I&A provision agreed across the Council and with voluntary sector partners. This is beginning to emerge from the I&A framework but any future offer will need to be more explicit about who it is designed to serve, why and what the expected outcomes are for that cohort. Currently the offer is driven by a range of (sometimes competing) agendas rather than an overarching one agreed between commissioners, residents and providers. To achieve the savings required, a radical review of the offer will be necessary.

## **5. Identified Issues & Progress to date**

5.1 A key issue for any new offer is an expected increase in demand driven by a number of socioeconomic factors and legislative changes. “Between 2001 and 2011 Sutton experienced a 5.77% population increase from 179,768 to 190,146 residents. Looking ahead to 2021 it is projected that the population will continue to increase, with projections varying between 197,394 and 221,581 residents - equating to between a 3% to 16% population increase. Albeit a large variation, Sutton can expect an increase in the number of residents in the borough, and as a result a possible rise in the demand for information and advice services” (I&A Needs Analysis, 2014).

5.2 We also suspect from the needs assessment that there is considerable unmet need in this area. This can be viewed in two ways; either that this will simply increase demand on I&A services or that more people receiving more I&A support will decrease demand on statutory services. Furthermore, there is evidence that amongst those groups that may need more specific I&A (the elderly, disabled people, BME communities etc.), demand is also increasing as people live longer, survive with more complex conditions or are at increasing risk of social isolation.

5.3 The medium term landscape for I&A provision in Sutton will be shaped by some obvious issues other than the need to save money:

- The drive towards more prevention and early intervention to reduce costs ‘downstream’.
- The wider retraction of the public and voluntary sector from service delivery.
- The Care Act and The Children & Families Act and the demand increase that is expected to result from their implementation.
- The growth in the number of people that are working poor or asset rich/cash poor – they are unlikely to be eligible for social care services but may find themselves in highly vulnerable positions.
- A growing population with more complex needs and wider welfare reform.



The needs assessment also highlighted 3 key requirements from local people of a new I&A offer:

- I&A to be provided within 24 hours of first contact
- The I&A needs to be locally appropriate
- Organisations should be able to refer to other information / advice available

5.4 Nationally, we are seeing different solutions to these challenges. As part of the analysis phase for this project, we sent a request out through the Commissioning Academy and received information from local authorities across the country about their configurations and expectations. To date there appear to be 3 main variations:

Devolved Commissioning	Centralised – multiple contracts	Centralised – single contract
<ul style="list-style-type: none"> <li>• Our current position.</li> <li>• Can be a very flexible model if managed well.</li> <li>• Encourages flexible funding arrangements.</li> <li>• Limitations already outlined but also confusing for the market.</li> </ul>	<ul style="list-style-type: none"> <li>• Allows for thematic commissioning – one directorate is responsible for all I&amp;A provision.</li> <li>• Little reduction in transaction costs to either party but enables flexible funding arrangements.</li> </ul>	<ul style="list-style-type: none"> <li>• Encourages consortia bids.</li> <li>• Reduces transactions costs for both parties.</li> <li>• Requires a strong consortium.</li> <li>• Likely to use a prime/sub contractor relationship and comes with the risks that entails.</li> </ul>

Within these models, there are many different funding arrangements including traditional contracts, service level agreements and grants. However it is worth noting that there is yet to be an example of anywhere using a framework or Dynamic Purchasing System approach and we will explore the potential to do so further as part of our market testing.

5.5 The information we received also demonstrates a shift to slightly longer contracts. The use of annual grant funding is limited to 'specialist' services and is not used at all in most cases. The majority of commissioners reported they are opting for 3 year contracts with an option to extend for up to 2 further years, however an increasing number are also looking at 5 year contracts with extensions in order to support the market to respond to changing requirements – with annual contract values decreasing over time in some cases. Each commissioner referred to using an outcomes based or more thematic approach to try and balance the need for both generalist and specialist I&A but there was no mention of using a Payments by Results model (or similar) in any response received. There was, however, a clear trend towards early market consultation and achieving a solution co-produced with local people and providers – overwhelmingly from the voluntary sector.

5.6 Benchmarking our expenditure against other authorities on services of this nature has been difficult as the offer is so variable in different places. From what we can tell, our current spend is comparable with other London Boroughs but slightly higher per head of population than larger



unitary authorities. Given the lack of comparable data available, this project will focus on achieving the savings targets outlined but will test the possible impact so as not to destabilise the market unnecessarily.

