Commissioning for a better future:
A starter for ten
Social Care Innovation Network - Phase II
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Introduction

As part of phase II of the Social Care Innovation Network (SCIN), people with lived experience, families, commissioners and innovative support providers came together for two full-day sessions to consider what changes to commissioning in adult social care might help localities move towards the goal of becoming an ‘asset-based area’. Based on the session discussions and issues raised, we started to build a possible framework to guide changes to commissioning to make this shift. This outline was shared and some feedback taken (limited given the arrival of coronavirus). We are sharing it now as a practical product from SCIN phase II along with a short guide to relevant materials and resources. We hope that those seeking to embark on such a journey of change will find it helpful and will help develop and improve it via critique and contribution.

New vision, new practice

‘We all want to live in the place we call home with the people and things that we love, in communities where we look out for one another, doing the things that matter to us.’

The Social Care Future (SCF) vision calls for big change in how public service resources are used alongside citizen and community assets. Think Local Act Personal with partners developed the community-centred support ‘rainbow’ along with the Directory of Innovations in Community-centred Support to show what the future could look like. This now forms the practice basis of the Social Care Innovation Network’s framework for developing Asset-based Areas.

If we agree that paying focused attention to these things will help us change how we use public services for the better, we still have the question – how can commissioning enable this paradigm shift?
Commissioning, but not as we know it

 Whilst there is no lack of general backing for the SCF vision, we still seem to be somewhat stuck in buying a limited menu of ‘services’ where the largest part of budgets is spent on the same things they have been for many years. We will find some of these are increasingly unappealing to people and they often don’t use resources in ways that maximise wellbeing and independence and can offer a sustainable future.

 It is now obvious that we need to commission differently if we want a different future. This is absolutely not to decry the hard and creative work of many commissioners around the country working in tough financial circumstances (and more recently a global pandemic). Indeed, it is because, despite massive constraints, many are also breaking new ground in their practice that we have glimpses of a different future that we can now build on. Recent responses to coronavirus in many places have shown what can be done and quickly. This both shows the way forward and demonstrates that change is possible in even the most difficult of circumstances. It also undermines the negative caricature of commissioners and commissioning as an immovable straightjacket, instead showcasing its potential as a committed and dynamic force for change.

 Of course, we are also not starting from a blank sheet of paper so as well as thinking about where we want to be, we do need to think about how to get there from here. We and others have been looking for better ways that people and communities can be supported in ways that could move us towards the SCF vision. These better ways are far from mainstreamed and some need to be further developed. However, much is already known about what works and how to bring about the change. This is explored below.

 Asset-based commissioning

 Perhaps the key resource in this area is ‘Asset-based commissioning’ (TLAP) by Richard Field and Clive Miller. Their comprehensive book is full of useful ideas, resources and examples. It traces the history, theory and practice of commissioning and considers how it needs to and can change to a new paradigm.

 A core argument is that public sector resources should be used to ‘enable citizens to pool their assets to achieve personal and shared outcomes, e.g. community safety, education, employment, health, that are best achieved through collective means’. The authors suggest that the conventional approach to commissioning reflects what has been called the ‘professional gift model’ whereby citizens pay taxes in return for services and supports designed by organisations that provide them free or via part payment. They argue that this model is increasingly inappropriate and unsustainable for a range of reasons including the changing nature of need, demand and expectations. Given this, they propose that a more appropriate public service model will be based on ‘asset-based practice’:
‘Asset-based practice aims to make more effective and efficient use of the total assets of people, communities and organisations. It does this not by reducing the role of the state and transferring the burden to people and communities. Instead, it redefines the role of the state and its relationship to people and communities. It explicitly recognises the roles that people and communities play in achieving outcomes both as co-producers alongside organisations, and through personal and community self-help. As co-producers, people and communities are involved as equals in day-to-day decision-making. This changes what both practitioners and people and communities do to co-produce outcomes.’

Though the authors note interesting and positive developments from the model of commissioning introduced in the late 1980s they argue it can’t enable the step change needed, with core challenges including:

- deficit-based model
- inefficient use of the range of resources in places
- narrow focus on specific sector outcomes
- failure to make use of supplier innovation and the creativity of people using support.

‘Hence, overall, the conventional model of commissioning overlooks the potential for redesigning commercially provided services and state-funded services and support to complement what people already do, and would wish to do, for themselves and others. Failing to recognise and properly value the contribution people make, causes inefficient and ineffective use of the assets of people, communities and organisations.’

They argue for a shift to asset-based commissioning defined as:

‘Enabling people and communities, together with organisations, to become equal co-commissioners and co-producers, and also via self-help, make best complementary use of all assets to improve whole life and community outcomes.’

Key differences to the conventional approach:

- **Focus** – it focuses on ‘whole life’, inter-connected, outcomes and on making use of the assets of a broad range of organisations together with those of people and communities.

- **How outcomes are perceived to be produced** – conventional commissioning perceives outcomes as being produced wholly or mostly by organisationally supplied services and supports. Asset-based commissioning explicitly recognises the role that people and communities, together with organisations, play in producing outcomes through co-production and self-help.

