

**Adults and Communities  
Directorate**

# **Third Sector Commissioning Prospectus**

**2012-2014**



adults and  
communities

## Third Sector Commissioning Prospectus

2012-2014

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## Foreword

Welcome to the third sector commissioning prospectus from the Adults and Communities Directorate. We are proud to confirm our commitment to continued investment in the sector and to working with you to deliver high quality services to the citizens of Birmingham.

Building on the good relationships and excellent work of the last three years, we feel confident we will continue to develop effective and innovative ways to maintain the wellbeing and health of our vulnerable citizens. This round of commissioning offers the opportunity for both existing and new organisations within the sector to work with the City Council to have a positive impact on the delivery of excellent services to our vibrant and diverse communities.

As a Council we face unprecedented financial challenges. We will continue to work with you to deliver cost effective, high performing services. We are strengthening the role of citizens in assessing the quality of support we deliver in partnership with yourselves and are seeking to appoint partners from the sector to develop this role going forwards.

Our focus for future third sector services is on keeping people well and independent in the community. This means encouraging everyone to have healthy, active and fulfilling lifestyles; supporting people when a care need first arises to stop the problem escalating; and helping those with greater needs to live safely, confidently and comfortably. Central to this is a strategic shift to prevention. We have worked with our public health colleagues and yourself as a sector to develop a range of prevention outcomes and measures and these form a corner stone to the outcomes and measures reflected within this prospectus.

We have learnt much from the last commissioning process and have used these lessons to inform this process with the intention of making it as user-friendly as possible. We welcome your continued feedback so we can use it to make further improvements in the future.



**PETER HAY**  
**Strategic Director**  
**Adults and Communities Directorate**

## 1. Introduction

The purpose of the prospectus is to commission universal preventative services from the third sector to improve and maintain the health and well being of Citizens living in Birmingham. It focuses on activities that will deliver measurable benefits to vulnerable adults across the City and brings together the commissioning of services previously funded by a wide range of former grants, many of which have been subject to considerable change or reduction over the past few years.

Grants are to be offered to organisations on a 2 year basis, with a potential one year extension option. The Performance framework and citizen assessment of services will form a central part of regular reporting and, as in previous years, will be linked to the resources we agree to continue to support you with over the duration of the agreement.

Services commissioned through this process will deliver against the Department of Health Adults Social Care Outcomes Framework into which we have embedded an agreed set of prevention outcomes that support the Directorate's priorities for its vulnerable adults.

The application process tests your capacity to deliver outcomes for service users in Birmingham. We recognise that the move to an outcome-focussed approach continues to be a major change, both for you and for the Directorate as funding body. This is why we are working with infrastructure organisations through our Corporate policy teams to provide continuous support through the Birmingham Compact.

## 2. Background

Birmingham's Sustainable Community Strategy, called Birmingham 2026, sets out the longer term vision for the City. We want to enable people in Birmingham to **Enjoy a high quality of life** – delivered through the other strategic outcomes of:

- ❖ Succeed economically
- ❖ Stay safe in a clear green city
- ❖ Be healthy

**A full copy of the Council Plan 2011+ can be downloaded from our website at:**

[www.birmingham.gov.uk/councilplan](http://www.birmingham.gov.uk/councilplan).

These priorities are reflected in the Directorate's strategic plan which is measured through the four domains of the Department of Health (DH) Adult Social Care Outcomes Framework (ASCOF). A full copy of the framework can be found at:

[http://www.dh.gov.uk/prod\\_consum\\_dh/groups/dh\\_digitalassets/documents/digitalasset/dh\\_125686.pdf](http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_125686.pdf)

These domains form the categories under which the third sector services, being commissioned through this prospectus will be grouped. These outcomes are outlined below.

- ❖ Enhancing the quality of life for people with care and support needs
- ❖ Delaying and reducing the need for residential care and support
- ❖ Ensuring that people have a positive experience of care and support and
- ❖ Safeguarding adults whose circumstances make them vulnerable and protecting them from avoidable harm

The prevention outcomes which have been developed by Public Health, in partnership with the third sector and commissioning have been incorporated into the ASCOF outcomes.

A number of the prevention outcomes could have been embedded within more than 1 of the ASCOF outcomes – however to avoid duplication each prevention outcome is listed only once and embedded within the ASCOF outcome of best fit. This should not deter providers from addressing more than one outcome area (ASCOF or prevention) through their activities. The prevention outcomes are evidence based and will ensure that activities and services commissioned from the third sector deliver sustainable and meaningful prevention services to improve the health and well-being of citizens of Birmingham.

These prevention outcomes are:

- ❖ Health and wellbeing
- ❖ Remaining Independent
- ❖ Reducing Social Isolation
- ❖ Living Safely at home
- ❖ Support to Self-Manage
- ❖ Support for Carers

### 3. Scope

#### 3.1 In-scope

##### **3.1.1 Services previously commissioned / funded from other sources**

The aim of the services commissioned through this Prospectus is to support the future vision for Birmingham where prevention is an integral part of the Directorates offer to all citizens. It includes services that were previously either commissioned elsewhere or were previously funded from other sources. The direction which services (that were formally supported under the previous funding arrangements) need to focus on in future is outlined below. In this round of commissioning all these service areas will be commissioned under the relevant ASCOF and prevention outcomes. Under this new approach providers have the opportunity to bid to support more than one client group using this single application process.