- 5.7 In line with the Council’s commissioning framework, we have been working with colleagues from across the Council, our leading advice provider (Sutton CAB) and our leading information provider (SCILL) to commission a revised I&A offer. This approach enables the Council to ensure that relevant stakeholders are included in the development of the specification and that their appropriate expertise influences its development. The I&A offer available to Sutton’s citizens is crucial to their health and well-being and so the project has contained a series of events to engage with people that use services, those that may do and other interested stakeholders.
- 5.8 Work to date has concentrated on considering national best practice and speaking to other Boroughs to understand their current offer, discussing the future requirements with key stakeholders, working with a project group to ensure the process for specifying a new service covers all customer need, analysing current contractual arrangements and expenditure and understanding customer journeys.

**6. Issues**

- 6.1 During the analysis stage, we undertook a number of activities to test our initial. These included market testing, user focus groups and further data collection to inform the draft specification. Based on our current findings and after some more detailed conversations with colleagues at Shropshire Council, who have successfully been through a process that is similar to ours, the following is suggested to help frame the contract:

Outcomes<sup>1</sup>

Outcome	What it means...
<i>Your money</i>	<i>Feel financially secure or feel able to ask for advice to help me become so.</i>
Example Outcome Measures: <ul style="list-style-type: none"> <li>• Reduced individual and household debt/debt rescheduled and/or written off</li> <li>• Income maximised/benefits maximisation</li> <li>• Increased skills and budgeting awareness</li> <li>• People have access to independent financial advice to help them to make well-informed choices about how they pay for their care and support.</li> <li>• People have confidence in the services they receive.</li> <li>• People report reduced anxiety regarding financial issues.</li> <li>• More people feel they have received fair and just support.</li> <li>• People report an improved understanding of their current and future financial</li> </ul>	

<sup>1</sup> In the table below, “people” refers to those receiving support and those that may care for them.



<p>situation and their current and future financial options.</p> <ul style="list-style-type: none"> <li>• People have access to advice on their employment rights and responsibilities and are supported to enforce those rights</li> </ul>	
<p>Linked Developmental Assets:</p> <ul style="list-style-type: none"> <li>• I40 – Individuals are optimistic about their personal future.</li> <li>• C3 - Local people and neighbourhoods develop employability and economic resilience.</li> </ul>	
Outcome	
What it means...	
<i>Your health</i>	<i>Live a long, enjoyable and healthy life</i>
<p>Example Outcome Measures:</p> <ul style="list-style-type: none"> <li>• People know how to avoid or manage the factors which impact on their long-term health (in line with Sutton's Prevention agenda)</li> <li>• People know how to access high quality care and support services when and where they need it</li> <li>• People have access to high quality care and support services when and where they need it, not just when in crisis.</li> </ul>	
<p>Linked Developmental Assets:</p> <ul style="list-style-type: none"> <li>• C6 – Information and advice about how to achieve good mental and physical health.</li> <li>• C14 – Information is helpful, tailored and available from a range of sources and is accessible to people with a range of needs.</li> </ul>	
Outcome	
What it means...	
<i>Your life</i>	<i>Feel valued as an individual and to live my life, with my choices respected and with as few compromises as possible</i>
<p>Example Outcome Measures:</p> <ul style="list-style-type: none"> <li>• Service Users/carers are directed towards lower-cost forms of contact.</li> <li>• Vulnerable residents have control over their daily life</li> <li>• Carers report feeling better able to maintain their caring role and health and wellbeing</li> <li>• People report a reduction in feeling isolated</li> <li>• Eligible people are supported to take a Direct Payment.</li> <li>• People have access to advice on their rights and responsibilities to enable them to make choices and live their lives with as few compromises as possible</li> </ul>	
<p>Linked Developmental Assets:</p> <ul style="list-style-type: none"> <li>• I32 – Individuals know how to plan ahead and make choices.</li> <li>• I37 – Individual feels he or she has control over “things that happen to me.”</li> </ul>	
Outcome	
What it means...	
<i>Your community</i>	<i>Live in an attractive, vibrant and safe environment, in a place that</i>



	<i>is right for me</i>
<p>Example Outcome Measures:</p> <ul style="list-style-type: none"> <li>• People from a wide range of backgrounds get on well and support each other</li> <li>• Number of people supported to engage in volunteering</li> <li>• Local communities (people) are able to help themselves</li> <li>• People feel able to shape and influence decisions that affect their lives.</li> <li>• People are aware of the range of accommodation in the Borough and how to access it (where relevant)</li> <li>• People have access to advice on their housing rights to help them obtain and maintain good quality housing for themselves and their families.</li> <li>• People feel safe where they live</li> <li>• People have access to advice to challenge discrimination</li> </ul>	
<p>Linked Developmental Assets:</p> <ul style="list-style-type: none"> <li>• I4 – Individual experiences a caring community.</li> <li>• C10 – Individual and protected characteristics are accepted, welcomed and understood.</li> <li>• C15 – People have ways of making and maintaining social connections. People have a diverse and large enough social network to meet their needs.</li> </ul>	

