

# Adult Social Care Market Position Statement

**Barking &  
Dagenham**

Updated  
March 2025

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# Introduction



Councillor Worby, Cabinet  
Member Social Care and  
Health Integration

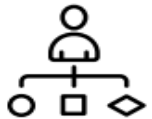
- I am delighted to introduce the Market Position Statement for the Adult Social Care department in Barking and Dagenham. It has been a very busy time as we recover from the impact of the COVID pandemic and review and re-build our community response to those with care needs. This market position statement helps us to share our vision and priorities and our commissioning intentions with all stakeholders, particularly social care providers wanting to support the Council to deliver its duties under The Care Act.
- As Cabinet member for Social Care and Health Integration, I am committed to ensuring that we deliver high quality services for our residents. Barking and Dagenham has some of the highest levels of deprivation in the country. We are a growing population, and that need is also growing. As the impacts of the cost of living continue to affect our residents, we need to ensure that the services we offer are of high quality and offer best value to residents. These services need to support our wider ambitions and vision and encourage people to maintain their independence and make informed decisions that best suit their needs.
- In the following pages we outline how demand for care and support has developed over the years in Barking and Dagenham and how it continues to change – this market position statement seeks to set out what that means for the services we need to commission for our local population. The document is designed to be market facing and to mirror the broad categories in which we commission care.
- This document should be read alongside the [Council's Corporate plan](#) and importantly the data sources we share. The recently updated [JSNA](#) will provide insight into the needs that are prevalent in the borough and will help with anticipating future commissioning need.
- Listening to our residents is at the heart of everything we do and is integral to the way we work. Our social care staff use a strengths- based framework to support residents. Through this we ensure we are talking and listening to what residents say they want and need and building on the strengths they have around them – be it informal carers – who play a vital role in our care economy- or local support groups. We will coproduce care plans with residents and require this commitment to collaboration from our providers too.
- We have developed a variety of strategies alongside this document, and they are linked [here](#). In particular, we are seeking to refresh our [carers strategy](#) over the coming 12 months and build on the work identified through our learning disabilities and autism [strategy](#) group.
- The role our voluntary and community sector plays in providing information, support and guidance is also critical in ensuring residents are well supported. Through the work we intend to do in our [Prevention](#) plan to help prevent, reduce and delay people needing social care we will be looking to our local stakeholders to help us empower local people and keep them safe.
- As a Council we continue to face significant financial pressures – due to our requirement to support growing need in the community and to find further efficiencies. We are aware of the challenging landscape for providers too as we face the pressures of the cost of living and inflationary increases together. We seek to work in partnership with organisations, to be open about the needs we are seeking to support and also to ensure that there is transparency in cost modelling.
- Furthermore, we are currently reviewing how we work with our placed based Integrated Care Board (ICB) to ensure that we are joining up to better serve residents and help them to tell us their story only once. This includes through more joined up ways of working including more integrated teams to reduce delays for our residents through our localities way of working.
- In LBBD we seek to keep people safe at home living independently for as long as possible. We are championing innovation and best practice including through embedding a reablement ethos in our services and also embracing the advantages we can gain from greater use of technology. Our care technology programme is designed to support people to stay living independently and well at home for longer.
- We trust you will find this document useful in understanding need in the local area and working alongside us to support local residents. Our plan is to update this regularly as we develop our knowledge together.

# Care Values for Barking and Dagenham

## Adult Social Care

Barking &  
Dagenham

### Living safe, happy, healthy lives



***Our support***  
gives you choice  
and control



***Our support***  
keeps you well and  
as independent as  
possible



***Our support***  
connects you to  
your communities



***Our support***  
keeps you safe



***Our staff***  
treat you with  
dignity and respect



***Our staff***  
care and listen



***Our staff***  
respond to  
your needs



***Our staff***  
work with the  
right people at  
the right time

- In Barking and Dagenham, we have established a set of values to guide the work we do in social care.
- This helps us to set high standards in the care and support we offer to our residents. It also guides our staff and our commissioned care providers to ensure we are delivering empowering services which give residents support and control, keeping people independent and safe and ensuring good connections to the local community.
- Our services should be person-centred and give support and control to individuals building on their strengths and preferences and meeting their goals.

# Population Summary for Barking and Dagenham



## Growing population

Around 219,000 people live in the borough – an 18% increase in ten years - and we expect the population not continue to grow.



## Young age profile

A quarter of the population aged under 16 years. 9% of residents are aged 65 years and over, though we expect the number of older people living in the borough to grow in future.



## Diverse population

We are one of the most diverse communities in England: 16% of the population are of a Black African ethnic background – the highest proportion in England – and 10% of residents are of an Asian Bangladeshi ethnic background. 45% of our residents are Christian and 24% are Muslim. A comparatively high proportion of residents have a gender identity different to the identity assigned to them at birth.



## High levels of deprivation

Residents experience some of the highest levels of deprivation in the country: The borough ranks 21<sup>st</sup> highest deprivation score of the 317 English local authorities measure on the Index of Multiple deprivation. This picture is interwoven with high unemployment rates, fuel poverty and debt.



## Healthy life expectancy

The average number of years a Barking and Dagenham resident can expect to live in good health is below the England average. It is 58 years for men and 60 years for women.



## Health conditions

13% of our residents are estimated to have two or more long-term conditions, and an 38,000 people are estimated to have an undiagnosed long-term condition. An estimated 27,200 residents have a common mental health disorder.

## What does this mean for adult social care?

- Experiences of poverty and poor health means people often have complex social care needs. We put a focus on holistic support and work in partnership with others to support people.
- As our population grows and ages, it is more important than ever that we put a focus on preventing social needs from developing and support people to be as independent as possible.
- Support from social care must meet the needs of our diverse communities – now and in future - and address the barriers that can arise from structural inequalities.

## Where can I find more information?

- The [2023-26 Corporate Plan](#) describes our local authority priorities.
- The [Joint Strategic Needs Assessment](#) looks at the current and future health and care needs of the population.

# Adult Social Care Demand in Barking and Dagenham



3,058 adults received long-term support from adult social care throughout 2023-24. We support a higher proportion of our older residents compared to the England average and, as a young borough, supporting working-age adults with support needs has been a particular area of growth in recent years.



46% of those getting long-term support received home care, 21% received support in a care home and 29% organised their own support through a direct payment.



46.5% of those getting long-term support primarily needed this due to physical support needs. 19% needed support due to a learning disability, 18.5% due to a mental health issue and 14% due to their memory or cognition.



7,000 people worked in adult social care in 2022-23.



We have 10 care homes for older people and 12 care homes mainly for adults with a learning disability, mental health or substance misuse issues.



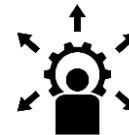
169 CQC-providers were registered in the borough as of July 2024, of which more than 100 are home care providers.



There are an estimated 14,000 unpaid carers in the borough. A smaller proportion access support: 301 carer assessments were completed in 2023-24 and 822 unpaid carers got support.



63% of people getting long-term support report being extremely or very satisfied with their care and support (2023-24 Service User Survey). 3.4% are very or extremely dissatisfied.



89% said support helps them have a better quality of life, 85% said it helps them have control over daily life and 82% said that services made them feel safe and secure.



67% of unpaid carers report being extremely, very or quite satisfied with the support or service they or the person they care for receive (2023-24 Carer Survey). This is slightly above the London average of 65%. 6% are very or extremely dissatisfied.

## Where can I find more information?

A list of strategies and plans in adult social care can be found on our [website](#). These collectively describe how we plan to support people in future.

# Causes of Life Expectancy Inequalities in Barking and Dagenham

## Summary of health and care needs in Barking and Dagenham

- The wider determinants of health – social isolation, housing, employment, deprivation – are challenges in LBBD overall and for people who need social care. Environment and wider determinants of health determine 50% of poor health.
- Health behaviours, particularly smoking and poor diet and physical activity, are challenges in the borough. Health behaviours determine 30% of poor health.
- Long-term conditions are a major driver of health and social care needs. An estimated 38,000 cases are unidentified and therefore unmanaged.
- Multiple unhealthy behaviours and health conditions makes supporting individuals more complex and costly. An estimated 13% of LBBD residents have two or more health conditions. Research highlights the importance of services taking a holistic approach.
- For more information, please refer to the [JSNA](#)

## 'Top 10' health conditions responsible for greatest healthy years of life lost from disease and ill health

Cause			
	Rate (per 100,000)	London rank (out of 32)	England. Rank (out of 150)
Ischemic heart disease	1,343	1	34
Low back pain	1,093	5	124
Chronic obstructive pulmonary disease	902	1	15
Lung cancer	878	1	18
Depressive disorders	725	13	18
Headache disorders	705	13	17
Diabetes mellitus	676	18	65
Stroke	543	1	80
Falls	519	7	67
Neonatal disorders	507	13	58

Disability-adjusted life years (DALYs) is the number of healthy years of life lost from disease and ill-health (combining both mortality and morbidity)

B&D has the highest rate in London for four of the 'top 10' key conditions:

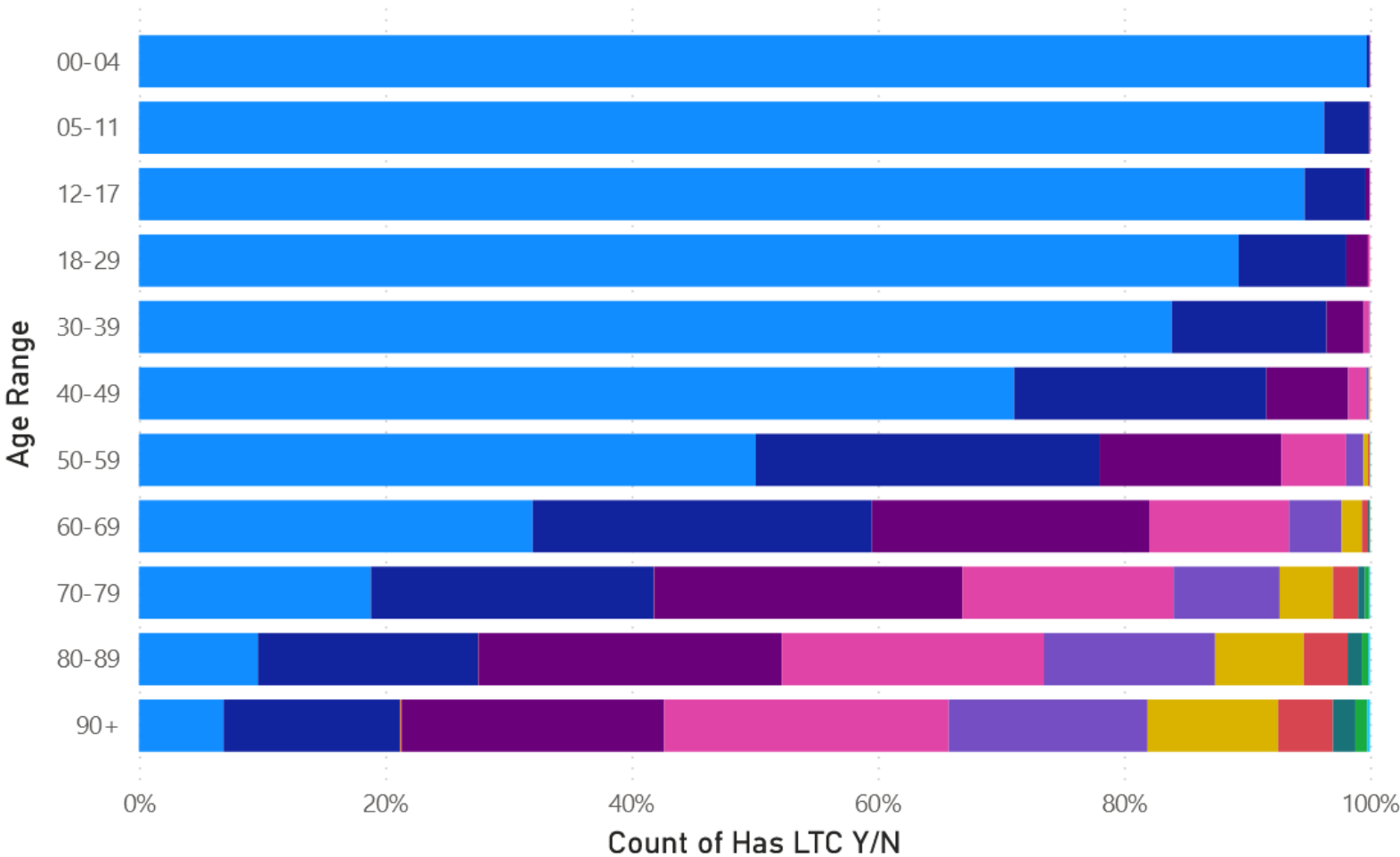
- Ischaemic heart disease
- Chronic Obstructive Pulmonary Disease (COPD)
- Lung cancer
- Stroke

**Source:** London Borough of Barking & Dagenham (2019). Global Burden of Disease Study data, 2017: Barking and Dagenham, Havering and Redbridge.