**Older Adult Wellbeing services:** Services that equip older people to make significant contributions to their own well being and their local community. This could include but is not limited to: day activities that keep people active in their own communities; befriending services/activities; development of user led activities; activities that support people leaving hospital,

**HIV:** The National Strategy for Sexual Health and HIV (2001) provided a framework for addressing issues associated with HIV and other sexually transmitted infections. In line with this strategy we will continue to commission services with these aims. Evidence suggests that the impact of HIV is borne unequally by particular minority communities, and services for those communities will be prioritised through the commissioning processes. A copy of this strategy can be found at:

[http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_4003133](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4003133)

**Alcohol and Substance Abuse/misuse:** Services to create an integrated system of recovery that not only effectively engages people in treatment and reduces harm, but also supports them to move through that system with the ultimate aim of overcoming their dependence and achieving abstinence. This will require us to rebalance our systems to support multiple pathways to achieve recovery outcomes while continuing to be effective in reducing drug/alcohol-related harm. Recovery is an individual person-centred journey with self-defined pathways

**Learning Disabilities, Physical Disabilities or Visual Impairments:** Services or activities with a focus on enablement, prevention, promotion of independence and inclusion

**Advocacy:** Services that support issue based/crisis advocacy; self advocacy and peer advocacy in order to encourage independence, choice and social inclusion. This may include: people being supported to speak up for themselves; having peer advocates; specialist instructed or non-instructed advocacy.

**Carer's services for adult carers and young people caring for an adult:** The 2001 census identified that approximately 100,000 people in Birmingham provided unpaid care and that 4,250 of them were young carers. We probably have contact with 5% of carers in the City. We are therefore seeking to commission services that enable us to: reach more carers across the city; improve the support available to them through the provision of easily accessible up-to-date information and advice; encourage them to speak up for themselves through the provision of advocacy services; and consider how to extend our emergency response service, to cover planned needs, such as attending hospital appointments.

**Mental Health:** Services for people with **Mental Health** problems follow the strategy document "Better Mental Health for Birmingham" (2012), and the government's policy document "No Health Without Mental Health" (Department of Health 2011). We are seeking to commission services which will meet one or more of the six overarching objectives:

- More people will have good mental health
- More people with mental health problems will recover
- More people with mental health problems will have good physical health
- More people will have a positive experience of care and support
- Fewer people will suffer avoidable harm
- Fewer people will experience stigma and discrimination

**Domestic Violence:** Services to support victims of **domestic violence** which could include services to support the protection, needs and well-being of victims and their children.

### **3.1.2 Services to support Directorate Public Health Priorities**

**Public Health Priorities:** We are seeking to commission services which support delivery of the Public Health priorities of:

- Falls
- Dementia
- Depression
- Carers
- Stroke (with an emphasis on preventing people needing Social Care support and in early intervention to Maximise rehabilitation)

Specific services have already been procured to support the Public Health priorities in relation to falls, Dementia and Depression (see section 3.2) and therefore bids for preventative services for people who have had a stroke or who are carers is particularly welcomed. Bids however are still welcomed for wider/alternative forms of prevention support for people from all the above public health priority areas. Again these services will be aligned in future to the outcomes outlined in the prospectus.

### **3.1.3 Citizen Led Quality Reviews of Third Sector Services.**

**Citizen Led Quality Reviews:** We are seeking to commission an organisation(s) to develop and deliver projects that involve service users, carers and citizens of Birmingham in the quality monitoring of the third sector services. This new service/activity will help to strengthen the current monitoring regime by contributing to the development of an independent evaluation process which will identify and record the added value being delivered by the sector.

## **3.2 Out of Scope**

A number of services are not being commissioned through this prospectus. These are outlined below. Where existing third sector services have been excluded from this prospectus we will continue to support the service, at existing levels, until the alternative processes have been completed.

**IMCA and Responsible Persons Services:** Due to the specific nature of this service it will be subject to a procurement exercise during 2012.

**Services for Deaf/Hard of Hearing and Deafblind individuals:** These will be commissioned as part of a separate activity in 2012.

**Support to extra care/sheltered housing schemes:** where services do not meet the criteria to receive grant funding they will be subject to revised arrangements.

**Specific Prevention Activities:** We have already tendered three specific activities under the public health prevention priorities and therefore the following specific types of support will not be tendered through this process:

- handyperson services to prevent falls;
- support for people suffering depression following bereavement; and
- support for people with early signs of dementia through musical reminiscences/seated yoga

**Services to support people on direct payments:** Support Arrangements for people receiving Direct Payments are being reviewed as part of a wider service design activity which will be further developed during 2012.

**Third Sector infrastructure/capacity building:** Activities such as assessments of support needs; or mentoring for smaller organisations have already been commissioned as part of a corporate agreement.