- **Decision-making** – people and communities are equals with organisations in all asset-based commissioning decision-making with their lived experience valued on a par with the expertise of practitioners.
• **Relationships** – people and communities are full co-commissioners, not just consulted and organisational suppliers are fully engaged in commissioning, not kept at arm’s length. Supplier-to-supplier, within and cross-sector, collaboration is a requirement. This is part of wide cross-sector collaboration commissioning which sees all involved acting as systems leaders.

• **Commissioning processes** – embody the principles of asset-based practice and multi-level co-commissioning at individual, community and wide-area levels thus devolving decision-making to the level at which outcomes are produced.

• **Stimulating and reshaping** – goes further than conventional market management to embrace the use of the assets of people and communities as well as those of organisations.

The new conversation between the citizen and the state

In the real-world local situations that we are trying to make progress within, people have been trying different things in different contexts to both use resources better and adapt the relationship between the local state, communities and citizens. Buddery P, Parsfield, M & Shafique A (2016) in ‘Changing the Narrative: a new conversation between the citizen and the state’ offer a model of the governance approaches from fully state in the lead to fully citizens in the lead. We are all at different points in this model with local variation as well. The implication is not that approaches on the left are all bad and the right all good, rather we need to consider the right local set of ways to ‘change the conversation’. 
Underlying this has to be an underpinning shift towards a new commissioning paradigm and culture of the kind outlined by Field and Miller. They suggest that depending on context, commissioners may move through an ‘asset-aware commissioning’ stage or jump straight to asset-based commissioning. This goes beyond at least some variants of outcomes-based commissioning where outcomes are seen to be largely produced by services and underplay complexity, ‘There is a recognition that it is not organisations on their own, rather people and communities, alongside organisations through a mixture of personal and community co-production and self-help, that produce outcomes’.

**Early results through relationships**

Andy Brogan has explored this. His approach to commissioning promotes a shift from a model that is focused on **delivery** (and so deals in accountability, specifications, targets, competition, performance management, etc.) to one that is focused on **impact** (and so deals in responsibility, discovery, measures, collaboration, sense-making, etc.). Brogan argues that ‘delivery’-type approaches narrow focus and lead to issues being moved around rather than resolved, while ‘impact’-type approaches invite a focus on how specific actions ripple out into the world to affect a range of outcomes from a range of perspectives.
He argues that in traditional approaches we have behaved as if a very complex situation were merely simple or complicated not *complex*. This is true about what we are trying to commission now and will be even more so in trying to shift towards the SCF vision and manage coming out of the acute phase of the pandemic. So crudely, in the traditional approach, we try to specify what is wanted (outcomes) and judge whether it has been delivered by monitoring and reporting. Commissioners do the specifying and checking, providers do the delivering to the specification. This is a caricature of many people’s current practice of course, but to move in the direction we desire, we will have to keep changing this approach to one that brings commissioners, providers, citizens and communities together. They will jointly explore what is wanted from using the combination of public cash and other resources, be able to make adaptations as they try and learn and invest in building the relationships, capacity and skills that can produce mutually desired results, or outcomes.