# Earlier and Multiple Long Term Conditions

How many Long Term Conditions people have by percentage of age group

Number of LTCs 0 1 10 2 3 4 5 6 7 8 9



- Earlier and Multiple long term conditions (LTCs) is a concern in Barking and Dagenham.
- Over 1 in 5 (22%) of B&D patients with an LTC are aged under 40 (i.e. before age for NHS Health Check)
- Over 1 in 2 B&D patients have at least 1 LTC before age of 60 (~1 in 4 have multiple LTCs at 50-59 years)
- A lack of capacity in primary care for LTC identification& management means **diverted demand onto wider local infrastructure** (social care, public health, VCFSE, acute NHS care)

Source: Together First data.

# Inequalities Summary from our Prevention Work

## Wider determinants of health

- **Employment:** Regional insights indicate that people aged 16-24, people who are disabled and people from a Bangladeshi, Black “mixed/multiple” and “other ethnic groups are more likely to be unemployed.
- **Overcrowding:** Research indicates that people of a Bangladeshi, Pakistani or Black African ethnic background experience higher rates of overcrowding.
- **Social isolation:** People with a disability or long-term health condition, people going through a ‘disruptive life event’ (e.g. bereavement, unemployment, migration) are more likely to experience social isolation. Personal risk factors include being aged 16-24 or over 50, being LGBT+ or being an unpaid carer.

## Mental health

- People from deprived areas, LGBT+ people, older people, people with a long-term condition or learning disability are at a higher risk of mental health issues.
- Other risk factors include discrimination, child neglect and abuse, unemployment, poor quality work, debt, drug and alcohol misuse, homelessness, loneliness and violence.
- People from Black, Asian or minority ethnic backgrounds are less likely to engage with mental health services other than at a time of crisis.
- Locally, there is evidence indicating Asian ethnicities are underrepresented in mental health referrals by 12% and in admissions by 15% (NEL MHLDA Provider Collaborate Report, 2024)

## Healthy life expectancy and long-term conditions

- The prevalence of multiple conditions is higher, and the age of onset is younger in those living in more deprived areas. There is currently a 6.4-year difference in healthy life expectancy between the least and most deprived males and a 5.8-year difference between the least and most deprived females with the borough (2023 DPH report).

- The likelihood of having one or multiple long-term conditions increases with age. One report suggests a picture of earlier frailty in LBB. (NIHR, frailty among older adults, 2020).
- Residents of Black ethnicities develop a long-term health condition over five years earlier than their White neighbours (2023 DPH report)
- Life expectancy and deaths from certain diseases (e.g. morbidity in cancer, dementia and Alzheimer’s) are highest in White residents (2023 DPH report).
- The 2021 Census indicates that a significant proportion of the local population originate from Romania and Lithuania. It may be useful to look in more detail at the health needs and experiences of these communities, building on a previous 2010 [report](#).
- Self-reported health is a key indicator for healthy life expectancy. Self-reported bad health is more prevalent in LBB for those aged 65+ and people of a White British ethnic background (the two are possibly linked). Self-reported bad health was most likely to be reported in Becontree, Heath, Parsloes and Valance wards (2021 Census)
- Demographic change in LBB indicates that those aged 35-39 make up a significant proportion of the population. This cohort will soon enter the age band at which long term conditions often appear.
- The proportion of the LBB population from an Asian ethnic background increased from 15.9% in 2011 to 25.9% in 2021. As members of the Asian ethnicity are overrepresented in certain long term health conditions, such as diabetes, this demographic change will affect public health need within the borough

## Interfaces

- There are many interfaces between the risk factors described here. For example, there is evidence that physical and mental health are closely connected and affect each other through a number of pathways.

# Adult Social Care Spend in Barking and Dagenham

Social Care is one of the largest areas of spend in Barking and Dagenham, and this is synonymous with the national trend. A summary of the budget structure for Adult Social Care is shown on the next slide.

The total budget for Adult Social Care is **£99m**. **£82m** of this is spent on care and support packages. This equates to **83%** of the budget. **17%** of the budget is spent on staffing, premises and other supply & services combined.

There is a national trend of financial pressure on Adult social care budgets which are due to the following reasons:

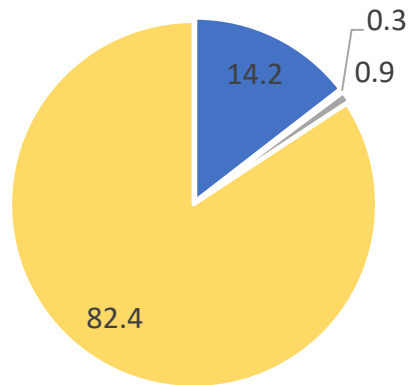
- **Market Pressures in the Adults Market:** the sector has seen an uplift in cost of between 5-13% for packages of care. This is driven by rising cost due to inflationary pressures, NIC increases, London Living Wage increases, & increases in staff pay awards.
- **Placement Modernisation:** This is the net cost between those entering social care, compared to those exiting. The cost of those leaving social care is always lower than those entering care due to either client no longer needing the service or clients' needs increasing and resulting in moving onto higher cost provision. Long term placements have held their rates, while new placement costs are higher to due market factors mentioned above.
- **Transition of young people into Adults Disabilities** with higher complexity in children transitioning into adult disability services on significant care packages. The costs of these clients becomes a single cost burden for the Adult social care service, whereas these costs were previously shared between health, Education and children social care.

Our benchmark data shows we provide value for money for our residents, and we pay a fair and competitive rate to providers which ensures a sustainable partnership working arrangements with local providers and residents.

# Adult Social Care Spend in Barking and Dagenham (2)

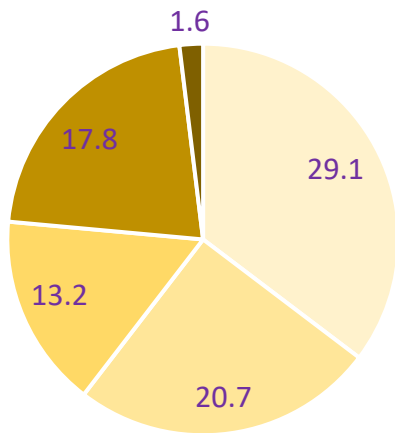
**35%** of our Care and Support budget is spent on Residential/Nursing homes, **25%** is spent on Supported Living, **22%** is spent on Homecare, **16%** is spent on Direct Payments and **2%** is spent on Daycare and others.

Gross Spend (£Millions)



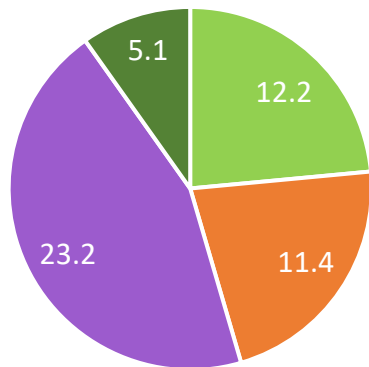
Area	Amount
Staffing	14,221,428
Premises & Transport	316,169
Supplies & Services and Other	2,808,335
Care and Support	82,428,390
Total	99,774,322

Care and Support (£Millions)



Area	Amount
Residential/Nursing	29,051,876
Supported Living	20,675,485
Direct Payments	13,299,639
Homecare	17,816,631
Day Care and Other (inc Extra Care)	1,584,759
Total	82,428,390

Funding Sources (£Millions)



Area	Amount
Client Contributions	12,180,541
Grants	11,353,204
Health Funding	12,153,807
Other	5,092,996
Total	40,780,548

# Older People Needs Overview

Although Barking and Dagenham is predominantly a younger borough, a higher proportion of our older residents compared to the England average are supported with social care needs. Working-age adults with support needs has been a particular area of growth and we have seen increasing numbers of adults in their 40s and 50s requiring Adult Social Care support. Our healthy life expectancy from birth was 58 years for men and 60 years for women in 2018-20, compared to a London average of 63.5 and 64 years respectively. Multiple unhealthy behaviours and health conditions makes supporting individuals more complex and costly. An estimated 13% of LBBD residents have two or more health conditions. In addition, our adult population has reported higher levels of social isolation and loneliness. Only 46% of respondents to a 2024 survey sent to social care users in Barking and Dagenham said they have as much social contact as they want.

**In summary, our working age and older adult population suffer worse health, wellbeing and loneliness than peers in most other areas of London and England. Adult Social Care supports a higher proportion of the population compared to the London average and adults are more likely to have a long-term health condition than their counterparts in other areas.**

*For more information regarding our population, please see our [Director of Public Health Annual Report](#), [Health and Wellbeing Strategy](#) and our [Adult Social Care Prevention Strategy](#).*

We have a great relationship with our provider market and have excellent providers in the borough who support our older residents with dignity, care and respect. We want our older adults provider market to understand the needs and the challenges of our adult population and to work with us innovatively and creatively.

**Overall, we want a provider market that enables older people to access timely, purposeful care which keeps individuals safe, healthy, independent and within their own homes for as long as possible. We want providers to support our older population to feel connected to, and part of, their community and to have choice and control over their care and support.**

In order to achieve this, we wish to work with providers who:

- Demonstrate our 'care values', particularly in listening and responding to residents
- Build feedback into service design and delivery
- Have a reablement ethos – working in partnership with residents to achieve individualised outcomes, rather than completing care tasks
- Embrace and deploy care technology and digital innovation, including the use of digital social care records
- Focus on sustainability, affordability and value for money e.g. use of public transport, efficient rostering etc
- See their workforce as their biggest asset and invest in them accordingly
- Work in an integrated and holistic way, particularly with health colleagues and other partners, to achieve resident outcomes and tell their story once
- Aim for outstanding ratings

# Home Care

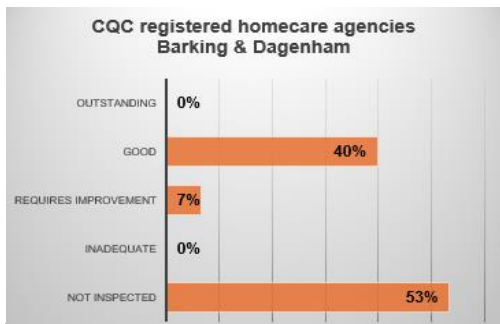
Barking and Dagenham is committed to ensuring that our residents live safely and independently in their own homes for longer.

The borough continues to provide good-quality short-term and long-term homecare services to residents, with the demand for this service increasing each year. Homecare services are essential in promoting wellbeing, contributing towards preventing, delaying and/or reducing needs and meeting care and support needs for our residents.