**Agreements which Finish after September 2012:** A small number of providers have service agreements which extend beyond September 2012. These agreements will be subject to new commissioning processes as and when these agreements end.

## 4. Outcomes

<b>Outcome 1:</b>	<b>Enhancing the quality of life for people with care and support needs</b>
<b>Target Group</b>	<b>All Adult Service Groups – City Wide</b>
ASCOF Measure	<ul style="list-style-type: none"> <li>• People manage their own support as much as they wish, so that they are in control of what, how and when support is delivered to meet their needs:</li> <li>• Carers can balance their caring roles and maintain their desired quality of life</li> <li>• People are able to find employment when they want, maintain a family and social life and contribute to community life and avoid loneliness or isolation</li> </ul>
Prevention Outcome and Measures	<p><b>Support to Self Manage</b></p> <p>Providers must evidence how the intervention has/or will support citizens to gain knowledge and understanding that enables them to self-care and self-manage independently reducing demand for high cost statutory services. Evidence of income maximisation, supported to continue to work, development of coping skills and support to access universal services.</p> <p>Measures to include the following:</p> <ul style="list-style-type: none"> <li>• Percentage of individuals using the service report they are supported to actively manage their condition and support their own needs.</li> <li>• Percentages of users receive support to access full range of financial benefits and welfare entitlement.</li> <li>• Percentages of individuals using the service feel confident that they can cope with everyday tasks and remain independent.</li> </ul> <p><b>Reducing Social isolation</b></p> <p>The prevention intervention demonstrates that it maximises community links and social interaction. Reducing social isolation resulting in less stress and anxiety by provision of opportunities to engage in activities that encourage physical and mental wellbeing.</p> <p>Measures to include the following:</p> <ul style="list-style-type: none"> <li>• Percentage of individuals using the service report that they feel they have adequate social contact</li> <li>• Percentage of individuals using the service report that they feel less lonely and depressed</li> <li>• Percentage of service users report that their lifestyle has improved for the better</li> </ul>

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<b>Outcome 1:</b>	<b>Enhancing the quality of life for people with care and support needs</b>
Activities may include	Access to information advice and guidance on range of options available to them Advocacy services that enable people to exercise choice and control; Activities that promote/encourage the retention or regaining of skills, confidence and independence Activities that support inclusion in person centred care planning in developing a range of age appropriate activities that enable choice and control Activities that promote healthier and safer lifestyles

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Third Sector Commissioning Prospectus 2012**

<b>Outcome 2</b>	<b>Delaying and reducing the need for residential care and support</b>
<b>Target Group</b>	<b>All Adult Service Groups – City Wide</b>
Ascof Measure	<ul style="list-style-type: none"> <li>• Everybody had the opportunity to have the best health and wellbeing throughout their life, and can access support and information to help them manage their care needs</li> <li>• Earlier diagnosis, intervention and reablement means that people and their carers are less dependent on intensive services</li> <li>• When people develop care needs, the support they receive takes place in the most appropriate setting, and enables them to regain their independence</li> </ul>
Prevention Outcome and Measures	<p><b>Health and Wellbeing</b></p> <p>The prevention service must demonstrate how it has helped to reduce health inequalities, and support the achievement of improvements in health and wellbeing in the city.</p> <p>Measures to include the following:</p> <ul style="list-style-type: none"> <li>• Percentage of individuals using the service feel they are supported to manage their health condition</li> <li>• Percentage of service users report that their lifestyle has improved for the better</li> <li>• Percentages of carers feel that they are supported to continue providing care by using the service.</li> </ul> <p><b>Living Safely at Home</b></p> <p>The provider must demonstrate how it has supported citizens to remain safely in their own homes. Ensuring personal safety and security, improved mental and emotional health, resilience and wellbeing. Services should be targeted at citizens who may find it hard to manage at home and improvements should prevent or delay the need for social or health care intervention.</p> <p>Measures to include the following:</p> <ul style="list-style-type: none"> <li>• Percentage of individuals using the service feel safe and confident living in their own home</li> <li>• Percentage of service users report an improvement in their living conditions</li> <li>• Percentage of users have had need for health or social care services since using the prevention service</li> </ul>

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<b>Outcome 2</b>	<b>Delaying and reducing the need for residential care and support</b>
Prevention Outcome and Measures - cont	<p><b>Remaining Independent</b></p> <p>The prevention activity must demonstrate reduced health and social care intervention enabling citizens to live as independently as possible, as full and equal citizens of Birmingham and their local communities, ensuring equal access to universal services.</p> <p>Measures to include the following:</p> <ul style="list-style-type: none"> <li>• Percentage of individuals using the service report that they feel supported to stay healthy and well</li> <li>• Percentage of users have had need for health or social care services since using the prevention service</li> <li>• Percentages of individuals using the service feel confident that they can cope with everyday tasks and remain independent.</li> </ul>
Activities may include	<p>Activities that support people to move towards independent living with greater choice and control over their support and care needs;</p> <p>Activities that support people leaving hospital to return to their own home and remain independent.</p> <p>Activities that reduce isolation and support individuals to develop social interactions and become active members of their communities.</p> <p>Support to Carers who care for people with complex and high dependency needs. e.g.: short breaks</p> <p>Activities that prevent people who have had a stroke requiring Social Care or focus on early intervention to maximise rehabilitation</p>