When we are thinking about making the kinds of changes towards the SCF vision we want, there are of course significant technical and sometimes legal issues around procuring and contracting for something much more variable, flexible, adaptive than say x hours of home care or a bed in a residential home. But before tackling these, Brogan argues it will really pay to invest in relationships that can make it possible to make things work in this complex world. This can also be a way of making a start in the right direction rather than the impossible seeming job of ‘total transformation’. Brogan calls this ‘early results through relationships’. He has developed a five-step process for commissioners to work with providers and local people to support this:

```
STOP > LISTEN > LOOK > TEST > RESPOND
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Brogan offers detail about each of these steps which aim to create the conditions for different commissioning by:

- co-producing a common purpose and seeing this as a starting point
- finding common ground about what is important and energising and what success would look like
- exploring together what is working and not working, why and what strengths and assets can be built upon
- without changing everything at once, test working together to develop the core capabilities that will make doing what really matters ever easier
- use the learning to further build relationships and when possible move forward to develop and spread these capabilities and the practices that support them to develop, grow and sustain.
The steps are an integrative framework for developing the healthy collaboration from which better outcomes will emerge. This is a collaborative action and learning-led approach to planning and commissioning that grows the asset-based area and in ways that make its development more likely – there are existing examples of this and we are developing these into a resource (see below).

**A new contract between people, communities, service providers and organisational commissioners**

Building strong relationships and trust is essential if we are to shift commissioning in a way that moves us towards the asset-based area and the future we are aiming for. In the real world, however, this needs to be accompanied by technical elements that can, as Brogan puts it, ‘achieve ways of working together that are: transparent, adaptable, efficient, sustainable, spreadable, resilient’. A key element of this will be agreements between the key parties that can support this. Brogan proposes a form of contract that:

- provides a vehicle for sharing risks, responsibilities, opportunities and benefits
- enshrines a commitment to: a clear and common purpose; specific and explicit principles and behaviours; developing specific and explicit capabilities
- without does not require the creation of a new or separate legal entity
- enables partners to retain their own legal identity.
The central element in this approach is identifying the **core capabilities** - the relatively few things that the partners need to be great at that make it easier to achieve what really matters. In the cutting-edge work of building the asset-based area we need to become increasingly clear about what are the core capabilities that will support this paradigm shift. These will be the core capabilities that describe:

- what we need to be able to do well in order that great outcomes emerge.
- in a way that leaves as much of the ‘how’ as possible open for innovation.
- and in a way that focuses on the processes that directly create value.

In embarking on changes to commissioning to support the asset-based area it is important not to get into unhelpful debates, with proponents of ‘old’ and ‘new’ approaches positing the practical or moral superiority of their approaches. We need to focus on learning about how to move forward. Asset-based commissioning might be seen as challenging to some of the ways that outcomes-based commissioning is sometimes described and practiced – with the Asset-based commissioning focus on responding to complexity by focusing most strongly on capabilities, learning and adaptation and avoiding advance overspecification of outcomes. However, outcomes are still central to its practice. Hence it is important to draw on the many relevant experiments and experiences of outcomes-based commissioning.

Professor John Bolton in ‘New developments in adult social care’ (Institute of Public Care, 2019) offers advice that is relevant to those who are evolving asset-based
commissioning from an outcomes-based approach. His suggestions include advice against complex payment mechanisms, focusing on simple measures, avoiding simple holding of providers to account for targets, trust built through relationships as crucial for change, to consider trusted assessor approaches.

**Asset-based areas**

The Social Care Innovation Network focus on commissioning is grounded in local experience which is used to explore a real-world approach in moving towards what we call Asset-based areas. The aim is to help people envisage what the world would look like if the community-centred rainbow of practice were to be implemented with the support of asset-based commissioning in a local area. Local circumstances vary massively. There can be no one way of doing it. So, the asset-based area is provided as a framework not a blueprint.

The framework encompasses 10 main elements:

1. We have a clear, shared story about how we work and what we want to change.
2. We are always looking for, connecting up and investing in community assets.
3. We co-design with people who use services and groups who miss out.
4. At work we can be ourselves, connect, be creative and act.
5. We make systems and services simple and human, so that people stay in control and can make choices.
6. Wherever we can we plan and act early, assess later.
7. We co-commission a wide range of local enterprises and back entrepreneurs and innovators.
8. We plan and organise with the neighbourhoods, communities and groups that people feel they belong to.
9. We share power, resources and risks fairly and openly, learning when we get things wrong.
10. We use shared measures of wellbeing, resilience and equality.

This graphic illustrating Barnsley Council’s governance arrangements indicates how it sees many of the above elements jig-sawing together.
Getting there – a draft framework

Just as there is no one correct version of the asset-based area there is also no one way to get there. Finding a pathway that works locally combines clarifying the local changes we are aiming for and our key ideas for achieving these, with an understanding of the current context and obstacles faced on the ground. This enables us to develop strategies and tactics that can be used and adapted to local circumstances. Appendix 1 provides an outline framework to support local development with linked resources and examples that provide useful insights from practice elsewhere. It is very much a draft to be built on by people getting on with this and with further examples and approaches to share along with critiques and suggestions for improvement.