**89% of all home care services delivered since 1 April 2024 have been by providers with at least a Good CQC rating.**

As part of our commitment to support people to maintain their independence, a new reablement service has recently been commissioned to empower our residents and reduce how much long-term home care is needed. The Council is also planning to go out to tender very soon for a new framework of 18+ homecare providers.

Our local market of providers continues to grow, with 118 homecare providers registered with CQC in Barking and Dagenham, of which 63 are awaiting an inspection.



**Barking and Dagenham would like locally commissioned providers to receive Outstanding CQC rating.**

Home care services, whilst a statutory duty, also assists in achieving the Council's priorities:

## ***Residents are supported during the current cost-of-living crisis***

Some residents pay for the entirety of their care and the Council negotiates homecare for these individuals including to ensure provider sustainability and affordability.

## ***Residents are safe, protected, and supported at their most vulnerable***

A unique care and support plan is created for eligible residents, specifying a resident's needs and how they will be met. This ensures residents are safe, protected and supported at their most vulnerable. Residents who require home care services will receive such services from providers with a Good or Outstanding CQC rating, and the Council's Provider Quality and Improvement Team will also regularly assess providers to ensure continued good quality of care. This further ensures residents are safe, protected and supported at their most vulnerable.

## ***Residents live healthier, happier, independent lives for longer***

Home care services are provided at the homes of our residents, enabling residents to continue living in their own homes, as independently as possible, for longer. Adult Social Care is committed to keeping people at home where safely possible to do so, and we ensure this commitment is achievable by having providers available to safely meet the diverse needs of our residents, with an emphasis on good quality of care.

## ***Residents benefit from inclusive growth and regeneration***

The locality model of our upcoming framework will allow providers to carry out targeted recruitment exercises, with the view of recruiting local care workers to efficiently meet care needs, reducing traveling costs/time and connecting local people with opportunities in the labour market. The role of a care worker is one of the top three local occupations locally.

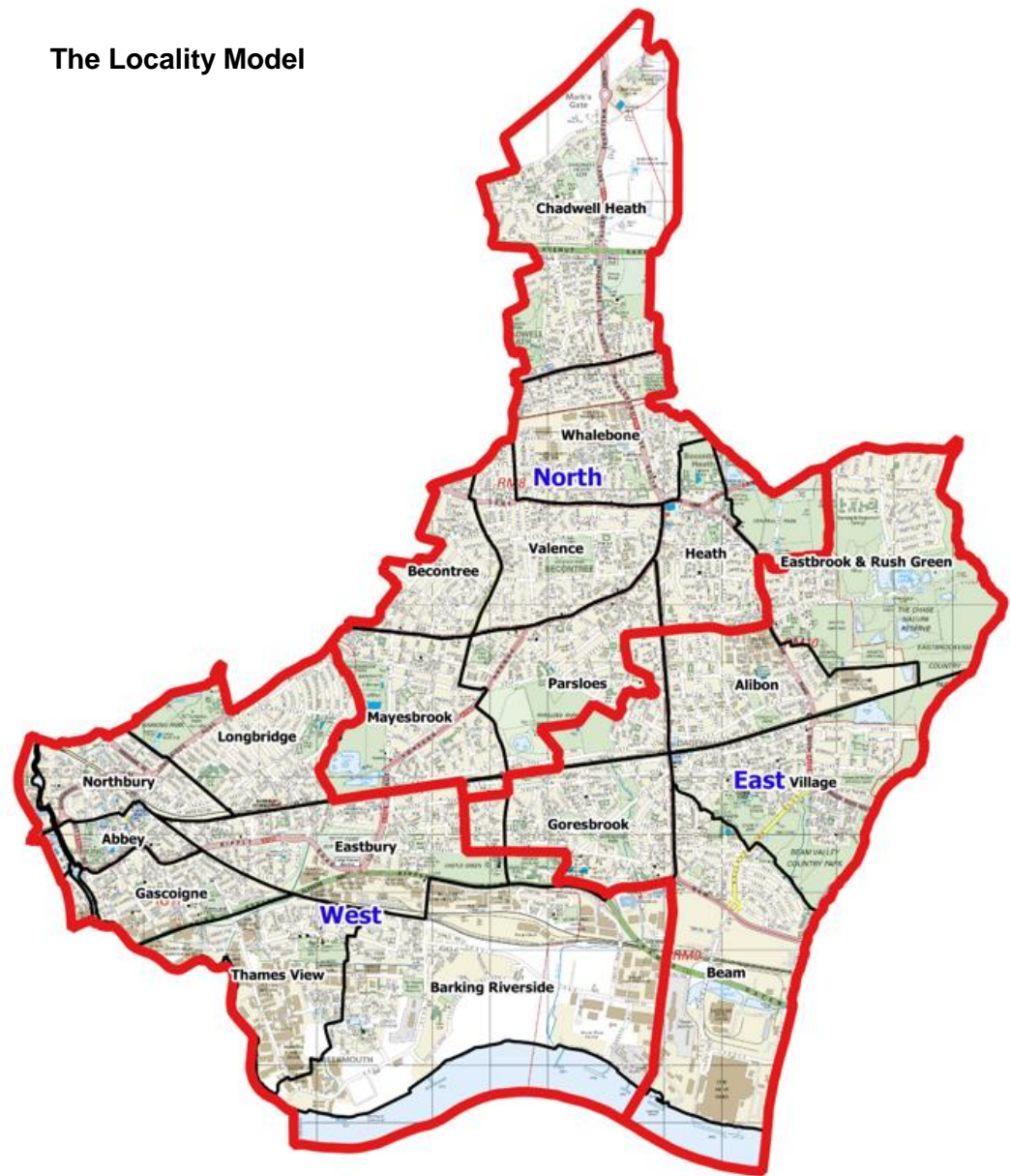
## Data Snapshot

As demand for homecare services can be seasonal, a snapshot has been taken from a week in June 2024. This showed:

- 956 residents receiving homecare services
- 14,762 hours of homecare services per week
- 56 providers delivering homecare services
- 62% female, 38% male
- 67% aged 65+
- 61% of people contributing towards the cost of their care
- 19% of packages had a double-handed

# Home Care (2)

## The Locality Model



## Local People

The locality model of the framework allow providers to carry out targeted recruitment exercises, with the view of recruiting local care workers to efficiently meet care needs (i.e. punctually travel from one resident to another).

## Environmental sustainability

The locality model adopted will also allow for better traveling arrangements, reducing the need for car transport, and promoting walking, cycling and public transport.

## Residents Need

Care packages will be offered to the highest-scoring provider (following a competitive tender) assigned to each locality. Providers will therefore have an allocated amount of time to carefully consider if they can fully meet the needs of our residents, and how.

## New Packages of Care by Locality

*New adults' homecare packages brokered from April 2024 to December 2024:*

	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24
North	24	25	19	14	18	13	26	21	26
East	24	17	14	13	13	9	18	6	19
West	15	14	17	11	14	2	20	5	9

*It is expected that the Council's new Reablement service will encourage people back to independence and will impact the number of new residents requiring homecare.*

# Home Care (3)

## New Framework of 18+ Home Care Providers

As part of our commitment to ensuring our residents live safely and independently in their homes for longer, and to ensure both legal compliance and fairness, a new framework of homecare providers is being tendered for. This is crucial as the Council (unfortunately) cannot work with all registered providers as our ability to adequately quality check and contract manage providers will be compromised, risking the quality-of-care residents receive.

A framework is therefore sought to provide the following benefits:

- A pool of providers successfully selected during a fair and competitive tender exercise to deliver good-quality care to residents, whilst also providing residents with choice and control of who provides them with care
- Better value for money through consolidated contracting
- Focussed contract management, quality checks and forums
- A locality-based model integrating with local partners
- Compliant with procurement regulations
- No commitment to buy, pay per unit of care activity
- Shared provider accountability, responsibilities and commitments

The Council believes that technology plays an important role for both our care providers and our residents. The framework will therefore require providers to have both **Electronic Call Monitoring** systems and **Digital Social Care Records** including reaching “standards met” on the NHS’ Data Security & Protection Toolkit (DSPT).

## Care Technology

The Council considers care technology as having an important part of someone’s personalised care and support, particularly when blended with human contact and support, such as care workers. The emphasis of embedding care technology into our homecare model is instrumental in ensuring the safety of our most vulnerable residents.

Framework providers and their care workers will be required to support residents to use technology to support independent living, alongside or as an embedded part of care delivery. Care technology can sometimes wrongly be deemed as a mechanism to replace traditional care; however, it provides added security to promote independence, especially when a resident is alone.

## Summary

Our new home care service model will aim to be preventative and responsive with a strong reablement ethos at the heart of how care is delivered. Framework providers will be required to help our residents safely maintain their independence, health and well-being - to remain at home for longer. Residents will receive care that is person-centred and able to meet the diverse needs of our residents.

A Good CQC rating will become the minimum expectation for homecare providers, with the Council encouraging providers to aim for an **Outstanding** rating over the coming years.

## Market Opportunities

- Tender for a new framework of homecare providers in early 2025
- Aiming to commission providers who work towards achieving an Outstanding CQC rating
- Promoting a reablement ethos, supporting residents to regain skills and maximise independence. Keeping people in their own homes for as long as possible.
- Increased use of technology to make service efficiencies
- Embed care technology as part of how the needs of residents are met. Staff are confident in using this.
- Work in localities – supporting partnership working in neighborhoods
- Focused on prevention and partnership working with residents
- More learning and development opportunities for care workers
- Supporting hospital discharge and integration work

# Reablement

The Reablement service is a therapy-based service that supports Barking and Dagenham's commitment to ensuring our residents are given strengths-based, person-centred support to regain their skills (or gain new/alternative skills) and confidence to enable them to continue living independently (or with minimal support) and safely in their own homes, for as long as possible.

The service uses a variety of interventions and residents are supported by physiotherapists, occupational therapists and therapy assistants to achieve independent lives.

In 2023/2024 only 44% of local residents who received a short-term service were able to continue living in their own homes independently, without any immediate care and support, compared to a London average of 75%. To improve this a therapy-led Reablement pilot was carried out from April to September 2024 which saw 81% of residents being able to continue living in their own homes independently.

Following this learning, the borough recently commissioned a therapy-based reablement service, focussed on supporting residents to recover from an incident/crisis in their lives, and bring them back to their previous level of independence. This is a short-term, usually free, therapeutic intervention for residents assessed as having the potential for some level of recovery or reduction in their level of dependency.

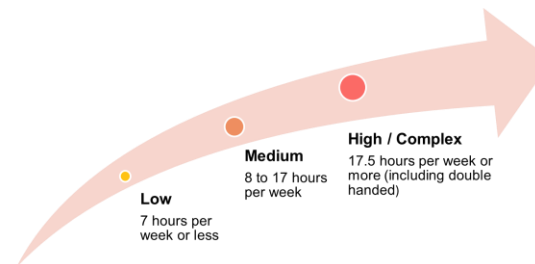
Our Reablement service is designed to prevent/delay long-term care needs, be proactive towards helping residents to regain and retain their independence and promote independence.

Some of the key objectives of the Reablement service are:

- enabling residents to remain living independently in their usual place of residence
- empowering residents to regain the confidence to live the life they want outside of the care system, or with the minimum level of support they need
- provide residents with the confidence to re-engage with a life outside of their home and reconnect with their network of friends
- reduce the risk of hospital admissions for residents
- deliver outcome-focused interventions that prevent and reduce the need for long-term care and support

The Reablement service is provided by a single provider with a Good CQC rating and our ambition is that they reach Outstanding during the life of the contract.

The service is able to support a variety of support needs as shown below.