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<b>Outcome 3</b>	<b>Ensuring that people have a positive experience of care and support</b>
<b>Target Group</b>	<b>All Adult Service Groups – City Wide Children who are carers of adults</b>
Ascof Measure	<ul style="list-style-type: none"> <li>• People who use social care services and their carers have a positive experience of care and support services</li> <li>• Carers feel they are respected as equal partners throughout the care process</li> <li>• People know what choices are available to them locally, what they are entitled to, and who to contact when they need help</li> <li>• People, including those involved in making decisions on social care, respect the dignity of the individual and ensure support is sensitive to the circumstances of each individual.</li> </ul>
Prevention Outcome and measures	<p><b>Support for Carers</b></p> <p>The provider must demonstrate that the prevention activity provides a valuable break for carer's resulting in reduced stress, reduced isolation and supporting carers to maintain physical and mental health. The service provides a break, emotional support, information, advice and guidance or support for carer to continue to work.</p> <p>Measures to include the following:</p> <ul style="list-style-type: none"> <li>• Percentage of carers say they feel supported to continue providing care by using the service</li> <li>• Percentage of carers using the service report an improvement in their physical and mental wellbeing</li> <li>• Percentage of carers report that their lifestyle has improved for the better</li> </ul>
Activities	<p>Activities that enable service users and their Carer to contribute their views on services; e.g. services to undertake citizen/service user monitoring of services.</p> <p>Activities that enable carers to maintain their own quality of life.</p> <p>Activities which enable access to appropriate universal opportunities, e.g. leisure facilities, employment, education and training opportunities.</p>

<b>Outcome 4</b>	<b>Safeguarding adults whose circumstances make them vulnerable and protecting them from avoidable harm</b>
<b>Target Group</b>	<b>All Adult Service Groups – City Wide</b>

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Ascof Measures	<ul style="list-style-type: none"> <li>• Everyone enjoys physical safety</li> <li>• People are free from physical and emotional abuse, harassment, neglect and self harm</li> <li>• People are protected as far as possible from harm, disease and injuries</li> <li>• People are supported to plan ahead and have the freedom to manage risks in the way that they wish</li> </ul>
Activities may include	<p>Support services that meet the needs of people from diverse communities and backgrounds. e.g. culturally specific care package</p> <p>Activities that support people who use services and their carers to contact service providers when they need to.</p> <p>Complaints are well managed.</p> <p>Activities that assist people to achieve recovery and Maintain abstinence from alcohol and drug misuse</p> <p>Activities that support people who are socially isolated and excluded, often in hard to reach groups or as hard to reach individuals</p> <p>Advocacy services that support people without capacity to remain independent</p>

## 5. Funding Available

£8 million is available from the Adults and Communities Directorate budget for the third sector activities being commissioned within this prospectus (this is part of the 9.4m Adults and Community expenditure on third sector services). A further £500 thousand per annum is available through the S256 Social Care Funding transfer, which has been agreed by NHS partners and the Directorate, to support the delivery of Public Health Prevention services (as outlined in section 3.1.2).

The period of funding covered by this Prospectus is October 2012 – September 2014 with a potential for a 1 year extension to September 2015. Funding will be subject to an annual review, achievement of defined targets and budget availability.

The Council may at its discretion withhold some of the funding available if as a result of the equalities impact assessment, or through a shortfall in applications received, it has identified gaps in provision or there is potential for a lack of suitable provision through any proposed decommissioning activities.

In line with the City Council's corporate policy, organisations are required to complete the application form linked to this Prospectus. This includes a section for Organisations to demonstrate which of the outcomes the provider aims to meet in its service delivery.

The timescale for the process is:

<b>Activity</b>	<b>Date</b>
Applications received	April 2012
3 stage appraisal completed	May 2012
Recommendations to Cabinet	June 2012
Project notified of outcome	July 2012
Unsuccessful projects decommissioned	July – September 2012

## 6. Your Application

The purpose of your application is to provide information about your organisation and the service activities that you would like to deliver. Your application will need to clearly specify the service to be delivered, the evidence of the need for that particular service and how it will contribute to at least one of the outcomes detailed in Section 4 of this prospectus. The measures in your application should be evidenced-based to demonstrate that the activities will deliver sustainable and meaningful services for citizens.

Applications for a City wide service must clearly demonstrate how the needs of the whole target group will be met in each Constituency. Proposals should address the practicalities of delivering a service across the whole City Council area and should clearly detail how equality of access will be promoted for all those within the target group.

Applications for smaller services can be made on the basis of geographical boundaries for delivery or a particular target group of individuals e.g. Black Minority Ethnic communities, Lesbian Gay Bisexual Transgender communities, Please ensure that your parameters are clearly expressed within your application.

All applicants should ensure that their proposed service is properly costed with both direct and indirect costs identified. The budget headings in the finance section of the application form should help you think about the full costs of your proposed service. Organisations should clearly show exit strategies and sustainability projections beyond the life of the grant.

