

Notice of KEY Executive Decision

Subject Heading:	Permission to procure an Living Well Community Wellness & Empowerment Service
Decision Maker:	Councillor Gillian Ford, Cabinet for Health and Adult Care Services
Cabinet Member:	Councillor Gillian Ford, Cabinet for Health and Adult Care Services
ELT Lead:	Barbara Nicholls, Strategic Director of People
Report Author and contact details:	Sophie Barron sophie.barron@havering.gov.uk
Policy context:	<p>The Adult Social Care and Support Planning Policy states that Havering's vision is:</p> <p>'Supporting excellent outcomes for the people of Havering by helping communities to help themselves and targeting resources and interventions to encourage independence'.</p>
Financial summary:	<p>Total Cost for 3 years + 2 years Contract: £1,061,826.00.</p> <p>The cost will be split funded with health as follows:</p> <p>Year 1 - £200,000.00 (£160,000 LBH / £40,000 ICB) Year 2 - £206,000.00 (£164,800 LBH / £41,200 ICB) Year 3 - £212,180.00 (£169,744 LBH / £42,436 ICB) Year 4 - £218,545.00 (£174,836 LBH / £43,709 ICB) Year 5 - £225,101.00 (£180,081 LBH / £45,020 ICB)</p>

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Reason decision is Key	Yes (a) Expenditure or saving (including anticipated income) of £500,000 or more
Date notice given of intended decision:	7 February 2025
Relevant Overview & Scrutiny Committee:	People's Overview and Scrutiny Sub Committee
Is it an urgent decision?	No
Is this decision exempt from being called-in?	No

The subject matter of this report deals with the following Council Objectives

People - Supporting our residents to stay safe and well **X**

Place - A great place to live, work and enjoy

Resources - Enabling a resident-focused and resilient Council

Part A – Report seeking decision

DETAIL OF THE DECISION REQUESTED AND RECOMMENDED ACTION

This decision paper is seeking permission to procure a Living Well Community Wellness & Empowerment Service. The contract will run from the 1st February 2026 to 31st January 2029 with the option to extend for a further 2 years at a total value of £1,061,826.00. Officers intend to undertake an open tender to appoint a provider to deliver the Living Well Community Wellness & Empowerment Service.

AUTHORITY UNDER WHICH DECISION IS MADE

The Havering Constitution:

Part 3: Responsibility for Functions, Article 2 – Executive Functions

Each Cabinet Member, as appropriate, may be delegated one or more of the following functions, within the portfolio allocated to him or her by the Leader. If a Cabinet Member is unable to act, the Leader may act on his or her behalf, or may authorise another Cabinet Member to do so. Matters delegated to individual Cabinet Members under this section give them individual decision making powers. Where any paragraph refers to 'in conjunction with' or 'in consultation with' the decision remains that of the Cabinet Member.

3.8 - To approve the commencement of the tender process, to award contracts, agree extensions of contract terms where the value of such matter is between £1,000,000 and £2,000,000 subject to consultation with the Strategic Director of Resources. (Note: Pension Committee has powers to invite tenders and award contracts for investment matters within their terms of reference).

STATEMENT OF THE REASONS FOR THE DECISION

The Mental Health Prevention Service and Physical & Sensory Disabilities Service both end on the 31st January 2026 and Floating Support Service ends on the 31st July 2026.

This paper is seeking permission to procure a Living Well Community Wellness & Empowerment Service which will combine the elements of the current services to establish a single prevention contract. The contract will run from the 1st February 2026 to 31st January 2029 with the option to extend for a further 2 years at a total value of £1,061,826.00.

We want to take this opportunity to adapt and improve our support for residents by considering a collaborative approach to commissioning prevention services to enhance community health and wellbeing. We aim to establish future services as community-based initiatives, utilising venues across the borough and collaborating with various organisations to offer holistic and coordinated support to our residents.

Our vision is to create an integrated and holistic approach to adult social care that prioritizes the well-being of individuals and communities alike. By championing proactive health measures and fostering a culture of collective responsibility, we aim to empower every individual to achieve their fullest potential in health and life.

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We envision a future where preventative services are at the heart of adult social care, promoting not only the physical health but also the emotional, social, and mental well-being of all adults. Our dedication to community well-being means working collaboratively with individuals, families, organizations, residents, the voluntary sector, and community providers to build supportive environments that nurture and sustain health across all life stages.