**The Council sees Reablement as a statutory duty to maximise independence, it also assists in achieving the Council's priorities:**

### ***Residents are safe, protected, and supported at their most vulnerable***

A strengths-based, person-centred support plan is created for eligible residents, specifying agreed goals and outcomes, with a view of how they will be achieved. This ensures residents are safe, protected and supported at their most vulnerable. All Reablement services are provided by a single provider with a Good CQC rating, and the Council's Provider Quality and Improvement Team also regularly assess the provider to ensure continued good quality of care.

### ***Residents live healthier, happier, independent lives for longer***

Residents identify what is important to them, and from that, a set of goals and outcomes are agreed on. Working together and collaboratively with residents is key to helping with healthier, happier and lives - maximising independence.

### ***Reablement Ethos***

The Council has adopted a Reablement ethos across Adults Social Care.

This means that all care providers must follow the underlying principles of Reablement and continuously work to support our residents **to live as independently and safely as possible in their own homes, for as long as possible.**

## Data

During a Reablement pilot from April 2024 to September 2024:

- 92 residents received a Reablement service, with 77% not requiring long-term support at the end of the service
- Those that did require long-term care following a Reablement service, required a slightly lower amount of care compared to an average long-term homecare package

## Market Opportunities

- Homecare providers upskilled to meet care needs whilst enabling independence
- All care providers having reablement experience, allowing for more providers to bid for future Reablement tenders

# Residential & Nursing Care Homes

Barking and Dagenham is committed to ensuring our residents receive good quality care, providing a "Home from Home" feeling.

## Older People (65+)

Barking and Dagenham has 10 care homes for older adults, a small number compared to some of our neighbouring boroughs. 9 of these care homes are privately run and 1 is owned by the Council. We currently have a total of 509 beds across residential and nursing care within our borough.

### Data Snapshot in September 2024:

- **54% of all residential care placements were in the borough**
- **63% of all nursing care placements were in the borough**
- **65% of out-of-borough placements located in Havering and Redbridge**

Many out-of-borough placements in the last financial year were due to the closure of Chaseview Care Home which resulted in the loss of 120 local beds. We aim to keep people local, near their families. Whilst the of out-of-borough placements are within the northeast London region, we also continuously consider the choice of our residents which sometimes results in placements throughout the country.

## Choice & Control

The Care Act 2014 emphasises residents having choice and control of their care. The Council therefore continues to consider the choice of our residents, ensuring residents moving out of their homes to receive long-term care, are given the choice and control of where they are moving to, within reason. This sometimes involves the Council placing residents in care homes across the country to ensure they are as close as possible to their family and friends. Local analysis however suggests that most people prefer local placements, requiring the Council to **ensure there is sufficient capacity for placements within our borough.**

## Care Quality Commission (CQC)

**Currently, all open residential and nursing homes for older adults in Barking and Dagenham have a Good CQC rating of which we are proud.** We want to ensure that we continue to place our residents in care homes with at least a Good CQC rating and would like our providers to start aiming for an Outstanding CQC rating.

## 65+ Benchmark Rates

The five-year period from 2018/2019 to 2022/2023 saw our benchmark rates increasing by 17.8%, however following the Fair Cost of Care exercise, our benchmark rates since 2022/2023 (only a two-year period) have increased by 22.25%. This shows Barking and Dagenham's commitment to ensure both provider sustainability and profitability.

We continuously consider our local market, having discussions with a variety of stakeholders and constantly modelling our uplift approach for each financial year to take into account many variables such as the rates for new and existing placements, inflation, demand, local capacity, quality, national living wage and the Council's ability to afford and sustain any uplifts given the funding received by Government, whilst also having open discussions with our local providers to ensure continued sustainability.

### 2024/2025 Benchmark Rates:

Residential	£835.00 per week
Nursing	£850.00 per week + NHS FNC

We are expected to introduce new mechanisms in 2025/2026 to control, negotiate and understand the rates required by care homes, for example, a new "Increased Cost Form" will be implemented for complex needs to substantiate placement fees.

## Learning Disabilities / Mental Health

Barking and Dagenham have 9 care homes offering 71 placements for people with learning disabilities and 3 care homes offering 22 placements for people with mental health concerns. All homes are delivered by external providers.

All are rated good by CQC. These tend to be smaller settings. The ethos of independence is highly encouraged and we do try to utilise the supported living sector for most residents first.

## Data

- **Between 2021 and 2024, LBBD have had a total of 477 older adult (65+) admissions into Care Homes – 51% residential and 49% nursing**
- **40% of admissions represent the 85+ age group at the time of admission.**
- **38% of admissions are accessed via the community route**
- **Our council-owned care home, Kallar Lodge has a steady occupancy rate at 95% (November 2024 snapshot)**
- **As we support people to stay living at home longer, people who move to care homes are likely to have more complex needs.**
- **The older population is set to grow over the next 10 years.**

# Residential & Nursing Care Homes (2)

## Resident Feedback

*"Staff are so lovely, caring, approachable and the home has a family atmosphere. The family feel lucky she is living here as her quality of life is much improved, she was bored at home and also due to early onset dementia, she was not eating nutritional meals. Access to Nourish means we know what is going on and what food is eaten"*

(Daughter of a Resident at George Brooker House)

## Care Technology & Equipment

In 2025/2026, the Council will be reviewing the standard specialist equipment our in-borough care homes should have, to ensure the needs of our residents can be safely met using the appropriate equipment. This will enable our residents to have greater independence, especially with decreased mobility and health complications. The right equipment helps ease any discomfort and ensure physical and mental well-being.

The Council also encourages the use of assistive care technology solutions in our Residential and Nursing Homes. The use of modern care does not replace the much-needed human interactions of carers but can help support a person-centred service and improve the lives of our residents in care homes, whilst also assisting care providers with the delivery of care that supports both residents and staff. This can be further enhanced by care homes adopting digital solutions to make efficiencies in their services.

## Care Home Engagement

We are in constant contact with our in-borough care homes through quarterly Care Home Forums, bi-annually All Provider Forum and our Provider Quality & Improvement Team, giving our providers an open line of communication with local Commissioners.

## Northeast London (NEL) Partnership

The Council is working closely with our counterparts across Northeast London, and have jointly commissioned Care Analytics, to better understand local markets, including the complicated costings involved with care homes. This work is expected to standardise our approach to high-cost placements including suggestions for staffing models and managing complexity.

## Reducing requests for 1:1 support

The Council would like to work closely with our providers to understand the requests for high volumes 1:1 care and assess how support to residents can be better facilitated with less restrictive methods.

Again, utilising care technology, exploring staffing models and training and working in partnership with be a key to this work. Achieving models of care which offer best value and the least restrictive option for residents is key.

## Block Booking

The Council is open to block booking beds at care homes that accept our benchmark rates.

## Local Context

The Community and Hospital Assessment Team are continuing to support people to leave hospital in a timely and safe manner. The people they are supporting are presenting with increasingly complex needs and some are experiencing behaviours that may be challenging or require additional or different levels of support to maintain their safety and wellbeing. Creative and effective solutions to support these needs are welcome.

## Key Messages

- While our ambition is to keep people at home, we do place 3 residents a week
- Need more responsive & local placements
- Focus on higher needs including supporting people with dementia
- Building confidence in staff with dealing with challenging behaviours
- Supporting the hospital discharge process, including weekend discharge and trusted assessors
- Increasing use of care technology / equipment
- Market opportunity – care homes accepting benchmark can enter block booking arrangements

# Extra Care Housing

**Barking and Dagenham is committed to ensuring that our residents can remain living independently in the local community, with the care and support they need to continue living as safely as possible, for as long as possible.**

There are four Extra Care Housing schemes in Barking and Dagenham:

Extra Care Scheme	Number of Units
Colin Pond Court	36 flats
Darcy House	36 flats & 16 bungalows
Fred Tibble Court	31 flats
Harp House	31 flats

The above schemes consist of 150 housing units all maintained by Anchor Hanover Housing Association. These provide residents who are 55 years of age and over with self-contained homes with design features and support services available to enable self-care and independent living.

Residents within the schemes enjoy independence with the knowledge that a care provider is on site around the clock. Alongside provision of care, Extra Care schemes provide an opportunity to engage with other residents through well-being activities including in the communal lounges as well as reducing social isolation, a key contributor to negative health outcomes.

The Council works continuously with both the service provider and social housing landlord to support our resident and improve outcomes.

**All care and support, including wellbeing activities, provided at any of our Extra Care schemes are delivered by a single provider with a Good CQC rating.**

Activities are co-produced with residents to cater for their varying needs and interests.

## Support needs

Our Extra Care scheme can support people with varying support ranging from low to high level complex needs, including double-handed care and end of life care. The Council is committed to supporting older residents with varying support needs including learning disabilities and mental health within the Extra Care schemes in a safe and sustainable manner.

## Extra Care Interim Flats

Several units within our Extra Care schemes have been earmarked as interim flats to support hospital discharge for those people that may need support in the community before returning home.

This enables the Council to reduce pressure for local hospitals as well as provides an opportunity for residents to be supported back to independence through appropriate care arrangements. Some residents may then decide to move into Extra Care accommodation as a longer term option for themselves. Most referrals into this service are made through social care and housing professionals and admission is controlled through a panel process.

A further innovation, is using the flats in low season, to for respite care and to provide carers with a break.

## What we would like to see moving forward

The Extra Care schemes are ideally placed to act as a Hub for Older People both within the schemes and the wider community.

Providers are encouraged to work with the care provider and the landlord to access external funding and deliver activities on site in line with the Council's priorities including, residents live healthier, happier, independent lives for longer and residents are safe, protected, and supported at their most vulnerable.

Examples of projects could include but are not limited to intergenerational projects, social gatherings and other activities to support independence and well-being and to reduce social isolation

## Market Opportunities

We are committed to supporting people to be independent and maximise independence through strengths-based support in a vibrant community with co-produced activities.

- Commissioning review due in 2026, with retender activity planned for 2027
- Development of further community-wide wellbeing activities, and to develop hubs for older people from the wider community to access activities, reduce isolation and promote wellbeing
- Work with provider and landlord to deliver wellbeing activities from schemes
- More accommodation to meet the needs of clients with particular needs including learning disabilities and mental health

# Carers

**Barking and Dagenham recognises unpaid/informal carers and appreciate their valuable contribution to the health and social care economy through the support they provide to family members, friends and neighbours.**

We have commissioned a dedicated service to support Carers through the provision of information, advice and guidance. This includes access to employment and volunteering opportunities as well as maximising income.

We have a series of peer support groups to help carers to build their networks, providing sharing and learning opportunities and a safe space to talk about the challenges they face. For example, we have groups that target residents from global majority heritages and other cohorts of the community to provide a culturally competent service.

Carers are also supported by Adult Social Care through a carers assessment and provided further support based on their needs.

Alongside Adult Carers, Young Carers are also supported through a different contract.

The borough is also part of a (NEL) wider hospital discharge project that is due to start in February 2025. This is designed to support the identification of carers not known to services (hidden carers) and enable them to access relevant support.

## Identifying Hidden Carers

The Council, in partnership with Carers of Barking and Dagenham and the Integrated Care Board (ICB) have developed a training package that is delivered to local partners to support with identifying hidden carers, (those not known to services). This helps the local partner workforce to understand the impact the caring role has on carers, and how to signpost carers to the commissioned service and reduce opportunity losses through timely information, advice and support.

Alongside this, a support worker will work as part of 8 workers across NEL to identify carers in the hospital settings and signpost them to support services as part of an Accelerated Reform Funding. This is a 1 year pilot.

- **In 2023/24 there were 301 Carers Assessments were completed.**

## Future Needs

Eligible carers can receive a **direct payment** to support them in their caring role.