Partnership and consortium bids are encouraged particularly where these provide added value or enable the needs of hard to reach minority groups within the overall target groups to be met by linking with other organisations that provide similar services. Within the application the accountable body should be clearly identified.

Please ensure that you include all relevant information within your application form, as we will not be able to take into account any prior knowledge that we may hold of your organisation. We will also not be able to contact you to gather missing or omitted information.

Your application will not be recommended to go through the second stage appraisal process if the application form is not fully completed

## 7. Equalities

The Council is committed to equality and diversity in employment and service provision and will ensure compliance with all legislation covering anti-discrimination and assesses suppliers' and providers' commitment to these aims and values. All groups within our communities whatever their age, disability, race, gender reassignment, religion and belief, sexual orientation, marital status, or sex, may quite properly expect high quality services which suit their needs.

As a minimum, organisations should have equal opportunities in employment and service delivery policy, an equal pay policy and a policy to deal with harassment and bullying in the organisation.

The policy should be circulated to all employees in order that each member of the organisation understands the role they are expected to play in the organisation's desire to operate an effective equal opportunities policy. Please refer to section 1.5 of the Grant Funding and Framework Toolkit for the Council's minimum standards of equalities guidance.

## 8. Completing the Application Form

Applications must be submitted on the application form linked to this prospectus. The deadline for submission of applications and associated documents is 5.00pm on 24<sup>th</sup> April 2012. Applications received after this time will not be considered.

Completed forms must be returned by email to: [thirdsectorcommissioning@birmingham.gov.uk](mailto:thirdsectorcommissioning@birmingham.gov.uk)  
Please note that hard copy applications will not be accepted, except by prior agreement.

Please ensure that you have fully completed all sections of the application form and have supplied all the requested supporting information including completing the checklist which is attached to the front of the application form. Incomplete application forms will not be accepted and will be returned.

**No additional supplementary papers, folders or brochures will be considered.**

## 9. Appraisal of Applications

Please note that submitting an application does not guarantee that the Directorate will fund the proposed service. All applications received will be appraised to establish the suitability of the applying organisation and the proposed service/activity to receive public funds. The appraisal and selection process has been designed to ensure that only projects of the highest standard will be accepted.

**All applications will undergo the three stage assessment process:**

### Stage 1: Eligibility and Document Completeness

- Upon receipt of applications an initial assessment will be conducted which will assess the applying organisations eligibility to receive public funds from the Directorate. Within this eligibility check compliance with the key supporting documents form will be verified.
- For all applications the information provided by you will be added to a database for administrative purposes and statistical returns and will be shared with other City Council Services as appropriate.
- Organisations determined to be ineligible to receive funding from the Directorate; i.e. forms that have not been fully completed; or forms that do not have all the relevant supporting documentation attached will be removed from the process and returned to the applicant.

### Stage 2: Core Conditions – Technical Appraisal

In stage two of the assessment process applications will be assessed against core criteria. These criteria are detailed below. Applications that fail to meet all of these criteria will be removed from the process and returned to the applicant.

- The application clearly states the outcomes it will be addressing;
- The proposed service links with the aims of the organisation as described within the approved constitution/memorandums and articles document;

- The applicant organisation is financially stable to deliver the project and has demonstrated clear and appropriate exit strategies;
- The application includes evidence of partnership working or consultation in either its formation or in the delivery of the project/scheme;
- The applicant organisation has a verifiable track record in successfully delivering projects;
- The application adequately addresses issues of access and diversity.