Through education, innovation, and compassionate care, we strive to inspire a sense of empowerment and self-determination in those we serve. Our services will be designed with input from residents, ensuring that the care we provide truly meets their needs and preferences. By partnering with voluntary sector and community providers, we aim to deliver services across the borough effectively. Together, we can create a resilient and thriving community where everyone has the opportunity to live a healthy, fulfilling life.

Background

LBH currently commission a range of prevention services for adults including Mental Health Prevention Service, Physical & Sensory Disabilities Service and Floating Support Service.

The Mental Health Prevention Service, delivered by MIND in Havering, supports individuals with mental health difficulties by improving wellbeing, sustainability, and social inclusion. This service includes counselling, support groups, and workshops aimed at enhancing mental health resilience and reducing the impact of mental health issues. By providing early intervention and continuous support, it helps to prevent the escalation of mental health problems and the need for more intensive care. Benefits for residents include increased mental health stability, improved coping mechanisms, and greater social inclusion.

The Physical and Sensory Disabilities Prevention Service is provided by the Havering Association of People with Disabilities (HAD). This service supports individuals with physical and/or sensory disabilities to better manage their daily lives through one-on-one support and group activities, enhancing independence and quality of life. By promoting self-management and providing adaptive tools, it reduces the dependence on care services. Outcomes for residents include greater independence, improved daily functioning, and enhanced quality of life.

Peabody's Floating Support Service provides housing-related support to vulnerable adults aged 16 and older, helping them maintain independence and prevent costly care interventions. This service maximizes existing, and community resources and fulfils the Council's duties under the Care Act 2014 to help vulnerable people remain safe in the community. By addressing housing needs and providing support, it delays the need for more intensive care services. Benefits for residents include stable housing, enhanced safety, and maintained independence.

Since the creation of the Havering Place Based Partnership and the Havering Integrated Team in 2024, we have identified several separately commissioned services that are delivering similar support. For example, the NHS commission similar prevention services for those struggling with their mental health. As part of this recommissioning exercise, we now aim to leverage these joint resources to deliver better services, ensuring better value for money for our Havering residents.

Current Issues with Preventative Contracts

The current service offering presents several significant challenges that hinder its effectiveness and accessibility. These challenges not only impact the residents who rely on these services but also strain the overall system, leading to inefficiencies and reduced quality of support. The following points outline some of the key issues with the current service offer:

- Fragmented support: Residents struggle to navigate through the multiple, similar offers delivered by different organisations which causes confusion and frustration. It also leads

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to inconsistent support as different providers have varying approaches and standards, making it difficult to ensure a cohesive and coordinated support system.

- Fixed based services: This approach disproportionately affects vulnerable populations, such as the elderly, disabled or low-income individuals who may already face additional barriers to accessing support. Having services based in a specific location can limit the services effectiveness, preventing them from reaching and adequately serving the entire community.
- Inefficient use of resources: Duplication of services and support results in inefficient use of resources, diverting funds and efforts away from other crucial areas that could benefit the community.
- Reduced quality of services: Strain on individual services to address complex needs and without adequate knowledge, support and coordination, leads to a reduction in the quality of services offered.
- Delays in support: Lack of coordination causes delays in receiving timely support, which can be particularly detrimental in urgent situations or crisis's.

Joint Strategic Needs Assessment

In addition to these issues, our recent Joint Strategic Needs Assessment (JSNA) has highlighted several areas for improvement for our adult population with long term conditions.

Physical, Sensory, Learning Disabilities

In Havering an estimated 38,449 residents reported having a disability in 2021. The neighbourhoods in Havering that have the highest number of households where at least one member is disabled were Hornchurch Marshes, Rush Green and Harold Hill East. The estimated number of people in Havering aged 18-64 with impaired mobility in 2023 is 8,653, equivalent to a rate of 5,463 per 100,000 populations. This rate is significantly higher than the London average (4,945). In 2023, 103 Havering residents aged 18-64 were estimated to have a serious visual impairment, 957 severe hearing loss and 15,443 some hearing loss.

The JSNA suggests that there is better awareness and adjustment in care and information could be improved to meet the needs of people with learning disability and those who communicate differently due to their disability.