The framework focuses on four main change processes:

1. **Establishing a clear strategic direction** starting from the goal of playing a part in improving lives and communities. The focus is on redesigning services to maximise wellbeing and sustainability including enabling community and individual self-help. This is a shift from a narrow focus on only improving specific service responses to perceived need within public service resources and silo delivery areas – towards a broader and more sustainable vision and direction

2. **A determination to release all local assets** – public services (specialist and universal), citizen, community, commercial etc. With a broader strategic vision, it is necessary and desirable to look much wider than existing public service resources,
exploring a wide range of assets and considering how synergy and alignment can be achieved. How can public service capacity support and help unlock other assets?

3. **A starting aim to use public service resources to support, enable, build from and add** to citizen and community initiative and action. Shifting from the ‘professional gift model’ to add to community action rather than replace it, use professional skills in support of it and to play appropriate roles

4. **Co-produce and deliver a range of activity to support wellbeing and sustainability**. Including action at all commissioning levels with communities, citizens, professionals/workers and support providers. This includes desired results, how to achieve them, making them happen, learning. Building from the broad strategy and using a wider range of assets to take specific co-produced actions at different levels to achieve positive change.

There is obviously overlap across these processes, but it is useful to offer some separation to help focus and develop appropriate local capacity, strategy and tactics.

In the draft framework we have started, under each category, to set out how they might be taken forward, broad approaches that might be used, likely challenges and possible means, resources and examples to support progress (see Appendix 1).

**Getting started**

Field and Miller recognise that this can be daunting and people wanting to make changes at a local level are not starting with a blank sheet. In their book they look at how to get started from the point of view of different groups – people and communities, politicians and local suppliers of services and supports. They offer an ‘asset-based audit’ for local co-commissioners to review local practice and identify opportunities for progress and phasing. Following this they provide advice on the development of an ‘asset-based strategy’. Clive Miller encourages us to get going or keep moving with a few simple tips:

**Getting started:**

- **Anywhere** – where there is an opportunity
- **Think assets** – of people, communities and organisations, despite austerity there are lots of them
- **Some things are already happening** – it may not be full blown asset–based practice but there is always something that is beginning to move often in a small way in that direction
- Let other people know about it and help it develop further
- **Say yes** – give people who are willing to give it a go the backing they need to do so. As one director in a local authority starting from scratch said, ‘as long as it’s legal and doesn’t bust the budget I’ll back it’
- **Innovators** – are your biggest assets, those people who use services, communities and practitioners who are already innovating and those who are
up for it. Find them, introduce them to one another and help them develop their ideas and practice. Let others know what is going on and so feed the innovatory grapevine

- **Network and borrow** – there are loads of people around the country who are now involved in asset-based practice and commissioning. Most don’t have the time to write up what they do but all are willing to share. Connect through existing asset-based organisations e.g. Community Circles, New Economics Foundation, and networks e.g. TLAP’s Building Community Capacity network, the Social Care Innovation Network

The current pandemic has also revealed the possibility of rapid change. Perhaps especially in those places that have previously invested in the conditions and relationships that facilitate this.
## Appendix 1: Commissioning for a better future

### Draft framework

<table>
<thead>
<tr>
<th>Aims</th>
<th>How</th>
<th>Approaches</th>
<th>Possible challenges</th>
<th>Examples</th>
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</table>
| **Establishing a clear strategic direction** starting from the goal of improving lives and communities. The focus is on redesigning services to maximise well-being and sustainability including enabling community and individual self-help | - Start development of strategy with what matters to people. What does a good life look like for people who may need some support? Included in, contributing to, supported by your community  
- Acknowledge the importance of efficient and effective use of all resources in visioning  
- Take an Asset Based Community Development Approach to steer vision  
- Start visioning with a blank piece of paper, looking beyond marginal changes to existing | - Use individual, community (or “footprint”) and wide area commissioning model to engage with people and groups at different levels  
- Consider focus on geographic community, discretionary/core services, group/interest community  
- Ensure all voices are included, including those ‘seldom heard’  
- Develop forms of co-commissioning network at the different levels to support collaboration with key stakeholder groups – to draw on lived experience and assets of people and communities, | - Effective methods for co-producing development of vision and priorities  
- Narrow conceptualisation of social care limiting ambition and imagination  
- Levels and maturity of key local partnerships  
- Absence of strong user-led organisations and infrastructure supporting capabilities for co-production & equalities  
- Co-terminosity issues  
- Policy, organisational or departmental resource allocation, measures, regulation that hinders starting with place based and blue skies approaches | Co-producing vision  
- Co-produce a new vision for public services e.g. Wigan New Deal processes, Hammersmith and Fulham Disabled People’s Commission, Suffolk CC engagement with Ace Advocacy (case study forthcoming)  
- Ensure all voices are included – use audits, tools and means to achieve this e.g. NDTI Health Equality Framework and Commissioning Guide  
- Find a narrative, language and stories that bridge ideas about sustainability and good use of resources with promoting independence and supporting community strength and pride e.g.s. Wigan Deal, Hilary Cottam Relational welfare approach - involving ‘a different conversation’  
