



CABINET

15th October 2025

Subject Heading:

Interim Adults Commissioning Strategy

Cabinet Member:

Councillor Gillian Ford, Cabinet Member for Health and Adult Care Services

ELT Lead:

Barbara Nicholls, Strategic Director of People

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Policy context:

The Care Act 2014

Health and Well-being Strategy

Financial summary:

There are no financial implications associated with this decision

Is this a Key Decision?

Significant effect on two or more Wards

When should this matter be reviewed?

June 2026

Reviewing OSC:

Peoples Overview & Scrutiny Board

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 x
Resources - Enabling a resident-focused and resilient Council x

SUMMARY

This report provides an overview of the Interim Adults Commissioning Strategy 2025-26 which sets out the London Borough of Havering's approach to planning and commissioning adult services over the next 12 months.

RECOMMENDATIONS

Members of the Cabinet are asked to

- Note the contents of the report and the accompanying strategy
- Approve the interim adults commissioning strategy

REPORT DETAIL

The interim adults commissioning strategy sets out our approach to the planning and commissioning of services for adults in Havering over the next 12 months. The focus is on responding to identified local needs, with an emphasis on prevention and enabling individuals to live healthy, independent lives for as long as possible.

The strategy covers

- Commissioning principles
- Overarching priorities
- Key commissioning intentions for 2025/2026

Context

Havering's population has grown significantly over the past decade and now stands at approximately 268,145 residents. The borough has a notably high proportion of people aged 65 and over and the lowest proportion of working-age adults in London, increasing pressure on local services. It also has the highest rate of unpaid carers in London at 8.7%, above both the London and national averages. Household deprivation has risen by 4%, with marked disparities in health, disability, and deprivation between communities.

Despite rising demand, funding for health and social care is based on outdated population data, leaving Havering under-resourced. Overcrowding and limited access to affordable housing further impact residents' wellbeing, while demographic pressures continue to strain health and care services. These challenges underscore the urgent need for all partners to maximise the efficiency and effectiveness of available resources.

Structure

In 2024, the LBH commissioning team integrated with the ICB place-based team to form the Havering Integrated Commissioning team, structured around three portfolios: Start Well, Live Well, and Age Well. Over the past year, the team has worked jointly to review commissioned services, reduce duplication, coordinate delivery, and improve outcomes for residents. However, in response to national NHS financial pressures, NHS North East London is undergoing a restructure to cut running costs by 50%, which will significantly impact Place and end the current integrated commissioning model.

The Council is planning a parallel restructure of its commissioning team, to be completed by December 2025. Despite these changes, integrated working practices are now well embedded, and both organisations remain committed to collaboration to drive service efficiency and improve outcomes for Havering residents.

Overarching Priorities

1. **Financial Sustainability** – Ensuring value for money through service reviews, joint commissioning and innovative funding models
2. **Community Engagement** – Embedding lived experience into service design through ongoing dialogue with residents and stakeholders
3. **Prevention** – Shifting from crisis response to proactive, community-based support across all life stages
4. **Integrated Neighbourhood Teams** – Launching a new model of care to deliver holistic, localised support for complex needs
5. **Market Management** - Strengthening the care market through data-driven planning, provider engagement, and new frameworks.

Key Commissioning Intentions

Supported Housing – Expanding and improving supported housing to promote independence and reduce out-of-borough placements.

Direct Payments – Enhancing personalisation by increasing uptake and sustainability of self-directed care.

Complex Needs Care – Increasing local capacity for specialist residential and nursing care.

Preventative Services – Recommissioning services to improve accessibility, integration, and community resilience.

Hospital Discharge – Streamlining discharge pathways through integrated hubs, Discharge to Assess (D2A), reablement and Home First models.

Support for Carers – Expanding identification and support for unpaid carers through training, outreach, and digital tools.

Dementia Care – Improving diagnosis, access to support, and community awareness through a coordinated approach.

REASONS AND OPTIONS

Reasons for the decision:

This strategy is to replace the previous Joint Commissioning Strategy 2017-2020. The strategy is required to outline the key priorities and commissioning intentions over the following 12 months whilst a longer term strategy is developed in partnership with key stakeholders.

Other options considered:

A Joint Commissioning strategy was developed by the Havering Integrated Commissioning team covering all health and social care commissioning priorities and intentions however due to the impending NEL ICB restructure and subsequent disintegration of the team it is no longer feasible to have a single joint commissioning strategy.

IMPLICATIONS AND RISKS

Financial implications and risks:

There are no direct financial implications as a result of approving the interim commissioning strategy. However, any subsequent decisions to implement service changes or redesign delivery models under the strategy may have financial consequences. These will be subject to separate decision papers and approvals.

Legal implications and risks:

The Care Act 2014 places a statutory duty on the Council to ensure the provision of health and social care services which promote well-being, prevent or delay the need for care and give individuals more control over their care and support. The Care Act 2014 and its statutory guidance impose clear duties that effectively necessitate strategic commissioning planning.

Section 5 of the Care Act requires local authorities to promote a diverse, sustainable, and high-quality market of care and support services. This includes:

- Ensuring a variety of providers and services are available;
- Supporting informed choice for individuals; and
- Engaging in market shaping to anticipate and meet future needs

Authorities are required to:

- Understand current and future demand.
- Collaborate with stakeholders (including service users and carers).
- Monitor and evaluate service outcomes.
- Align commissioning with the wellbeing principle and prevention duties

The Council has a general power of competence under s1 of the Localism Act 2011 to do whatever an individual can do subject to any statutory constraints.

Human Resources implications and risks:

There appears to be no HR implications or risks arising that would impact on the Councils workforce as a result of approving the interim adults commissioning strategy. The restructure of the

Havering Integrated Commissioning Team that is mentioned in the report will be managed in accordance with the Councils Organisational Change policy and procedures.

Equalities 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:

1. the need to eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010;
2. the need to advance equality of opportunity between persons who share protected characteristics and those who do not, and;
3. 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.

The Council demonstrates its commitment to the Equality Act in its decision-making processes, the provision, procurement and commissioning of its services, and employment practices concerning its workforce. In addition, the Council is also committed to improving the quality of life and wellbeing of all Havering residents in respect of socio-economics and health determinants.

An EqHIA (Equality and Health Impact Assessment) has been completed.

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

There are no equalities and social inclusion implications and risks associated with this decision.

Health and Wellbeing implications and Risks

The interim commissioning strategy will enable the local commissioning during the transition phase of the local system and is aimed to avoid negative Health and Wellbeing implications or risks.

Positive outcomes could be gained through the implementation of the various parts of the strategy, such as,

1. Outcome – focused commissioning
2. Promoting equity, improving access and social value
3. Embedding lived experience into service design through ongoing dialogue with residents and stakeholders.
4. Partnerships with the voluntary sector
5. Future proofing and continue to develop integrated delivery working with neighbourhoods
6. Evidence-based practice
7. Prevention and early intervention

Data sharing for integrated care and integrated care system

ENVIRONMENTAL AND CLIMATE CHANGE IMPLICATIONS AND RISKS

The Interim Adults Commissioning Strategy does not give rise to any identifiable environmental implications or risks. Environmental impact is evaluated as part of the procurement processes for all commissioning exercises.

BACKGROUND PAPERS

APPENDICES

1. Interim Adults Commissioning Strategy 2025/26
2. Equality and Health Impact Assessment (EqHIA)