Mental Health

In 2017, 15.9% of Havering adults were estimated to have a Common Mental Disorder (CMD), which is below the London's average of 19.3% and similar to the national average (16.9%). In 2023/24, 17% (49,665 people) of GP-registered individuals reported depression or anxiety while 0.8% (2,073 individuals) reported a Severe Mental Illness (SMI). Among GP registrations, adults aged 50-69 have the highest CMD rates, while SMI is most prevalent in those aged 50-59. Women report CMDs more often than men, but men are less likely to seek help and are underrepresented in Talking Therapies and more likely to use harmful coping mechanisms. For SMI, GP records show higher prevalence among men.

The JSNA suggests that while acute hospitals can provide crisis support, they are not always the most suitable setting for mental health emergencies. Crisis cafés serve as an alternative, offering non-clinical, therapeutic, and social support to reduce patient distress, emergency department visits and the length of inpatient stays.

By enhancing awareness, making care adjustments, and providing accessible information, we can better meet the needs of residents with disabilities. Collaborative efforts, supported by local venues, ensure that services are more accessible and tailored to the unique needs of the community. This coordinated approach will not only improve the quality of care but also reduce the burden on acute hospitals, providing a more suitable environment for mental health emergencies and ongoing support for those with long-term conditions.

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Benefits of a Collaborative Community Service

- Improved accessibility: Residents can access multiple services in locations across the borough, reducing barriers to support.
- Equity and Inclusion: An collaborative approach can help address disparities and ensure that all residents have equitable access to support services. This is especially important for marginalised and vulnerable populations who may face additional barriers to accessing help.
- Enhanced coordination: Services can better share information and collaborate on cases, ensuring holistic and consistent support.
- Better outcomes: Addressing multiple needs simultaneously leads to more effective and sustainable results for residents and families.
- Cost-efficiency: Combining resources, knowledge and infrastructure will lower costs for providers and make more funds available for resident services.
- Flexibility and Responsiveness: Services provided within local communities can be more flexible and responsive to the specific needs of the population. Being closer to the community, providers can quickly identify emerging issues and adapt their support accordingly.
- Building Trust and Engagement: Localised services help to build trust between service providers and community members. When support is provided by familiar faces within the community, residents are more likely to seek help and engage with the services offered.
- Opportunities for relationships: When residents receive services close to where they live, they have more opportunities to engage with their neighbours and participate in community activities. This helps to break down social isolation and foster stronger, more connected communities.
- Strengthening Social Fabric: When residents feel supported and connected, they are more likely to contribute positively to their community, such as volunteering and participating in local initiatives.

Planning for procurement

We recognise that this shift in the way we currently commission prevention services mark a significant change. To navigate this transition smoothly, we have developed a communications plan aimed at ensuring our new service specification is informed and co-designed in partnership with our current providers and residents.

February 2025	Thursday 6 th	Email is sent to all commissioned providers inviting them to an online session on the 13 th
	Thursday 13 th	Presentation is shared with providers in session and feedback is gathered
	Friday 14 th	Resident survey is published
	Monday 17 th – Friday 7 th March	Visits/focus group and calls are undertaken to gather feedback from service users and put into their respective service reviews. Commissioners investigate potential venues for new services
March	Monday 10 th – Friday 14 th	1 st draft of specification is completed using initial early feedback from service users and providers, is shared with providers for feedback
	Friday 14 th	Resident survey is closed
	Monday 17 th – Friday 21 st	Analysis of survey results and combining with wider feedback findings

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	Monday 24 th – Friday 28 th	Second specification is drafted and shared with providers for feedback
April	Monday 31 st March – Friday 4 th	Tender pack is completed and specification is finalised
	Thursday 10 th	Gateway to procure is undertaken and procurement starts

The Council has a duty, when undertaking procurements, to ensure it is transparent, treating providers equally and any decision/action is proportionate. We are proposing an open tender with bids will be evaluated 70/30 for price and quality.

Havering are currently spending £473,000 per year on the existing contracts, with a large proportion of this money being allocated to overheads. The proposed new single contract to be jointly funded by Havering Council and the ICB with a maximum value of £200,000 per year, will ensure that a higher proportion of the contract value will go to providing service to residents rather than on overheads. Given the Council's current financial position, which is under strain due to the prevailing economic conditions and a lack of government funding to meet demand, it would be prudent to concentrate on identifying efficiencies and opportunities for savings.