The Council is looking to develop the carers market and support carers to utilise this payment to support them in maintaining their caring role. For example, opportunities for carers to access and take up activities that provide them with a break from their caring role.

In partnership with the Carer's strategic group, providers are encouraged to stimulate the carers market by actively seeking out opportunities for external grants and awards (e.g. charitable foundations) to further support carers in the borough.

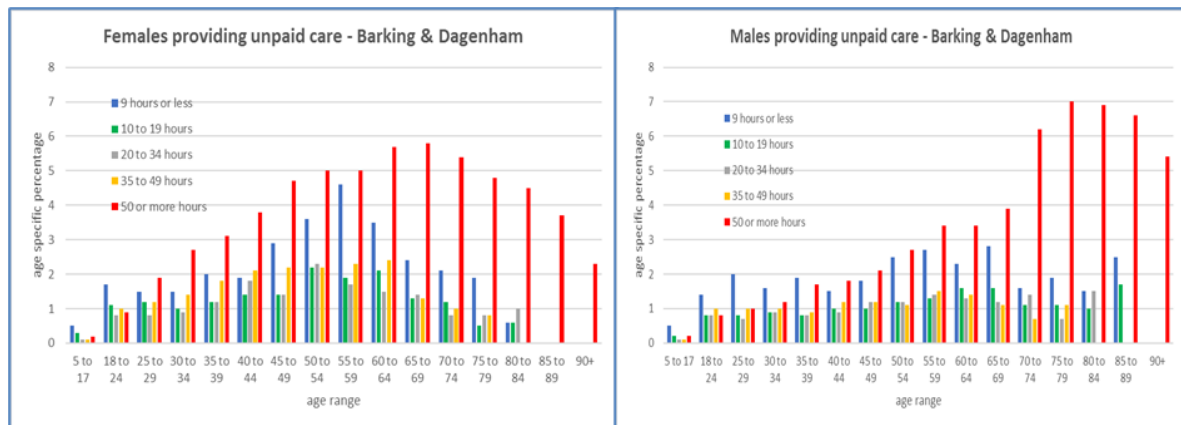
## Market Opportunities

- **Providers are encouraged to develop their offer to carers eligible for direct payments to support them in their caring roles.**
- **Procurement of new Carers service - – focus to include on looking at how we support carers from diverse backgrounds including addressing health inequalities.**
- **New Contract due in early 2026. Tender active in 2025. Aiming for a 6-year contract (4+2) to incorporate the following:**
- **Learning from our pilot of a carers navigator in hospital settings to support discharges and identifying carers earlier**
- **Reviewing whether to include care assessments in the core contract**
- **Developing more positive activities, respite and work opportunities for carers**
- **Refresh of the Carers Charter to inform future provision**

# Carers – Data

## Census 2021

According to Census 2021, there are 14,224 people identified as carers in Barking and Dagenham. The below images show the breakdown of carers including the gender, hours of care and age.



## Provision of unpaid care

**Barking and Dagenham** (London)

Provides no unpaid care **92.9%** (92.8%)

Provides 19 hours or less unpaid care a week **2.7%** (3.6%)

Provides 20 to 49 hours unpaid care a week **2.0%** (1.7%)

Provides 50 or more hours unpaid care a week **2.3%** (2.0%)

% of people aged five years and over

## Carers Survey

Below is some high-level information from the Carers Survey

	2016-17	2018-19	2021-22	2023-24	DoT
<b>QUALITY OF LIFE</b>					
I'm able to spend my time as I want, doing things I value or enjoy	22.1	22.5	18.8	16	
I have as much control over my daily life as I want	26.6	28.2	25	24	
I look after myself	50.9	47.7	48	40.6	
I have no worries about my personal safety	80.9	82	81.6	75.9	
I have as much social contact as I want with people I like	34.2	33.7	28.3	33.5	
I feel I have encouragement and support	34	30	27.4	29.6	

	2016-17	2018-19	2021-22	2023-24	DoT
<b>TIME SPENT CARING</b>					
Caring for 100 or more hours per week	31.5	31.7	26.5	40	
Caring for over 10 years or more	44.9	33.8	39.4	46.8	
I'm able to spend my time as I want, doing things I value or enjoy	22.1	22.5	18.8	16	

## Key Messages

- The number of carers is likely to increase in the future, including those with their own health and wellbeing needs.
- Access to *Hidden Carers* training for all partners in the Borough and bringing Carers to the forefront of service delivery, thereby reducing health inequalities and opportunity losses through maximising income, access to employment, volunteering and education.
- Closer partnership working with all local stakeholders to make the London Borough of Barking and Dagenham a Carer Friendly Community facilitated by the Carers Strategic Group.
- Working closer with the Care Tech offer to support informal carers in their caring role.

# Our Carers Charter



## Carers Charter 2022-25

This Carers Charter has been developed with unpaid carers in Barking and Dagenham who provide valuable support to loved ones. The charter outlines the commitment to carers across the borough including our partners and how we will help them in their caring role.



### Working together for carers

1. I have help at an early stage.
2. I want friendly professionals who understand my role as a carer and listen to me.
3. I am recognised as an expert and equal partner of care with my views and opinions valued and respected.
4. I want to access a range of support, including breaks from my caring responsibilities, to help me live my life and continue to carry on with my caring role.



### Carers wellbeing and employment

1. I have access to information and advice to help me look after my own mental and physical health.
2. I can access an effective response from health and social care to address changes in my loved ones needs, for instance increase in care package so that I can return to work quickly.
3. I am supported to maximise my income including accessing benefits.
4. I am supported with my caring responsibilities so that I can continue to work or study.



### Supporting young carers

1. I can attend carers support groups and activities with young carers that understand what I am going through.
2. I can access help to support me with my mental health and wellbeing.
3. I am able to focus on my future and my studies without impacting on my caring role, including university, training, apprenticeships and employment options.
4. My school or college understands my caring role and I feel supported.



### Carers in the wider community

1. I recognise I may need help both in my caring role and in maintaining my own health and well-being.
2. I can access a carers needs assessment when I need it.
3. I want to be able to find out information about what services are available in the community.
4. Information is shared with me and other professionals to raise awareness and signposted appropriately.

# Direct Payments

**Barking and Dagenham is committed to ensuring our residents have greater control and flexibility on how their care and support needs are met, with almost 30% of all adult community care recipients currently receiving a Direct Payment (DP).**

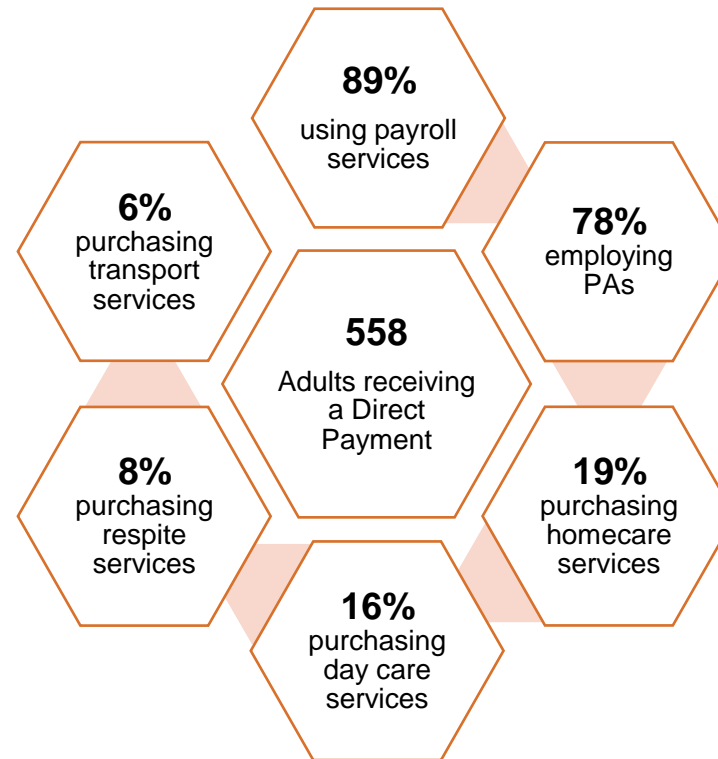
To encourage the use of DPs and to empower our residents to self-purchase the services they need to meet their needs, the Council commissions a range of support services for its residents:

- **Payroll Providers** – to help manage DP budgets, receiving DPs on behalf of residents and paying Personal Assistants (PAs) and/or invoices for care and support services.
- **Direct Payment Support Service (DPSS)** – to provide information, advice, guidance and hands-on support on all aspects of a resident's DP journey. Our DPSS provider heavily supports residents in recruiting PAs, helping to find suitable PAs, carrying out Right to Work and DBS checks, drafting contracts of employment and more. In addition to this, in 2024/2025, our DPSS provider has been commissioned to work with existing DP recipients who employ PAs, to ensure they are compliant with their legal responsibilities. The Council is committed in ensuring that using a DP and being an employer is not a burden on our residents, and our DPSS provider supports residents in becoming fully compliant employers. Whilst these reviews aim to protect residents, it also ensures that public funds are spent lawfully.
- **Nominated and Authorised Person Service (NAPS)** – to assume the role of a Nominated or Authorised Person as a contingency measure for if or when a resident is unable to continue managing their DP themselves. This helps to protect our residents' existing care arrangement, ensuring service continues to be provided as initially planned by residents.

The London Borough of Barking and Dagenham is committed to support our PA market, and since April 2023 have ensured that all PAs caring for adult DP recipients are paid at least the **London Living Wage (LLW)**.

**Data:**

*January 2025*



## Market Opportunities

- The Council welcome a large, diverse market of Personal Assistants to support people with their assessed needs
- The Direct Payments Support Service will be out for tender by 2027
- We encourage carers to make use of direct payments to support their needs and this could be an area of growth – particularly for those providers who are willing to do their own research into what is wanted

# Care Technology

## Summary of the service

- The Care Technology Programme in Barking and Dagenham aims to promote digital or smart devices and services to support people to achieve greater independence and the self-management of a person's health and wellbeing. Due to its beneficial characteristics of easy accessibility, convenience, choice and control, individuals can live a life with an improved quality of life.
- As part of the programme, the available Care Technology services range from a 24/7 Emergency Call Centre, welfare check calls, a local team of responders, devices to meet an individual's personal needs. (This includes the installation, maintenance, collection and support in using the device by our Care Technology provider).
- Further, the range of digital devices is varied and includes a video carephone, falls button, smartwatch, radar sensor, Amazon Alexa, motion sensors, door sensors, digital bed and chair mats and an epileptic seizure alarm.

## This is a new services and so far we have:

- 1.2k referrals since September 2023
- 795 clients in sheltered housing using the 24/7 responder service
- More than 98% positive customer feedback
- Service mainly reaching those contacting Intake team, hospital discharge and some adults social care clients.
- More work to do in reaching a wider community base including people with mental health concerns and people with learning disabilities
- Started to capture the financial benefits

## How the service needs to evolve

- For every social care recipient to have been given or offered care technology as part of the care package to support them to maintain their independence for longer
- For the service to be the first consideration for prevention and at front door services, in turn, reducing the demand and delaying the need for care
- Constant review and updating of tech used within the service, in line with the evolving development of the AI and digital world

## Market Opportunities:

Barking and Dagenham is leading the way in supporting the use of technology to support care

Tendering the care technology contract in the next year – aiming for a new service in 2026. Seeking innovative delivery partner to help us achieve our ambitions for residents

Recent pilot of home technology demonstrator with homecare providers – findings will be shared to help inform tender

More work across the wider care sector to think about how care technology can support service users to stay independent

# Equipment and Adaptations

## Summary of service

- In supporting people to remain independent, the Council provide over 2000 types of equipment and adaptations for older and disabled people. This ranges from the installation of a wheelchair ramp, additional handrails or a stair lift – all to encourage further independence in a safer home.
- Whilst equipment is provided to residents who need it, adaptations are means-tested by occupational therapists. These services can be supported further through schemes which are designed to provide further services to eligible persons. This includes the Handyperson scheme, which is designed for the completion of small jobs such as moving furniture, gardening and reducing hazards around the home.
- Moreover, Disabled Facilities Grants for eligible persons are available to make changes around the home. Tasks such as widening doors, ramp/grab rail installations, level access showers or improving access to rooms and facilities within the home can be supported via the grant.
- On average, 600 units of equipment are installed per month.
- On average, 200 units of equipment are recycled and reissued.