- Develop local branding to steer direction e.g. Wigan Deal, Barnsley ‘Love where you live’ Thurrock ‘Collaborative Communities’ Leeds ‘Better Lives’ strategy - Better Conversations, Better Living and Better Connections  
- Use framework to co-design planning such as TLAP Strong Inclusive Communities Framework  
- Use planning tools which start from health, wellbeing, choice, control, community cohesion e.g. Making it Real (I and We statements), Working Together for Change (building a picture from aggregating individual level information), POET (Survey and review systematic feedback in key Care Act areas)  
- Ensure a basis in explicit ethics – for example see Adult social care and ethics, time for a new relationship Bob Hudson  
- Elected members and officer orientation and development e.g. 21st Century Councillor and Public Servant programmes (Birmingham University)  
- Alignment with local economic and wealth building strategies e.g. – How we built community wealth in Preston CLES; New Economics Foundation Community Micro Enterprise in Social Care, Drivers of Local Economic Development and Sustainable Social Care, What Role for Community Business? |

Commissioning for a better future, June 2020
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<th>Ways of doing things</th>
<th>Practitioner experience and assets of organisations</th>
<th>Positions of key local leaders</th>
<th>Identifying drivers of wellbeing, prevention, independence, sustainability to steer planning</th>
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<tr>
<td>- Develop key principles and goals and consider how to apply to all elements necessary to change how support is commissioned and offered</td>
<td>- Use networks to consider, at each level, asset based, whole life goals and how these might be pursued, via the combination of existing assets and what might be commissioned or adapted to enable them</td>
<td>- Expectations of local communities and people using/need social care</td>
<td>- Range of approaches to discovering what is important: ABCD community builders Nurture Development; Health Empowerment Leverage – listening events; Ageing Well asset-based workshops; Connected Care – locally recruited community researchers; Local Area Co-ordinators</td>
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| - Develop strategic plans to start the shift in the direction of the desired vision facilitating prevention, promoting independence, wellbeing, choice, control | - Explore what roles people communities and public services should and can play in enabling this shift. Develop the ‘deal’ between public services, citizens and communities |  | - Range of surveys of assets and resilience frameworks that analyse approaches that maximise wellbeing, drive demand, where spend grows and sustains assets e.g Five Ways to Wellbeing, Demand Management |

| - Start the work to model change to services and approaches to show how the strategy can be made real |  |  | “New conversations” – staff (across public services) trained and starting to engage widely about whole life, asset-based approaches e.g. Wigan Deal ethnographic approach |

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<td>- Engage and align goals with corporate colleagues and politicians looking to build local prosperity and resilience – E.g Wolverhampton Strategic Economic Plan 2019-24</td>
<td></td>
<td>- Lack of knowledge of local assets</td>
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<td>- Align with place-based goals around social and health equalities e.g. Thurrock Better Care Together Theory of Change</td>
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<td>- Develop or take advantage of locality/neighbourhood political and governance arrangements e.g. Wigan Service Footprint to enable place-based working and co-production. E.g. Barnsley area governance arrangements. (ward alliances, small budgets to be matched by volunteering etc. bigger area budgets, linking to area team community development)</td>
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<td>- Start from community resources and</td>
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<tr>
<th>Identifying drivers of wellbeing, prevention, independence, sustainability to steer planning</th>
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<tbody>
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<td>- Range of approaches to discovering what is important: ABCD community builders Nurture Development; Health Empowerment Leverage – listening events; Ageing Well asset-based workshops; Connected Care – locally recruited community researchers; Local Area Co-ordinators</td>
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<td>Determination to release all local assets - public services (specialist and universal), citizen, community, commercial etc.</td>
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<tr>
<td>Use an Asset Based Audit – see Field and Miller, <em>Asset Based Commissioning, TLAP Are We There Yet?</em> – Checklist and planning tool to release and sustain “real wealth” of communities</td>
</tr>
<tr>
<td>Linking people to assets e.g.s Tribe project, Wigan Community Book</td>
</tr>
<tr>
<td>Range of methodologies Appreciative Enquiry, Open Space technology approaches Scoping workshop – e.g. Lambeth Living Well Collaborative</td>
</tr>
<tr>
<td>Investment/ transformation funds (different scales for different commissioning levels) e.g. Wigan grant programmes to build community infrastructure</td>
</tr>
<tr>
<td>Links to growth, planning, geographical approaches. Local economic strategies (e.g. s Preston, Wolverhampton)</td>
</tr>
<tr>
<td>Enable growth of community business and enterprises E.g.s Worcestershire, Shropshire, Telford, Somerset</td>
</tr>
<tr>
<td>Lifetime homes, expanded use of libraries, school buildings etc. accessible local transport, socially productive use of land and property (e.g. Preston)</td>
</tr>
<tr>
<td>Use of Public Health Grant (e.g. Thurrock)</td>
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<td>Facilitate approaches which build connections e.g. Circles/Circle Family, Timebanks/credits e.g. Wigan, Warwickshire, Suffolk (in development)</td>
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<td>Supporting provider organisations working ‘off-contract’ to take community action e.g. Great Communities Warrington and Worcestershire</td>
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<td>Facilitating accessibility of universal services (case studies in development)</td>
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<td>Investment in community infrastructure e.g. community hubs, CVS capacity, social prescribing ‘plus, time banking, volunteer recruitment and support e.g. Coventry, Thurrock, Wigan, Barnsley, Suffolk</td>