- 6.2 It should be noted that we expect the successful tenderer to demonstrate their commitment to social value against our Developmental Assets [model](#) and that this will form part of the procurement exercise.
- 6.3 In line with any outcome focused commissioning exercise, we will use the ITT process to test the markets understanding of delivery against outcomes and so the outcome measures are illustrative. We would finalise those measures and relevant indicators as part of our procurement.
- 6.4 The vision for I&A in Sutton is set out in the I&A framework:

*“To encourage and enable all Sutton residents to access information and advice, through the most appropriate channel at the right time in order to stay well and lead as full a life as is possible”.*

In order to commission an offer that delivers on this vision, the following priorities were also identified which have been used as design principles for this project:

- The development of a coherent and joined up approach to I&A services, with a focus on prevention and delivering better outcomes for residents – this is likely to mean a solution where the provider will both deliver service and signpost to others.
- To ensure I&A is targeted to those in most need, recognising the changing demographics, and does not generate additional need for which the provision and resources are not available.



- Improved pathways for residents (and where applicable, their carers) so they are able to access the required I&A in a timely manner and so commissioners and providers can identify where the customer journey has been positive (or otherwise).
  - Improved customer experience with residents able to access a trusted, well-perceived quality resource for I&A in the Borough. The provision of information and advice services will also need to take into account the role technology can play in the future development and commissioning of services.
  - To ensure the council prioritises and is compliant with the requirements of statutory duties, particularly for the Care Act and the development of the 'local offer' through the Children and Families Act.
  - I&A providers within Sutton need to work closely with health professionals, particularly GP surgeries, to ensure that information and advice is available at the point of diagnosis. This will require engagement with health service providers.
- 6.5 Although this new arrangement goes beyond simply responding to the Care Act, we have specified certain requirements that are non-negotiable within the Specification which we believe would underpin any quality I&A service.
- 6.6 As with any commissioning exercise, it is important to explore a range of delivery options to understand what the market is able to deliver and what some of the generic advantages and disadvantages are of each solution. The options considered were:
- In-sourcing leading to a creation of an in-house team employed by LBS.
  - Sharing a service with another Borough (or other Boroughs).
  - A formal procurement process.
  - Bundling this exercise in with the delivery partner proposition being developed by the People Directorate.
- 6.7 The notion of a 'do nothing' option was discounted as the current arrangement cannot be contained within the future funding allocation and is unlikely to deliver the vision set out above.
- 6.8 The strengths and weaknesses of an in-sourcing option was tested as part of the commissioning process but the cost of in-sourcing is thought to be prohibitive (primarily owing to overheads but also initial implementation costs) given current financial pressures, particularly when set against the perceived benefits of doing so and given that the majority of I&A delivery is currently outsourced to the local voluntary sector.
- 6.9 We tested the appetite amongst partners for a shared solution and this option will be kept under review and any contract will be drafted to allow a future partnership arrangement. There have been some initial conversations with a neighbouring borough but they led more to intelligence sharing than a commitment to share or jointly commission. Consideration has also be given to the best ways to build links with other public sector organisations to try and make the offer as comprehensive and seamless as possible for Sutton residents. Prospective tenderers will need to demonstrate their approach to this as part of their submission.



- 6.10 At this stage, we expect to follow a restricted procurement process as the expected contract value will exceed the EU public sector procurement threshold value of £173k over the life of the contract and there would therefore be a requirement to place an OJEU notice. This would allow providers interested in bidding to come forward and find out further information but would also allow the Council to take a proportionate approach to resourcing that procurement exercise.
- 6.11 We intend to publish an OJEU notice and the tender will be conducted through our Procurement Portal. Following successful completion of a Pre-Qualification Questionnaire, those interested parties would be invited to tender.
- 6.12 In line with the Review stage of the commissioning cycle, we are also discussing how key stakeholders can help review effectiveness of service delivery to ensure outcomes are being met as well as to give feedback on their experiences of contributing to the commissioning project.
- 6.13 From our analysis, the future requirements of an I&A offer can be divided into 3 categories (below) which reflect an organisation (and sector) where change is likely to be one of the few constants in the medium term.