Conclusion

The Living Well Community Wellness & Empowerment Service in Havering aims to enhance the quality of life for residents by addressing a wide range of needs, including physical disabilities, mental health conditions, autism, and more. With tailored exercise programs, various social engagement events, and a focus on employment support, the service promotes overall wellness and combats loneliness and isolation. Educational workshops on health literacy, financial planning, and technology use empower residents with the knowledge and skills necessary for independent living.

The initiative is expected to lead to significant positive outcomes, including increased life satisfaction and happiness, reduced healthcare costs, and prolonged independent living for residents. By preventing chronic illnesses, offering employment support, and providing early intervention and personalized support, the service alleviates the burden on the healthcare system and ensures that residents receive the appropriate level of care and support. Furthermore, intergenerational activities and community events foster a sense of community cohesion and mutual support among residents.

In conclusion, the establishment of this service in Havering is a strategic investment in the community's future, promoting health, happiness, and empowerment among all residents, regardless of their physical or mental conditions. By enhancing individual lives and strengthening the community as a whole, the Living Well Community Wellness & Empowerment Service promises to create a thriving, cohesive, and resilient community.

OTHER OPTIONS CONSIDERED AND REJECTED

Option 1 - Do nothing

There is the option to do nothing and stop providing preventative services when the contracts end on the 31st January 2026 and 31st July 2026. This option is not advised as preventative services in social care are essential for promoting the well-being and quality of life of residents and social benefits include improved quality of life, greater health equity, and stronger community bonds.

Option 2 – Continue as is

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Although it is possible to extend the current contract in line with the built in extensions, this option is not recommended at this time. While extending the contracts would ensure continuity of services and pose no immediate risks, this approach will not address the current inefficiencies or enhance the over quality and integration of the services provided. There is a pressing need to recommission a service that is more efficient and holistic.

PRE-DECISION CONSULTATION

None

NAME AND JOB TITLE OF STAFF MEMBER ADVISING THE DECISION-MAKER

Name: Sophie Barron

Designation: Senior Commissioner Age Well

Signature:



Date:12/03/2025

Part B - Assessment of implications and risks

LEGAL IMPLICATIONS AND RISKS

The Council has a general power of competence under section 1 of the Localism Act 2011 to do anything an individual may generally do subject to any statutory limitations. The Council has the power under this section to agree to the proposals in the recommendations.

The value of the proposed contract is £1,061,826 over 5 years, which is above the threshold for light touch services as set out in Schedule 1 of the Procurement Act 2023. Therefore, any procurement activity must comply with the Procurement Act 2023. Officers intend to undertake an open procurement which is in compliance with Section 20(2)(a) of the Procurement Act 2023.

The proposed open tender is compliant with the requirements of both the Procurement Act 2023 and the Council's Contracts Procedure Rules for contracts of this nature.

FINANCIAL IMPLICATIONS AND RISKS

This paper is seeking a permission to procure a Living Well Community Wellness & Empowerment Service. The contract will run from the 1st February 2026 to 31st January 2029 with the option to extend for a further 2 years at a total estimated value of £1,061,826.00.

The annual estimated costs of the service are detailed below:

Year 1 - £200,000.00 (£160,000 LBH / £40,000 ICB)
Year 2 - £206,000.00 (£164,800 LBH / £41,200 ICB)
Year 3 - £212,180.00 (£169,744 LBH / £42,436 ICB)
Year 4 - £218,545.00 (£174,836 LBH / £43,709 ICB)
Year 5 - £225,101.00 (£180,081 LBH / £45,020 ICB)

LBH currently commission a range of prevention services for adults with learning disabilities including Mental Health Prevention Service, delivered by MIND in Havering, The Physical and Sensory Disabilities Prevention Service delivered by the Havering Association of People with Disabilities (HAD) and Peabody's Floating Support Service. The ICB also commission prevention services. Under the place based working, a more joined up approach to commissioning services is now being identified. There will be a pooling of resources from LBH and from the ICB to commission one service which will be more efficient and effective. The contract will be funded from LBH resources and from ICB resources, the breakdown of the split is shown above.