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- Seek alignment of goals and targeting across local public service organisations
- Consider the roles and contributions of the full range of public services, include but look beyond specialist and even universal services – to community organisations, businesses etc.
- Mobilise resources within the place rather than single organisation or only some assets and resources
- Keep local resources local
- Draw from communities to provide workforce, beyond traditional care workforce and sources of staff
- Apply processes and approaches
- Existing focus on commissioning for specific “services” with narrowly defined specifications and approaches
- Lack of availability of funds for investment in prevention or for new models
- Limitations on market entry
- Barriers to innovation
- Contract approaches over-specifying outcomes and limiting opportunities to release community assets
- Public reluctance

Use of resources across organisations and partners
- Local public service partnerships, Footprint/locality structures e.g.s Barnsley, Wigan
- Integrated commissioning and governance arrangements e.g Thurrock Integrated Care Alliance
- Integrated public service teams -e.g.s Thurrock, Leeds, Barnsley

Releasing and growing assets
- Draw facilitative approaches which build connections e.g. Circles/Circle Family, Timebanks/credits e.g. Wigan, Warwickshire, Suffolk (in development)
- Supporting provider organisations working ‘off-contract’ to take community action e.g. Great Communities Warrington and Worcestershire
- Facilitating accessibility of universal services (case studies in development)
- Investment in community infrastructure e.g. community hubs, CVS capacity, social prescribing ‘plus, time banking, volunteer recruitment and support e.g. Coventry, Thurrock, Wigan, Barnsley, Suffolk

Commissioning for a better future, June 2020
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<thead>
<tr>
<th>A starting aim to use public service resources to support, enable, build from and add to citizen and community initiative and action.</th>
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<tbody>
<tr>
<td>• Focus support onto building on and enhancing the assets of people and communities</td>
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<tr>
<td>• Remove barriers to people and communities doing things for themselves</td>
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<tr>
<td>• Invest in key capacities and skills that enable the desired outcomes</td>
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<tr>
<td>• Look for ways to support people and partners to solve problems they are identifying</td>
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<tr>
<td>• Front door’ approaches that help people find solutions</td>
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<tr>
<td>• Strengths-based conversations/assessments linked to effective information and advice</td>
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<tr>
<td>• Support focused on linking people &amp; community assets</td>
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<tr>
<td>• VCS investment to advise &amp; help people beyond formal council offers, plus infrastructure support, innovation grants</td>
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<tr>
<td>• Availability of investment/ability to transfer funding for required roles and capacity</td>
</tr>
<tr>
<td>• Staff capacity, skills and knowledge in key areas – examples to provide effective help at &quot;front door&quot; to undertake impactful strength-based assessments, to link people and community assets, in promoting independence roles (OT etc.)</td>
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<tr>
<td>• Necessary budget flexibility and devolution</td>
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<tr>
<td>Making connections, reducing need for formal services</td>
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<tr>
<td>• Training contact centre staff to offer initial advice and connections. Examples: <strong>Thurrock First</strong></td>
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<tr>
<td>• Local Area Coordination (<strong>e.g. Derby</strong>), Social Prescribing Plus approaches to grow community capacity as well as link to it (under early development in <strong>Suffolk</strong> using Circle Family approach)</td>
</tr>
<tr>
<td>• Asset or community led assessment. Examples, Three Conversations (<strong>Cambridgeshire</strong>), Community Led Support (<strong>Leeds, Thurrock</strong>, and others linked to community development approaches)</td>
</tr>
<tr>
<td>• Self-assessment tools – e.g. <strong>Coventry</strong> tool to link people to local resources based on their issues</td>
</tr>
<tr>
<td>• Good linking of front door, assessment and link roles with community development and appropriate VCS functions – e.g. <strong>Leeds</strong> model</td>
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</tbody>
</table>

**Promoting independence – Reablement, Recuperation. Recovery, Rehabilitation, Progression**

**Some examples: Coventry** - discharge from hospital diverting people from unnecessary residential care via enhanced intermediate care & short-term therapy plus large-scale availability of supported housing; use of occupational therapy in early responses to social care referrals leading to short term interventions – via long term provider relationships, assistive technology e.g. app **Brain in Hand, Just Checking**
| - Build strong partnerships with key voluntary, community and commercial organisations to use and grow useful assets | - Community development to underpin above \- Promoting independence approaches \- Locality level decision making and use of budgets \- Development and start up support to local organisations and businesses \- Frictionless and non-bureaucratic personal budget process to enable effective and efficient use, bring community resources more into play \- Enable asset based self-directed support \- Release capacity and energy amongst workforce \- Support at home and supported accommodation | - Availability of business support capacity and expertise \- Bureaucratic and restrictive personal budget processes and rules \- Restrictive procurement and contracting policy and practice \- Inflexible contracts \- Institutional scale and culture, poorly resourced existing provision limiting scope \- Availability of training and development assistance for providers | **Kent** Pathways to Independence programme for people with learning disabilities. **Thurrock** Local Area Co-ordinators assisting people to find solutions wholly or partly through local communities and become active local citizens – including isolated older people, people recovering from mental ill health; Open Dialogue. **Leeds** Rapid Response Team following first contact to help find rapid solutions if possible – linked to *Talking Points* rapid assessments in community buildings. **Somerset** Contact staff and locality teams focused on understanding local community resources and linking people to them |