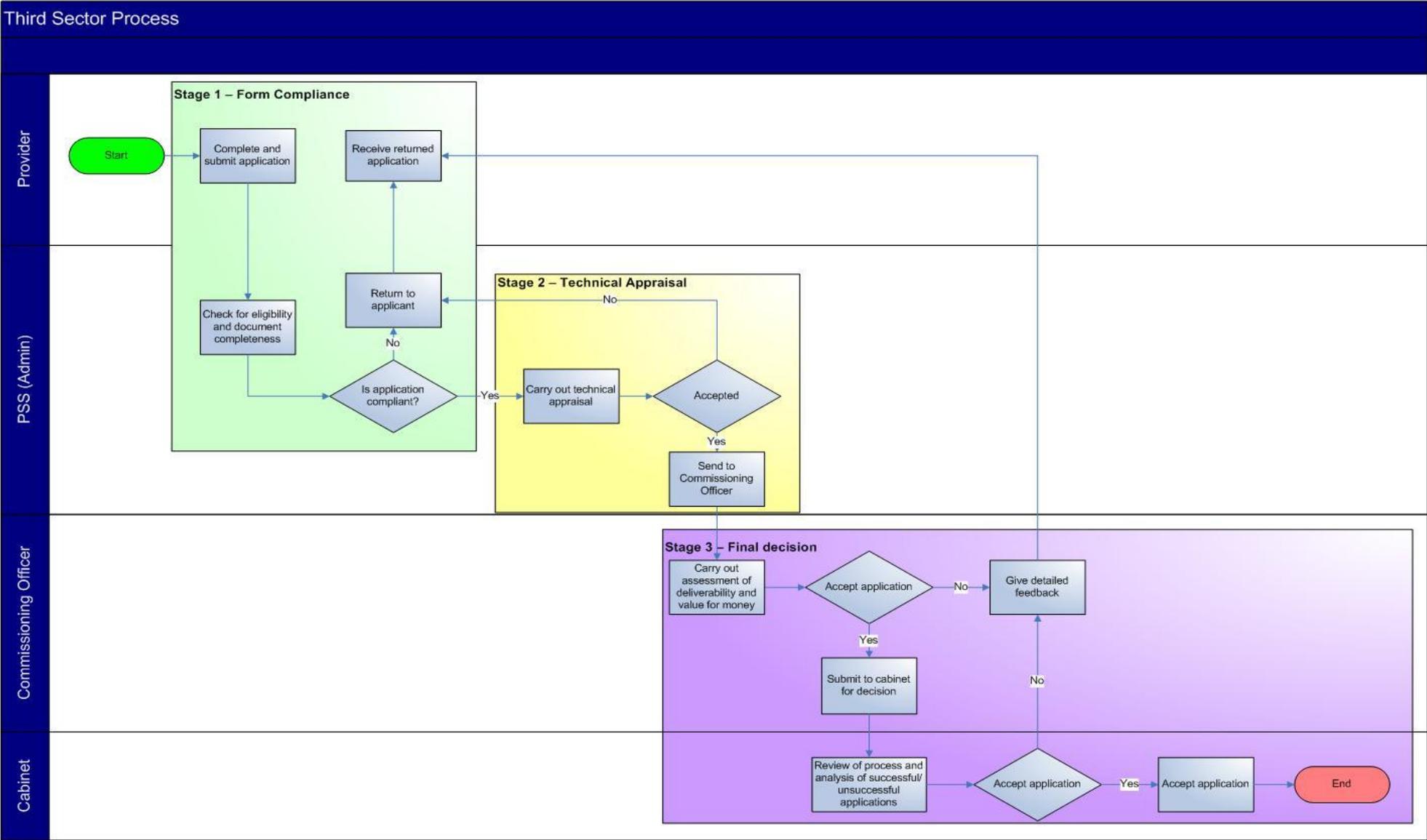
### **Stage 3: Panel Appraisal**

The Assessment Panel will consider applications against the following criteria for the relevant outcomes.

- **Governance**      The applications shows evidence of quality assurance; complaints procedure; Within the application there is a commitment to equality in provision and employment practices.
- **Criteria**              The application demonstrates a clear fit with one or more of the outcomes and is clear about how it will contribute to delivery of the performance targets
- **Sustainability**      The service is time limited or alternative sources of income are available/being sought to make the service sustainable. The application has demonstrated a robust exit strategy.
- **Partnership**              The application demonstrates that the service is driven by its users or the organisation is customer focused. There is evidence within the application of partnership working.
- **Value for money**      The application includes a clear breakdown of what the funding will be used for; the number and type of services users; application shows added value /added social capital.
- **Performance Management**      The application shows a practical approach to collating and recording service user achievements /outcomes

The Assessment Panel will contain service user representatives, third sector representatives, carers and City Council officers ensuring that no conflicts of interest are evident. The role of the panel is to determine from the applications, which organisations would be best placed to deliver services against the ASCOF and prevention outcomes. In making a judgement the Assessment Panel will focus upon: deliverability against the relevant outcome; value for money and evidence to demonstrate how the service will make a positive impact on citizens of Birmingham

Diagram 1 Application Appraisal



## 10. Notification of Decisions

All applicants will be informed of the decision in respect of their application and will have the opportunity to receive feedback on their submission. The City Council will publish details of successful applications and will identify where services have not been commissioned because of a lack of suitable applicants. In the event of an application being unsuccessful, feedback will be given in written format, if requested. In the event of applicants wishing to raise concerns about the process/make a formal complaint, then the City Council already has a formal process to deal with these matters.

## 11. Managing the Award

### The Grant

The Grant award will be based on a two year projection with the Council's option to extend for a further year. The award will take the form of Conditions of Grant Aid (COGA). These will set out the responsibilities of the selected service provider and the Council. **Please note that a two-year projection is not the same as a two-year guaranteed agreement.** The Council will notify Grant Recipients of any changes to the yearly funding position and, if necessary, adjust Proposed Grants to take account of performance, budgetary changes or gaps in service provision.

Final discussions and verification activity will be concluded for agreements to be approved and signed during September 2012 so that the selected service providers can prepare for service delivery to commence on 1 October 2012. Please note:

- All agreements will contain specific targets/outcomes required and deadline dates for submission of information.
- All agreements must be signed by a Director or Management Committee Member of the applicant who has the required authority e.g. Chair, Secretary, Treasurer.
- All grant funding is subject to the City Council's Standing Orders, Financial Regulations and Audit Requirements, a summary of which are contained in the COGA.