## Future requirements

- More collaboration between adult social care, health services, and occupational therapists would ensure that equipment provision is part of a broader care package. This could include:
  - Ensuring assessments for equipment are part of holistic care plans during social care reviews.
  - Coordinating equipment provision with personal care
  - Facilitating joint assessments between social workers and healthcare professionals to streamline decision-making.
- Identifying needs earlier through regular check-ins and improved monitoring individuals in vulnerable or at-risk categories.
- Including disability equipment as part of early intervention strategies to prevent deterioration of health or loss of independence.
- Incorporating equipment assessments into hospital discharge processes, ensuring that people returning home after illness or injury have the equipment they need for safe living.
- Adapting the service to be more person-centred, where users have access to tailored equipment based on their individual needs. Offering flexibility in choosing equipment models or modifications that better fit the lifestyle and condition of the user.

## Key Messages:

- We have a range of grants and schemes in place helps to ensure the safety of individuals at home, effectively reducing pressures on social care and health services overtime.
- A good proportion of equipment is being recycled and resissued – this has both financial and environmental benefits.
- Collaboration between Equipment service and Adult Social Care, health services and occupational therapists is essential for fulfilling individuals' needs in a streamlined fashion.

# Better Care Fund Plan and Future Opportunities

Barking and Dagenham Council work closely with the NHS, primarily the Integrated Care Board, and other community and voluntary sector partners to improve the experience of residents going through the health and social care system, particularly when residents are being discharged from hospital and need social care support, often for the first time. One of the programmes that supports this integration work between health and social care is the Better Care Fund (BCF). This is a programme which spans both the NHS and Local Government and seeks to join-up health and care services to meet two key objectives:

- How we support people to receive the right care in the right place at the right time.
- How we support people to remain independent for longer and, where possible, support them to remain in their own home.

The Better Care Fund for Barking and Dagenham is £36million. Every year the local authority and the Integrated Care Board (ICB) have to submit a joint plan to NHS England detailing how the money will be spent and a partnership arrangement called a Section 75 governs the arrangement and the funding. The Programme reports into Place-based health and social care arrangements within Barking and Dagenham as well as the Health and Wellbeing Board. The joint funding pays for lots of different services and projects including home care, residential care, reablement, the integrated hospital discharge service, community health services, mental health support and learning disability placements. A number of the plans for these services are covered elsewhere in this document. A number of innovative services are also funded such as the care technology service, the Connect social isolation project, the Home Settle and Support service, the Carers service, the Trusted Assessor service, the Handypersons service and the Care Provider Voice contract. The local authority and the ICB commission these services either separately or jointly.

Over the next 12 months the local authority and the ICB will be looking to strengthen integrated commissioning, governance and planning for the Better Care Fund and will look to strengthen partnerships with providers and the voluntary and community sector. The local authority and the ICB are always interested in welcoming innovative ideas regarding hospital discharge and integrated working from providers. A number of services will be reviewed and recommissioned over the next 12 months including the Carers service and the Home, Settle and Support service.

A new BCF plan for 25/26 will soon be drafted with the plan for the next 12 months for the BCF, as well as opportunities. Providers will be invited to be part of the engagement on this plan and can contact the local authority - please see our contact details page.

# Learning Disabilities and Autism

The current financial position for adult social care and healthcare is extremely difficult and we want to work with service providers to find a way of delivering outcomes for people in a sustainable and affordable way. Although we do not anticipate that our direction of travel, as set out below, will change, we may need to revisit our plans as circumstances dictate. We also recognise that it will take time for both the council and its partners to make the changes we believe to be necessary.

Our commissioning intentions support strength-based approaches to enable people to lead the most independent and fulfilling lives. Strength-based approaches focus on what matters to people, what they can do for themselves, and how their abilities can be complemented by help from family, friends, neighbours and technologies to achieve their goals. We will continue to develop the assets available in our communities and ensure that the public and professionals know how to access them, and to utilise strength-based approaches in our Care Act assessments.

We aim to work with providers who can prevent, delay or reduce the development of care and support needs, including unpaid carer support needs, and consolidate our asset-based and outcomes-based commissioning. This is a move from long term residential based care to community based care that maximises independence

We appreciate that this is a challenging time for all involved in meeting people's health and social care needs and recognise and value the creativity, skills and commitment of service providers.

We look forward to working in partnership with you over the next 5 years.

## Overview of the Service

**The Disabled Adults Service supported 722 people in Barking and Dagenham:**

- **180 of those people were supported in community settings and 11 in residential settings**
- **89% of learning-disabled adults were living in settled accommodation**
- **3% of learning-disabled adults were in paid employment**

# Learning Disability and Autism (2)

## Emerging Demand

- We are seeing an increase in the numbers of people being assessed and diagnosed with Autism, some of whom will require support from health and/or social care.
- There is an increase in the numbers of people with a dual diagnosis, and in the numbers of people with challenging behaviours.
- There is a need for additional outreach and floating support to enable people to live in their own homes, maximising their independent life skills and access to the community.
- Support for people with a learning disability comorbid mental ill-health needs – particularly around prevention of hospital admission
- People with acquired brain injuries – particularly younger adults affected by strokes.
- People with profound and multiple learning disabilities.
- Physically disabled people.
- People with positive behaviour support needs including access to emergency services for people in crisis or whose care has broken down as an alternative to mental health assessment treatment units.

## Commissioning Intentions

- While we expect generic residential and supported living services to reduce, we need more specialist services that can support plus size people, people with higher levels of need, people with complex health and profound and multiple disabilities. There is a particular gap in supported living provision for people with autism, Acquired Brain injury, and behaviours that may challenge. We are seeking providers that have sound-proofed supported living for service users that become dysregulated when over stimulated.
- We would like to see services consider offering short term respite, assessment or temporary stays, alongside long-term placements, and we are working with older people's services to develop pathways for people with physical and learning disabilities where frailty becomes a primary need. We want to secure more options for independent, move-on accommodation for learning disabilities.
- We want to develop our existing supported accommodation offer to support and address more complex needs.
- We want to ensure we have sufficient short-term intervention services.
- We intend to improve the pathway for people with learning disabilities and/or autism to have a range of social opportunities to reduce social isolation. This could be done as across borough boundaries or in partnership with other providers.

## Market Opportunities

- **Supported Living retender – block and spot purchases for residents with a Learning Disability and / or Autism**
- **Day services for young adults**
- **Services for young people with profound and complex ASD transitioning to adult services**
- **Services for residents who have complex medical needs**
- **Specialist community based floating support**

# Day Services

- Day opportunities services are designed to support adults with disabilities, which includes learning disabilities, autism, mental health, physical and sensory issues, older people and those with dual diagnosis and complex needs.
- The main focus of the service is for residents to learn new skills, be work ready, and increase their independence and confidence – as well as enabling a break for unpaid carers.
- The Council also provides an in-house day centre service, for service users with autism and/ or learning disability.
- Within Barking and Dagenham there are a range of day opportunities offering interventions which are linked to outcomes, such as employment, gardening, cookery, travel training, friendship groups and cycling.
- Within Barking and Dagenham, the offer to service users is a hybrid model of building-based and community-based activities and interventions. However, there is no flexible progression pathways built into support plans where the outcomes are monitored and once achieved, service users can move onto alternative provision.

## Commissioning Intentions

Commissioners are developing a framework which will be go out to tender 25/26.

The Council would encourage providers to offer a mixture of:

- Travel Training for Adults
- Virtual interventions
- Support at home
- Building Based
- Community-Based
- Specialist Services
- Employment Support
- Evening and Weekend provision
- Sessional Activities
- Seven days per week services Personal Assistants

The tender will be coproduced with service users and their families / carers.

## Market Opportunities 25/26

- **Framework to support positive activities including:**
- **Support for young people transitioning to Adult Social care**
- **Group social activities that reduce social isolation**
- **Evening and weekend activities**
- **Specialist support for complex medical need and/ or complex ASD**

# Shared Lives

- Barking & Dagenham is committed to growing its Shared Lives scheme. Shared Lives offers long-term and short-term placements, respite and home from hospital provision for people who need support.
- This includes people with mental health needs, autism spectrum conditions, learning disabilities, physical disabilities and older people. The schemes match someone who needs care with an approved carer. The carer shares their family and community life, and gives care and support to the person with care needs. People sometimes use a shared lives scheme as a way of learning the skills they need to live independently and to help them put down roots in the area or community before moving into a place of their own.
- We have recruited Shared Lives carers following an active recruitment campaign; more needs to be done to meet service user demand.
- The current contract has over six months remaining, and will be re-procured in a timely way.

## Commissioning Intentions

Specific areas to be explored during development of the re-procurement include but are not limited to:

- Increasing the availability of accessible properties available to Shared Lives recipients – as well as Shared Lives Carers.
- Increasing opportunities for Younger Adults (16+)
- Increasing referrals and attachments for individuals with more complex needs
- Increasing the utilisation of the Disabled Facilities Grant to fund home adaptations, enabling continuation of placement(s).
- Embedding Shared Lives into Adult Social Care operations with face-to-face engagement and embedding Shared Lives as a BAU option in placement panels
- Ensuring carers' fees are reviewed and proportionate settlements agreed

## Market Opportunities

- **We think shared lives is an area of growth**
- **We want to commission a provider to significantly increase the number of Shared Lives care packages**
- **Promote the service and encouraging use as a service option.**
- **Focus on the recruitment of new carers to the Shared Lives service.**

# Transitions

We want to support young people, from ages 18 to 24 in Barking and Dagenham to achieve their goals and aspirations, taking a person-centred approach to enable them to reach their full potential.

Our approach to commissioning is asset-based, ensuring young people are supported to engage successfully with their local community and neighbourhood.

We aim to deliver a seamless transition from Children's services to Adult Social Care for young people with a disability, and their families. However, we understand this is not always what young people experience. For the following reasons:

- right support is not always available at the right time for young people and young people can sometimes have to wait for it to become available.
- Services are not always tailored to be attractive or appropriate for young people and don't address the specific issues that impact upon young people.
- That services are not inspirational or creative in maximising independence .
- Services are based on a weekday 9am – 5pm model of care, where as young people want services outside of these times, that are engaging with the wider community, peers which reduces social isolation.
- Lack of respite care which can support families in their caring roles.

## Commissioning Intentions

In order to meet the projected increase in demand the following services will be commissioned, expanded or redeveloped to meet needs in a planned and timely way. in 2025/26.

- More day services are needed for young people in Barking and Dagenham. These should be focused on building independence, life skills and helping young people into employment. They should also be fun, enabling friendships that will reduce social isolation.
- Multi-Disciplinary bespoke packages - We will be working closely with our colleagues in the ICBs to explore with the market how best to procure support for individuals who require bespoke packages of support. Relevant specifications and qualification criteria will be developed as part of this process.
- Support for young people that had an EHCP but do not meet the threshold for Adult Social Care.
- An enhanced Supported Living offer that straddles Ofsted and CQC registrations, so that young people do not have to move placement when they turn 18.
- Specialist support for young people with profound and multiply needs, who may have behaviours that are challenging – this may include working with special schools, clinical teams and families to deliver care.