The total commitment over the life of the contract for LBH is estimated to be £859,461.

The relevant governance processes should be enacted to ensure the ICB funding is forthcoming before going out to tender.

The LBH funding for the above will come from the following contracts not being continued beyond 31st March 2025.

- Mental Health Prevention Service - £89,092
- The Physical and Sensory Disabilities Prevention Service is provided by the Havering Association of People with Disabilities (HAD) - £80,000

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The Peabody Floating support contract currently costs £302,952 for a full year. This contract ends on 31st July 2026, this means that £201,968 of current funding for this contract will be available in 26/27 to fund the new service and the full £302,952 will be available from 2027/28 onwards. This also means that for 4 months there will potentially be both services running.

The total annual amount available from these three contracts in 26/27 is £371,060, this is sufficient to meet the annual requirement of £160,000 giving rise to a saving of £211,060. From 27/28 there is £472,044 available to fund an estimated annual cost of £164,900 giving rise to a saving of £307,144. These contracts are currently funded from a mix of BCF funding and LBH general fund.

Part of the savings that materialises will be used to fund the additional costs of the statutory advocacy and advice service which amounts to £58,143, leaving £249,001 remaining, part of the saving will be offered up as an MTFS saving but this will need to follow a review of the BCF funding pot and following sign off from Health and Wellbeing Board to establish how much of the saving can be attributed to LBH general fund.

The annual increases in costs proposed under the new contract will need to be covered by annual inflationary growth bids.

A review is currently being undertaken to establish what needs to be included within the new service. A request has been made by finance to review the service specification alongside the KPIs before going out to tender to ensure this contract is value for money. Due to this being unavailable pending the service review, no assurance can be given on the value for money of the contract at this time.

HUMAN RESOURCES IMPLICATIONS AND RISKS (AND ACCOMMODATION IMPLICATIONS WHERE RELEVANT)

The recommendations made in this report do not give rise to any identifiable Human Resources implications or risks.

EQUALITIES AND SOCIAL INCLUSION IMPLICATIONS AND RISKS

Havering has a diverse community made up of many different groups and individuals. The council values diversity and believes it essential to understand and include the different contributions, perspectives and experience that people from different backgrounds bring.

The Public Sector Equality Duty (PSED) under section 149 of the Equality Act 2010 requires the council, when exercising its functions, to have due regard to:

- I. the need to eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010;
- II. the need to advance equality of opportunity between persons who share protected characteristics and those who do not, and;
- III. Foster good relations between those who have protected characteristics and those who do not.

Note: 'protected characteristics' are: age, gender, race and disability, sexual orientation, marriage and civil partnerships, religion or belief, pregnancy and maternity and gender reassignment.

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The Council is committed to all of the above in the provision, procurement and commissioning of its services, and the employment of its workforce. In addition, the Council is also committed to improving the quality of life and wellbeing for all Havering residents in respect of socio-economics and health determinants.

An EqHIA (Equality and Health Impact Assessment) is usually carried out and on this occasion this isn't required.

The Council seeks to ensure equality, inclusion, and dignity for all in all situations.

There are not equalities and social inclusion implications and risks associated with this decision.

HEALTH AND WELLBEING IMPLICATIONS AND RISKS

The recommendations made in this report do not give rise to any identifiable Health and Wellbeing implications or risks. The new combined service may offer an opportunity to provide more holistic care for those who have co-occurring mental health conditions and learning disability.

ENVIRONMENTAL AND CLIMATE CHANGE IMPLICATIONS AND RISKS

The recommendations made in this report do not give rise to any Environmental or Climate Change implications or risks.

BACKGROUND PAPERS

None

APPENDICES

None

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Part C – Record of decision

I have made this executive decision in accordance with authority delegated to me by the Leader of the Council and in compliance with the requirements of the Constitution.

Decision

Proposal agreed

Delete as applicable

Proposal NOT agreed because

Details of decision maker

Signed 

Name: Councillor Gillian Ford

Cabinet Portfolio held: Adults and Wellbeing

CMT Member title:

Head of Service title

Other manager title:

Date: 10th April 2025

Lodging this notice

The signed decision notice must be delivered to Committee Services, in the Town Hall.

For use by Committee Administration

This notice was lodged with me on _____

Signed _____