Function	Maintain:	Enhance:	Transform:
First contact	<ul style="list-style-type: none"> <li>• 1 phone number 'brand'.</li> <li>• Joint working &amp; co-location.</li> <li>• Some face-to-face and telephone capability.</li> </ul>	<ul style="list-style-type: none"> <li>• Online presence of an integrated I&amp;A offer.</li> <li>• Ability to choose lead organisation.</li> </ul>	<ul style="list-style-type: none"> <li>• Integrated phone system.</li> <li>• Initial referral pathway with GP's and consultants.</li> <li>• Providing information to community leaders.</li> </ul>
Initial intervention	<ul style="list-style-type: none"> <li>• Ability to demonstrate services that address wider needs.</li> </ul>	<ul style="list-style-type: none"> <li>• Ability to signpost to other services/ Support.</li> <li>• Capacity to offer issue specific advice.</li> </ul>	<ul style="list-style-type: none"> <li>• Capability to support user navigation through the process.</li> </ul>
Ongoing support	<ul style="list-style-type: none"> <li>• Employment tribunal support.</li> <li>• Support for the most vulnerable that may require more time to resolve an issue (case work).</li> <li>• Outreach</li> </ul>	<ul style="list-style-type: none"> <li>• Capacity to offer ongoing technical advice to other services.</li> <li>• Peer-to-peer capacity.</li> <li>• Customer perception of holistic offer.</li> </ul>	<ul style="list-style-type: none"> <li>• Documentation is unified across organisations to ensure consistency and local relevance.</li> <li>• Dependency creation where it is found to exist.</li> </ul>



	approach.		
Tracking progress	<ul style="list-style-type: none"> <li>• Outcomes focused approach.</li> <li>• Resolution of actual issue.</li> </ul>	<ul style="list-style-type: none"> <li>• Integrated case management &amp; booking systems across commissioned organisations.</li> <li>• Clearer pathway of support where there are multiple issues with ability to follow up.</li> </ul>	<ul style="list-style-type: none"> <li>• Integrated case management &amp; booking systems across <u>all</u> organisations.</li> <li>• Cases closed and all relevant parties informed/satisfied.</li> </ul>

6.14 Given the fluid landscape in which we currently operate, the table above has been compiled in an attempt to give the market a clear steer for prioritisation over the lifetime of the contract without overly prescribing how this is done.

## 7. Timetable

7.1 As part of our consultation with the market we asked whether it would better to award the contract sooner than the go live date (April 2016) and incrementally build up the service or whether we attempt a 'big bang' approach with the successful provider(s) taking on full responsibility at go live. The overwhelming response was for the latter option and so an extended mobilisation period has been included as well as sufficient time to vary any contracts that may need to be extended or re-focused before the go live date.

## 8. Impacts and Implications

### Financial

8.1 There is a minimum expected savings target of £150k for this commissioning exercise. It is proposed that this is delivered by reducing expenditure from the Chief Executives Directorate from £291k p.a. to a maximum of £216k p.a. Similarly People's Directorate investment into these services will reduce from £300k to £225k. As the new offer is being commissioned jointly, we expect to reduce the risk to service delivery by having a more co-ordinated and collaborative arrangement.

8.2 In summary, this would mean (based on the services agreed as 'in scope' above), an overall reduction in our investment in I&A from £631k to £481k – a saving of 24%. This presents a small risk as analysis to date suggests a figure of £500k p.a. would be what the market could bear. There is also a risk for the services currently commissioned by People's Directorate colleagues as they potentially remove significant amounts of money from a range of local providers which those services would not necessarily receive even if a local provider/consortium tendered successfully.

8.3 There are possible property implications in that initial market testing suggests that the successful tenderer may want to deploy staff within Council buildings as part of their delivery



model. It is worth noting, however, that if the preventative element proves successful, it then may be possible to reduce the resource the Council invests into initial contact.

Legal

8.4 The legal implications for this exercise fall into two broad areas:

- Those associated with any commissioning process that leads to service delivery being contracted to another organisation.
- Those associated with ensuring our future I&A offer meets our obligations under the Care Act.

**9. Appendices and Background Documents**

<b>Appendix Letter</b>	<b>Title</b>
	None

<b>Background Documents</b>
Commissioning Timeline Integrated Impact Assessment Information & Advice Framework Information and Advice Full Needs Assessment Sutton’s Developmental Assets

<b>Audit Trail</b>		
Version	Final Signed	Date: 08/06/15
<b>Consultation with other officers</b>		
<b>Officer</b>	<b>Comments Sought</b>	<b>Comments checked by</b>
Finance	Yes	Phil Butlin/Peter May
Legal	Yes	John Cheetham
Procurement	Yes	Steve Hoy