## Market Opportunities

- **Creation of more day services bespoke to meet the needs of young people, particularly for those with complex behaviours or medical needs**
- **Evening and weekend activities for young people to use direct payments**
- **Work with commissioners to develop support for young people who may not meet Care Act eligibility**
- **Increase the floating support offer to ensure we empower young people to live as independently as they are able**

# Mental Health

## Our vision for mental health social care

1 in 4 people will experience a mental health problem of some kind each year in England, and 1 in 6 people report experiencing a common mental health problem (like anxiety and depression) in any given week in England. Approximately 1 in 8 adults with a mental health problem are receiving some kind of treatment.

Mental health problems are common and can have a significant impact on a person's ability to identify and take up opportunities such as employment; to safeguard or care for themselves and others; and on their physical health and wellbeing. The Covid-19 pandemic had a significant impact on people's wellbeing and mental health in Barking and Dagenham and the full extent of this is still emerging; NHS England anticipates an increase in emotional and mental health problems associated with Covid-19 of up to 40%. But there are also wider inequalities in Barking and Dagenham which the pandemic only exacerbated but did not create.

Many of these people will need some adult social care support. Mental health providers for adults aged 18-64 can be broadly split into two categories:

- Those who provide support in the community, helping to prevent mental health problems escalating and helping those with them to maintain their day to day lives and, sometimes, move towards independence and recovery.
- Those who provide residential / supported living care – this can include psychological input and/or support in growing towards independence and recovery

We are keen to develop and promote local innovative services able to:

- Promote mental health and wellbeing in the broader population
- Improve the range of and access to mental health services
- Achieve national and local policy imperatives
- Deliver good outcomes and improved value.

Adult social care is committed to a collaborative delivery model continuing in future, where social care teams continue to collaborate closely with clinical teams to integrate the care and support services that people need. We believe that by working together, across health, social care, the voluntary sector and with service users and carers, we can more effectively develop and deliver the range of services and interventions that can help to alleviate the impact of mental health problems on individuals, families and communities within the borough.

## Overview of the Service

The Mental Health Service supported 737 people in Barking and Dagenham:

- 360 of those people were supported in community settings and 142 in supported living

# Mental Health (2)

**Early intervention and prevention** - We want to work with communities and organisations who prevent and reduce demand for statutory services, ensuring that people are in receipt of the right level of provision for a time-limited period to enable them to continue living independently.

**Equity of access** - We want to work with providers to tackle inequalities in access to health and social care provision, ensuring people can access support when and how they need it.

**Promoting independence** - Where formal care services are required, commissioners want to work with providers to design interventions that focus on maximising independence and reducing or eliminating the need for long-term service provision. Where people do need longer term services, the focus will still be on enabling the person to retain or regain as much independence as they can while ensuring that they remain safe.

**Personalisation** - We want to give more people choice and control over how they spend their personal budgets by improving our Direct Payments offer and developing a network of micro and local service provision for individuals to purchase, including self-employed care via a direct payment.

**Care close to home** - We want to work with the market to ensure that the care and support on offer within our borough means people do not need to be placed into out-of-borough provision.

**Quality service provision** – we want to work with services that are high quality, deliver value for money, offer choice and deliver the best outcomes for the people of Barking and Dagenham.

- **Commissioning Intentions 2024 -29**
- Opportunities to develop new supported accommodation and floating support schemes; current gaps in the market
  - Support for young people with a complex trauma presentation (aged 16 – 25)
  - Support for those with a dual diagnosis, such as drug and alcohol abuse/mental health.
  - Support for service users leaving the criminal justice estate often with substance misuse, mental health needs and behaviours that challenge
  - Accommodation which is sound proofed for service users who have autism and can become overwhelmed in noisy environments
  - Support for those with complex needs who need 12-24 hours of support/oversight per day, sometimes also with physical health needs
  - Short term specialist floating support to prevent escalation to inpatient care
  - Support for young people transitioning into Adult Social Care

## Market Opportunities

- **Supported Accommodation for young people with complex trauma presentations**
- **Sound proofed supported living for people with ASD and complex MH needs**
- **This may be through a framework or small contracts – tbc**
- **Social opportunities that people can use their Direct Payments to reduce social isolation**

# Supported Living

- Our vision for Supported Living services is for people to live as independently as possible, in the context of their needs, potential and aspirations, and in quality accommodation in their local community. We want people to be supported to reach their goals through enabling support that facilitates living as regular a life as possible.
- Supported living is one component within a spectrum of community-centred care and assistance accessible to individuals with learning disabilities, autism, or mental health support requirements. The level of support offered can fluctuate based on the specific needs of each person, covering from a few hours per week to continuous, round-the-clock assistance.
- We have established a framework of providers who can deliver high quality personalised Supported Living services, supporting an individual's journey towards greater choice, control, and independence. This includes supporting people via progression, recovery, and enablement approaches to reduce their support needs over time.
- The framework will be re tendered 25/26.
- From time to time, where care cannot be sourced from the framework providers, a spot purchase contractual arrangement is used.
- The Council is using Care Cubed with all providers to ensure best value in the commissioning of new care packages.

## Commissioning Intentions 2024 -29

- Opportunities to develop new supported accommodation and floating support schemes; current gaps in the market
  - Support for young people with a complex trauma presentation (aged 16 – 25)
  - Support for those with a dual diagnosis, such as drug and alcohol abuse/mental health.
  - Support for service users leaving the criminal justice estate often with substance misuse, mental health needs and behaviours that challenge
  - Accommodation which is sound proofed for service users who have autism and can become overwhelmed in noisy environments
  - Support for those with complex needs who need 12-24 hours of support/oversight per day, sometimes also with physical health needs
  - Step down accommodation after a period in supported living
  - Strategic partner to manage block contract supported living provision for service users with a learning disability

## Market Opportunities

- **New supported living framework in the next 12 to 18 months**
- **Supported Accommodation for young people with complex trauma presentations**
- **Sound proofed supported living for people with ASD and complex MH needs**
- **Step down accommodation from the criminal justice estate**
- **Strategic Partner to manage 8 block contract supported livings for Learning Disability**
- **Supported living for older LD service users with physical health / dementia needs**

# Voluntary and Community Sector

- Barking & Dagenham has a number of voluntary sector providers that are important in delivering services to local people.
- The Council has a good track record of supporting and working in partnership with the voluntary and community sector. In particular, we value the expertise and insight the sector provides and seek to engage with the local VCS for all of our recommissioning activity as an important stakeholder.
- We are keen to ensure that all commissioning and procurement opportunities are made available to the voluntary and community sector, who are usually well placed from the perspective of being well engaged with local residents and able to offer value for money; and that we encourage collaborative working arrangements.
- We value the role of our voluntary sector and actively invite them to participate in all tendering opportunities.
- Also we recognize the importance of this sector in helping us to reach unmet need and participate in coproduction to support service design.
- In particular some recent examples of collaborative working include the Learning Disabilities and Autism partnership work and subsequent strategy, our Home Settle and Support service commissioning jointly with Havering, Redbridge and the NEL ICB and our specialist service supporting people lacking capacity with their Direct Payments.
- As well as commissioning directly, we actively seek to work in partnership with local voluntary and community providers to support innovation and improved outcomes for local people.

## Market Opportunities

- **All tender opportunities are open to the voluntary and community sector.**
- **The Council welcomes the insights and grass roots connections of community organizations with people.**
- **Commitment to supporting social value in all of our contracts.**
- **Recognition of the important role that this sector plays in supporting some of our more vulnerable residents to access services and to stop social isolation.**

# Coproduction and Engagement

- We strongly believe that coproduction should be at the heart of all that we do, and that we need to improve the ways in which we talk to residents, listen to residents, take on board feedback and design services together.
- Coproduction and engagement success will mean that services are better designed to meet the needs of local communities and ensure that provision is personalized and sustainable – improving the quality of care and wellbeing outcomes.
- We are on a journey of improving our coproduction and engagement strategies and have successfully created a learning disabilities and autism strategy for example. We actively seek out service users voice in the quality review of provision and in the design of new services – for example our recently procured reablement service.
- We want to work with providers who are equally committed to engaging with residents, service users and their carers to improve the quality of provision. We know that many of you will have established relationships with residents and their families and have good access to the local community – work in the heart of community assets and homes.
- Through out tender processes and contract management we will be assessing:
  - how you will promote collaboration and work with us to support and foster more coproduction.
  - Develop a holistic person centred approach which puts the resident at the heart of decision making about 'my care'
  - Support stronger partnerships with between service users, residents and wider community organisations to build empowered communities
  - Develop a more inclusive and responsive system that addresses the complexities
- In Barking and Dagenham, we have adapted the Think Local, Act Personal (TLAP) approach of co-production; using their 'ladder of co-production'. The ladder of co-production describes a series of steps towards full co-production in health and social care. It supports greater understanding of the various steps such as access, inclusion and consultation.
- A good example of where both engagement and co-production played a key role in shaping service delivery is the Carers Charter. The Charter was completely co-designed and produced with carers, managers and frontline practitioners from across social care, health, and the voluntary sector. The aim was to identify what needed to improve and how this would be achieved. An action plan was developed to ensure that what was set out in the Charter was delivered.
- Care providers can play a pivotal role in helping councils engage with residents to co-produce services by acting as bridges between the local government and the community. Here are some ways they can facilitate this process:
  - Building Trust and Relationships
  - Facilitating Communication
  - Encouraging Participation
  - Co-hosting Events or Focus Groups
  - Providing Support to Vulnerable Groups
  - Collecting Feedback
  - Co-designing Services
  - Empowering Residents
- By engaging residents in co-producing services, care providers ensure that services are more aligned with the real needs of the community, while also helping build a more active, involved, and empowered population.

## Commitments

- **Improve the way in which we use data to inform service delivery**
- **Talk to residents through surveys, focus groups and other meaningful ways to design services with residents**
- **To use our coproduction toolkit to guide our work and further develop our commitments in this by including coproduction as a requirements of all commissioned providers**