### Payment Arrangements

Providers will receive payment via equal quarterly payments. The Council will endeavour to make all payments relating to a quarter on the due date. All payments are subject to the submission of relevant and appropriate monitoring information required under the COGA. Continued funding is also dependent on performance and achievement of agreed targets/outcomes specified in the COGA.

Payments will be made directly into the service provider's nominated bank account via BACS. Invoices should not be raised for payment and will not be paid via this method of payment. It is the responsibility of the service provider to check that released payments are received and to notify the Directorate within the relevant payment quarter of any payment, which has not been received. All funding given relates specifically to the funding period covered by the COGA and cannot be accrued unless agreed in writing by the Directorate.

Service providers must submit to the Directorate a copy of their audited annual accounts within six months of the end of their financial year. In line with financial regulations, all

funding given must be shown as a “restricted fund” and clearly identified as funding from the Directorate within these annual accounts.

### **Withholding & Repayment of Grant – “Claw-back”**

If your organisation does not comply fully with the COGA or does not use the grant for the purpose for which it is given, future grant aid may be withdrawn and you may be required to repay all or part of the grant you have received. You must therefore ensure that the grant is spent as agreed within the COGA and within the timescales identified. Grant payments may be suspended whilst the City Council investigates the affairs of an organisation.

## **12. Publicity Requirements**

The selected service providers must publicise the City Council’s support for their activities and ensure beneficiaries are aware that the service they receive is supported by the City Council. Detailed guidelines will be provided to the selected providers.

The selected service providers are required to inform the City Council of opportunities for joint promotional and publicity activity, including press releases, interviews, seminars, conferences and exhibitions.

The City Council will continue to publish the names of the successful organisations and details of the award alongside all City Council funded organisations on a quarterly basis. This information will continue to be publically available on the Councils web site.

## **13. Monitoring and Review Arrangements**

### **Performance monitoring**

Successful applicants will be required to submit regular performance data against the agreed criteria in the COGA.

Successful applicants will be required to provide regular reports against performance criteria agreed in the Conditions of grant aid. This is currently done on a manual system, however we are in the process of developing an on-line system that will assist in the reporting and collecting of intelligence and data. In addition to this applicants will be required to participate in the completion of an annual service user self assessment survey, and an annual review of the COGA, this will all be supported by a minimum of one monitoring visit.

### **Citizen quality visit**

We are commissioning through this prospectus an organisation/s to oversee the introduction of annual quality reviews carried out by either service users / carers / citizens. The successful organisation will ensure each third sector provider receives at least one citizen quality review visit a year. All providers of third sector services who are awarded grant funding through this prospectus will be subject to a citizen quality visit.

### **De-commissioning**

Monitoring is a key element of the process of commissioned projects and delivery on agreed targets/outcomes will be closely monitored. If your project fails to deliver against the key targets/outcomes as agreed in your COGA your project may be de-commissioned as per the notice stated in your COGA.

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Providers who currently deliver services and activities through the earlier process, but who have been unsuccessful this time round will be decommissioned during the period July – September 2012. This means officers will work with the current provider and the individual to safely find suitable alternative services that continue to meet the service user needs and ensure that any equality impacts are identified and addressed.

## **APPENDIX 1: Glossary of Terms**

### **Adults**

People aged over 18

### **Age**

The Employment Equality (Age) Regulations 2006 makes it unlawful for employers to discriminate against employees, trainees or job seekers on grounds of age.

### **Advocacy**

Process of representing the cause and/or acting on behalf of another person, enabling them to express their opinions.

### **Assessment**

The process whereby the needs of an individual are identified and their impact on independence, daily functioning and quality of life are evaluated so that appropriate care can be planned

### **BME (Black and Minority Ethnic)**

Is described as the Mixed Parentage, Asian or Asian British, Black or Black British or Chinese or Other Ethnic Group categories from the 2001 Census.

### **Carers**

A person who looks after a friend, relative or neighbour who has a long term disability, mental health problem, or is frail due to old age and who is not in formal paid employment in that caring role.

### **Complaint**

Is a generic term for any type of expression of dissatisfaction or disquiet about the actions, decisions or apparent failings of service provision that requires a response.

### **Commissioning**

A process of meeting the needs of whole groups of service users or whole communities, developing policy directions, service models and the market and meeting those needs in the most appropriate and cost effective way. **Outcome-based** commissioning focuses not on activities and processes, but on results. The key point is shifting thinking from how a service operates - what it does - to the good that it accomplishes - what it achieves.

### **Constituency**

One of 10 parliamentary boundaries each consisting of 4 wards.

### **Direct Payments**

Cash payments made in lieu of social service provisions, to individuals who have been assessed as needing services.

### **Disability**

The Disability Discrimination Act (DDA) 1995 makes it unlawful to discriminate against disabled people in connection with employment, provision of goods; facilities and services; access to and around buildings; education; and transport. The DDA 2005 amends the DDA 1995 and places a duty on the public sector to actively look at ways to ensure equality is positively promoted internally and externally. Replaced by the Equality Act 2010.

### **Diversity**

Promotes inclusiveness by ensuring that everyone is valued as a unique individual celebrating their differences.