### Community development support

Some examples:

**Leeds** Neighborhood Networks and Community Hubs, **Coventry** 5 yr contracts with 12 VCS orgs to help people find solutions outside of council offers, **Somerset** Village Agents supporting community café’s and meeting points in villages and towns to grow connections and volunteering – this built on by Community Catalysts to support micro enterprises, **Thurrock** *Stronger Together* partnership with CVS supporting community action including time banking, well-being teams, **Wigan** – Community Investment Fund – targeted at grass roots organisations including expert advice; community link workers, grant and bidding support, **Range of councils** – financial and other support for Gig Buddies, Dance to Health, Dance Syndrome, timebanks and time credits, Community Circles, Compassionate Neighbours, Get Yourself Active, Grapevine, Cares Family, **Range of councils** engaging with charities, support providers and others taking their own community initiatives…Side by Side

### Self-directed support

- Apply key lessons from research and best practice models for personal budgets (see TLAP materials and *National Personal Budget Survey* reports) to reduce bureaucracy, remove restrictive process and practice and enable flexible use to maximise use of assets
- Implementation of Individual Service Funds (see *Wakefield*)
- Ensuring flexible low bureaucracy use of Direct Payments so that people are able to buy from micro-enterprises, community businesses etc. (see *Somerset*)
<table>
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<tr>
<th>models that maximise assets</th>
<th>Workforce models, roles, development</th>
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<tr>
<td>- Investment in supporting people to gain employment</td>
<td>Enabling workforce to support asset-based approaches via self-management, autonomy, delegated resources. Examples:</td>
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<td>- Offer professionals permission to innovate, devolve decision making and use of resources, take a positive approach to risk</td>
<td>- Contact centre staff training to use asset-based approach (see Leeds using Behavioural Insights Team)</td>
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<tr>
<td>- Grow trust in people using public services and reduce rules and monitoring to the minimum necessary</td>
<td>- Self-managed teams (see Wellbeing Teams and Buurtzorg)</td>
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<tr>
<td>- Approaches to support people and communities to prevent harm</td>
<td>- Autonomy – (see Leeds ‘Don’t blow the budget, don’t break the law and do no harm’ approach)</td>
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<td>- Greater Manchester HSCP Workforce Futures</td>
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<td>Growing diversity and choice in support, reducing institutional provision, using and releasing all assets</td>
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<td>Support providers and models making full use of community assets and technology and promote connections/reduction of isolation. Examples:</td>
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<td>- Thurrock Wellbeing Teams and Buurtzorg approach – self management, “bring your whole self to work”, coaching, support sequence etc.</td>
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<td>- Community business and Micro Enterprises – Examples: Somerset micro-enterprises for care at home in rural villages</td>
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<td></td>
<td>- Alternatives to large scale institutional provision. Examples: Shared Lives (see Lancashire), Keyring (see.) Homeshare (see Rochdale), Co-housing, Live-in care, Extra Care (see Coventry)</td>
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<td>- Adapting current models to facilitate connections and use of assets. Examples: Community Circles in care homes and extra care (see Wigan; Time to Connect Time banking and care homes – see Lambeth/Certitude).</td>
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<td></td>
<td>Greater Manchester HSCP Teaching Care Homes initiative engaging care home residents with local community. Tameside Living Well at Home</td>
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**Investment, Business development and support**

Examples:

**Greater Manchester** – Transformation Fund, Life Chances Investment Fund

**Various Localities** – Power to Change

**Range of national grant giving trusts**
<table>
<thead>
<tr>
<th>Co-produce and deliver a range of activity to support wellbeing and sustainability. Including action at all commissioning levels with communities, citizens, professionals/contracted and non-contracted support providers.</th>
<th>Co-produced development of assets and support</th>
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<td>- Take forward initiatives in pursuit of strategic goals – where opportunities arise or as part of a high-level strategy</td>
<td>- Approaches to co-produce change at all levels e.g. Stronger Partnerships for Better Outcomes TLAP protocol to build and structure three-way partnerships (commissioner, citizen/community, provider)</td>
</tr>
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<td>- Promote design, decision making and delivery that uses key experience, insights and intelligence; promotes effective and efficient use of all resources and builds ownership and responsibility</td>
<td>- Rapid prototyping e.g. Lambeth Living Well Collaborative</td>
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<tr>
<td>- Focus on broad agreed outcomes, development of capacity and relationships supporting their achievement and build in opportunity to learn and adapt</td>
<td>- Citizen commissioners’ model (e.g. Sutton) Area Action Partnership (Durham)</td>
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<td>- Treat people and communities as equal decision makers with full cross sector and both contracted and non-contracted</td>
<td>- Residents Panel – Barking and Dagenham</td>
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<td>- Planning approaches at different levels that are engaging, represent the higher levels of the ladder of co-production and ensure diverse involvement</td>
<td>- Community Partnership Meetings (HELP)</td>
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<td>- Use approaches which shift power: operational engagement, non-binding deliberation, binding deliberation, formal governance</td>
<td>- Range of localities – Community asset transfers, Community Management, Establishment of Charitable Foundations</td>
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<td>- Invest in building community capability to take on new roles, including governance</td>