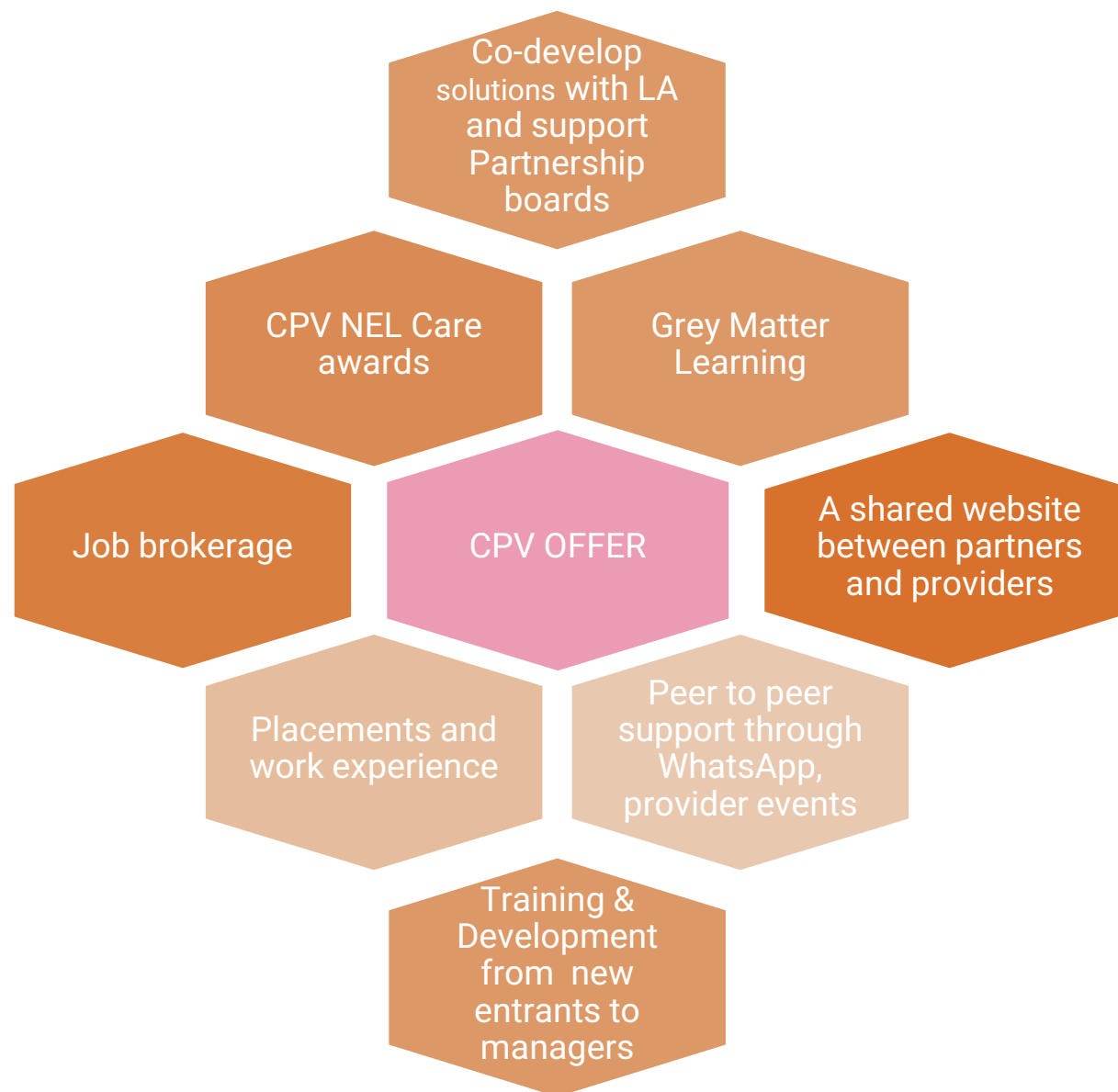
# Care Provider Voice

Together with Redbridge and Havering, we have supported the development of a provider collaborative - Care Provider Voice – to support positive working with providers recognising the vital role they play in our care economy and also that they are our partners.

CPV are a free network connecting all care providers and support collaborative working. Through this network, local providers can access Grey Matters Learning – a training tool available to the local care workforce.

Now Care Provider Voice works across the North East London ICB footprint to support local providers – as outlined in the diagram opposite.

For more information click this link: [Care Providers Voice - By Providers, for Providers](#)



# Inclusive Growth Strategy for the Care Market

- The care sector is a significant employer in Barking and Dagenham. It accounts for 10% of all our employment, providing over 8,000 local jobs and supporting some of our most vulnerable people and their families.
- Yet, the sector is undervalued and underfunded nationally, leading to low pay and insecurity for many care workers.
- Our [Inclusive Growth Strategy 2022-26](#) sets out our overarching plan for economic growth. The strategy is made up of four themes, of which the first is “creating a thriving and inclusive economy”. One of the seven priorities under this theme is to “improve pay, job quality and standards in the care sector” that underpins the work delivered by the local authority in this area. The key objectives are:
  - Developing new approaches to health and social care commissioning that support improvements in pay, job quality and training for care staff and health and wellbeing outcomes for care users;
    - Improving training and career progression in social care to enable these outcomes and improve staff recruitment, engagement and retention;
    - Improving business support to build the capacity, growth and operational competitiveness of ethical, non-profit maximising, and high-quality care providers in the borough;

Work to deliver this has been outlined in the **Social Care Action Plan (2021-2024)**; a plan, developed between the Inclusive Growth and Adult Social Care teams to support improvements in job quality and standards, with a focus on improving staff recruitment, retention and engagement. Despite the Plan coming to end in 2024, Barking and Dagenham continues to address these challenges and business support programmes, funded by UK Shared Prosperity Fund (UKSPF) continue to be offered to Care Providers.

More details on these programmes are available on [B&D opportunities website](#).

## Successes include:

- **Creating more progression routes for care staff**
- **Piloting nursing associates programme in care settings**
- **Exploring opportunities to ‘time-bank’ for staff wishing to balance life and work**
- **Mentoring and training to support care providers – through our partnership with Barking Enterprise College (BEC)**

# Provider Uplifts

## Northeast London (NEL) Partnership

The Council is working closely with the boroughs in Northeast London, and has jointly commissioned analysis, to better understand local markets, including the complicated costings involved with care homes and home care. This work is expected to help us to standardise our approach to commissioning including our thinking about higher-cost placements, including the need for 1:1 care.

The analysis is required to provide a comprehensive review of the commissioning of care home placements. As part of this review, we expect to receive robust cost and price benchmarks for standard care categories, inflation forecasts and recommendations for managing the annual uplift process, and an extensive range of supporting evidence about commissioning and the marketplace.

We are expecting to introduce new mechanisms in 2025/2026 to control, negotiate and understand the rates required by care homes, for example, a new “Increased Cost Form” will be implemented for complex needs to substantiate placement fees.

## Uplift Pressures

We know that there are a number of pressures that our providers are facing, as are we as commissioners of care provision. We acknowledge a variety of factors putting pressure on us all and encourage working in a spirit of transparency and collaboration to address some of the concerns including:

- Increases in National and London Living Wage
- Inflation
- Increase in Employers’ National Insurance Contributions to 15%
- Decrease in Employers’ National Insurance Contributions thresholds
- Insufficient funding from national Government
- Some markets are saturated leading to profit pressures
- Unclear breakdown of costs
- Significant differences in financial business models, *one shoe does not fit all*
- Lowest paid workforce

## Uplifts and requests for contract price increase

We will continue to honour any contractual agreements to uplift tendered contracts.

For non-contractual uplifts, we will continue to provide an uplift to providers that the Council deems to be both affordable for ourselves and sustainable for our providers, working towards affordable and sustainable rates. We will be actively challenging any elements of excess profits and expect all providers to operate with us on open book accounting principles.

Requests for increased costs or increases in care packages must be made in writing through the channels we have advised you of through your contract. We are developing our standards for uplift requests in collaboration with North East London boroughs to support making this easier for providers.

We will seek to benchmark costs for our care placements using intelligence from previous procurement activity, from our neighbouring boroughs and also market rates.

We aim to pay a fair cost of care that supports the sustainability of the business for providers and ensures good quality care for our residents and offering best value for the Council. We aim to adhere to the London Living Wage and Unison Ethical Charter and expect our providers to prioritise the well-being of their staff – and of course our residents - above profit margins.

## CareCubed

The Council reviewed the tools available for costing residential care and selected CareCubed as an evidence-based tool to deliver fair and sustainable costs of care. A secure online tool, CareCubed supports sharing of cases across multiple users within the Council. It is updated annually to cover market and legislative changes, using authoritative data sources including the National Minimum Data Set for Social Care (NMDS-SC). Thus far, we have only applied the tool to placements for adults with learning disabilities; however, we are exploring rolling it out to our mental health cohort next.

## Opportunities

- **Support the Council to achieve best value for residents**
- **Transparent and open negotiation and cost modelling on pricing**
- **Commitment to sustainability for providers as much as possible within envelope given to Council**
- **Use of external tools and greater analysis of markets to support conversations**
- **Responsive social work teams offering assessments and reviews**
- **Collaboration with NEL boroughs to support joined up working**

# Procurement Pipeline

Commissioning Pipeline 2025 onwards																											
Service/Description	Indicative Annual Value	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25	Jan-26	Feb-26	Mar-26	Apr-26	May-26	Jun-26	Jul-26	Aug-26	Sep-26	Oct-26	Nov-26	Dec-26	
Information Database	8.5k	CM	CM	CM	CM	CM	CM	P	DS	BC	TS	CA	CM	CM	CM												
Homecare	£19.1m	DS	BC	TS	TS	TS	TS	TS	CA	Service D	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	
Home, Settle and Support	£63k	DS	DS	DS	DS	DS	DS	BC	TS	TS	TS	TS	M	M	CM												
Handypersons Scheme	£50k	M	M	CM	CM	CM	CM	CM	CM	CM	CM	CM	TS	CA	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	
Care Technology Service	£2.1m	CM	P	DS	DS	DS	DS	DS	BC	TS	TS	TS	CA	M	M	M	M	CM	CM	CM	CM	CM	CM	CM	CM	CM	
Carers Information and Guidance	£176k	DS	DS	BC	TS	TS	TS	TS	TS	TS	CA	M	M	M	M	CM											
Quality Assurance Toolkit	£15k	CM	CM	CM	CM	P	BC	BC	CM	CM	CM	CM	CM	CM	CM	CM											
Disability Access	£8k	CM	P	DS	DS	DS	DS	BC	BC	BC	TS	TS	TS	TS	TS	CA											
Direct Payments Support Service	£110k	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	
Nominated Authorised Person Service	£18k	CM	CM	CM	CM	CM	CM	CM	CM	P	DS	BC	TS	TS	CA	M	M										
Quality Cost Software	£16k	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	
Extra Care Housing	£1.3m	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	
Extra Care based Discharge flats	£45k	P	DS	DS	DS	BC	BC	TS	TS	TS	CA	CM	CM	CM	CM	CM	CM										
Community Equipment	£586k	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	
Disabled Adaptations (Council properties) (DPS)	£1m	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	
Care Development Support	£60k	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM											
DFG Adaptations via Dynamic Purchasing	£1,500,000	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	
Therapy Based Reablement Service	£1.2m	M	M	M	M	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	CM	
Supported Living	tbc																										
Day Services Opportunities	tbc																										
Provision for people with profound needs	tbc																										
Services for complex needs	tbc																										
Specialist Community based floating Support	tbc																										
Pre Paid Cards	tbc																										

LEGEND

Project PID/Overview Kick off

Design Stage -

Business Case Report to Board

Tender Stage

Contract Award Decision Report

Mobilisation Period

Service Delivery & Monitoring

LEGEND	
Project PID/Overview Kick off agreed	PID
Design Stage -	DS
Business Case Report to Board	BC
Tender Stage	TS
Contract Award Decision Report	CA
Mobilisation Period	M
Service Delivery & Monitoring	CM

# How can You get Involved

- Commissioning teams hold a number of Forums for different sectors of the market. These include:
  - Care Home Forum
  - LD Provider Forum
  - LD Partnership Forum
  - Homecare Forum
  - All Provider forum
- If you are not on one of our mailing list and wish to receive an invitation please contact:
  - adult commissioning at [adultcommissioning@lbbd.gov.uk](mailto:adultcommissioning@lbbd.gov.uk)
- We also hold market engagement for most of our tender opportunities.
- Attending these forums helps you connect with peers and develop relationships with other providers – benefits include sharing learning on quality and operational issues or developing partnerships and joint bids where appropriate
- Attending these forums also helps to ensure two way communication between commissioners and local suppliers.
- You may wish to showcase your work or share learning – this is an interactive session designed to help you and to help other providers like you – as well as commissioners and Council staff.
- **Procurement and future tendering opportunities:**
  - You should also ensure you are signed up to our e-tendering portal. Click [here](#) to find out more – and [here](#) about wider opportunities.
  - You may also be interested in the [CQC website](#), if you are interested in becoming a new provider or developing your provision.

## Market Opportunities

- Join CPV (see slide 37) to access free training (Flourish) and support network
- Register with the portals linked to be the first to know about tender opportunities
- Seek to develop your quality and offer through innovating and continuous improvement
- Think customer, think quality, think efficiency, think reablement, think technology
- Engage with our commissioning and quality teams through market engagement events
- Our provider quality team will inspect local providers and offer feedback and direction on how to improve services