### **Early Intervention**

Is aimed at halting or delaying the development of a problem which may already be evident. This approach seeks to ensure that people are not forced into using health and social care earlier than they need to; and that they are enabled to live an active and independent life as a citizen for as long as possible.

### **Evidence Based**

The best current research information available based on a systematic analysis of the effectiveness of services for local population.

### **Equality**

Promoting equality is a legal requirement that ensures that everyone is treated fairly, given equal access to opportunities and services; and not subject to unlawful discrimination.

### **Gender**

The Sex Discrimination Act 1975 (amended by the Equality Act 2006) prohibits discrimination on grounds of sex in employment; education; provision of goods; facilities and services; and to promote equality of opportunity between men and women. Replaced by the Equality Act 2010

### **Hard to Reach Groups**

Black and Minority Ethnic Groups; Lesbian, Gay, Bisexual and Transgender; Homeless; Travellers.

### **IMCA**

Independent Mental Capacity Advocacy Service.

### **Independence**

Managing everyday living skills to maximise ability, taking account of the support available and needed

### **Inputs**

Are resources invested into the service to deliver the outputs. For example, numbers of staff employed.

### **Intervention**

An activity or set of activities aimed at modifying a process, course of action or sequence of events, in order to change one or several of their characteristics such as performance or expected outcome

### **Low-Level Prevention Services**

These services provide the lowest appropriate level of prevention to those most at risk or in need, in order to promote independence, increase community sustainability and reduce the demand for complex care e.g. falls prevention, assistive technology, handyperson scheme. Most of primary and secondary prevention services are low-level.

## **Outcomes**

Outcomes are the results of support activity or interventions, not the activity itself. An outcome of a service for an individual can be described as:

***‘The impact or effect on the person concerned as a result of help received’***

Outcomes can be further categorised into:

- Individual outcomes e.g. Michael now gets up in the mornings without staff support.
- Service level outcomes e.g. the service supported 10 service users to access the correct benefits.
- Strategic outcomes e.g. more people will be helped to live at home.

## **Outputs**

Are the desired level of service from the provider, which are usually expressed in terms of service availability, speed, delivery or quality. For example, the number of sessions held the vacancy rate of a service, or waiting times.

## **People**

In this document refer to service users, their carers and relatives.

## **Prevention services**

In this document means: Responding to information in order to stop or reduce something happening, or reduce its impact if it does occur:

## **Race**

The Race Relations Act 1976 amended 2000 and 2003 makes it unlawful to discriminate against anyone on the grounds of race; colour; nationality, ethnicity; national origin. Replaced by the equality Act 2010

## **Religion and Belief**

The Employment Equality (Religion and Belief) Regulations 2003 make it unlawful to discriminate on the grounds of religion or belief in relation to recruitment and selection; terms and conditions of employment offered/applied for; opportunities for training, training itself, job promotions and transfers; harassment and victimisation; dismissal including redundancy and post employment. Replaced by the Equality Act 2010

## **Self Care/Self Management**

With appropriate support many people can learn to be active participants in their own health and social care, living with and managing their conditions and meeting their own needs. This can help to prevent complications, slow down deterioration and even avoid getting further conditions and increased needs.

## **Self-Directed Support**

The assumption that most people will assess their own needs, plan their own support and manage their own support more actively than they are able to do at present

## **Short Break**

A short break, sometimes known as respite care, is when a carer and individual get a chance to spend some time apart. This gives the carer a break from the caring role. It also gives the individual the chance to experience new opportunities.

## **Sexual Orientation**

The Employment Equality (Sexual Orientation) Regulations 2003 make it unlawful to discriminate on grounds of sexual orientation in relation to recruitment and selection; terms

and conditions of employment offered/applied for; opportunities for training, training itself, job promotions and transfers; harassment and victimisation; dismissal including redundancy and post employment. Replaced by the Equality Act.

### **Social inclusion**

To enable all citizens to have a chance to play a full part in all community activities open to the general public, even if they have a disability or long-term illness.

### **Targeted or Well-being services**

Services that are specifically directed at vulnerable groups of people that are considered to prevent or delay ill-health or disability and improve the quality of life in a way that promotes independence and social inclusion e.g. exercise activities, gardening projects, and luncheon clubs, befriending, adult learning.

### **Third sector**

Term the Council uses to describe the voluntary and community sector, including registered charities, voluntary organisations, community groups, and faith groups engaged in voluntary social action, not-for-profit organisations, community interest companies and social enterprises operating to meet city-wide and local needs through advocacy, campaigning and providing services.

### **Universal services**

Services for people with low to moderate needs who do not meet the council eligibility criteria for services.

### **Well-Being Services**

Well-Being Services are not personal services they are proactive initiatives that are designed to delay or remove the need for individuals to require care in the future, supporting them to look after themselves and to live independent lives in their own homes. Well-being services can encompass a combination of universal, targeted and personalised services including such things as advice, information, advocacy, exercise, shopping, gardening, cleaning, home adaptations and minor repairs, transporting and befriending.

**Adults and Communities Directorate  
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