<td>- Develop commissioner skills in co-production (e.g. Skills for Care Commissioning for Wellbeing)</td>
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<td>- Benchmark current commissioning practice in order to plan how to shift towards more coproduction</td>
<td>- Leadership programmes for politicians and commissioners that orient purpose towards asset-based area e.g. NHSE Leadership for Empowered and Healthy Communities</td>
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<td>- Commissioning cultures that take command and control</td>
<td>Contracting, procurement and finances</td>
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<td>- Public reluctance to share responsibility</td>
<td>- Co-productive budget allocation and management approaches: Participatory budgeting; Community Fundholding (In Control); Seven stage Community Commissioning process (HELP)</td>
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<td>- Public expectations for levels and kinds of ‘service’ that are not possible and don’t promote sustainability</td>
<td>- System wide financial reporting e.g. logic modelling (People Powered Health)</td>
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<td>- Some contracting approaches that inhibit use of non-service assets</td>
<td>- Simplified procurement process, competitive tendering as last resort (e.g. examples in Kings Fund Thinking Differently About Commissioning)</td>
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<td>- Approaches to evaluation and measurement that encourage gaming and drive narrow outcomes</td>
<td>- Procurement re-engineering to enable collaboration and procurement of co-produced services Commissioning 2.0 approach – relationship based, focus on broad goals, capacity, adaption</td>
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<tr>
<td>- Provider competition</td>
<td>- Use of Social Value Act 2012 e.g. Social Value 2020, people, place and planet (CLES and Manchester)</td>
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<td>- Procurement rules and practice, legal frameworks that inhibit innovation</td>
<td>- Adapting procurement to enable co-production and asset-based development – clarifying objectives; designing procurement schedule with sufficient time; incorporating and flexibility in objectives; accessible procurement paperwork; weighting for asset-based development; asset-based e.g. recommissioning Mental Health service Camden; and Whole life approach to personalisation (In Control)</td>
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<td>- Capacity and skills of relevant staff and professionals including micro, middle and strategic commissioners</td>
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Commissioning for a better future, June 2020
| organisational supplier involvement | - Engage with these groups and with potential providers of better approaches to support as partners not simply clients, employees or suppliers
- Use approaches that shift power and transfer resources through devolution and de- and re-commissioning
- Find and agree approaches to measurement and payment that enable and do not inhibit this shift

| Co-produced procurement – e.g. Community Commissioning – the Local Integrated Services approach.
| Brokering collective individual level purchasing – e.g. User driven commissioning
| New contracting approaches: Fellowship agreement/contract; Alliance contracting approaches

| - Invest in infrastructure enabling co-production and peer support
- Commissioning and measurement approaches at levels of individual, community and wide area that are clear about key desired goals but maximise user and supplier knowledge and creativity, do not over-specify methods, use overcomplex pricing mechanisms, or inhibit access to non-service resources

| - Dominant existing models and markets
- Inflexibility and timing of existing contracts and commissions
- Sources of alternative investment (beyond private capital and public bodies)
- Commissioning practices that limit partnership approaches, restrict market entry, procure limited specifications rather than allow adaptation

| Outcomes and monitoring
- Shared outcomes frameworks across key public service bodies with a focus on health, wellbeing, promoting independence, reducing institutional provision, self-direction in ways meaningful to communities and supporting learning and adaption – e.g. Wigan Making it Real framework; NEF Lambeth & Cornwall use of Dynamic Model of Wellbeing; and Connected Care outcomes framework.
- Measurement of developing assets and co-production; adaptions and innovations that improve outcomes for people and communities and grow assets e.g. Wellbeing and resilience measures (WARM); community researchers (Turning Point).
- Performance approaches that support learning and adaption and work across the partners – examples Working Together for Change, EU-GENIE
- Feedback systems to steer adaptation and development: e.g. Personal Outcomes Evaluation Tool; Working Together for Change

See Commissioning for Outcomes and Co-production - NEF
Useful weblinks

Co-producing Vision

The Wigan Deal
Hammersmith & Fulham’s Disabled People’s Commission
About Hilary Cottam
Barnsley’s love where you live
Leeds’s Better Lives Strategy
TLAP’s Strong Inclusive Communities Framework
TLAP’s Making It Real
Working Together for Change
POET
Birmingham University Public Servant Programme
How we built community wealth in Preston
TLAP ladder of co-production
NDTI Health equality framework and commissioning guidance
Adult social care and ethics time for a new relationship

Identifying drivers of wellbeing, prevention, independence, sustainability to steer planning

ABCD Nurture Development
Health Empowerment Leverage
Local Area Co-ordination
Five ways to wellbeing
Wigan’s ethnographic approach
LGAs Market Shaping and Commissioning resources
IPC Market Position Statement database and resources

Aligning goals across organisations, partners and place

Wolverhampton Strategic Economic Plan
Thurrock Better Care Together
SCIE’s logic Model including link to Nesta’s Theory of Change
Barnsley’s Area Governance approach
Wigan’s service footprint
Lessons for Grenfell - Connecting better to the communities serviced by public services

Mapping assets and communicating them

JSNA - A glass half full North West England
TLAP’s Are We There Yet
Asset Based Areas Audit Field and Miller
Wigan’s Community Book
Tribe Project
Appreciative Inquiry Approach
Open Space Technology
Use of resources across organisations and Partners

Example of an Integrated Care Alliance - Wolverhampton Lambeth Living Well Collaborative

Releasing and growing assets

Wigan apprenticeship grant programme
Wolverhampton Economic Plan
Preston Economic Model
Worcestershire Community Enterprises
Local economics and micro enterprises
Community Enterprise Shropshire
How to open a community enterprise Telford
Somerset Community Enterprise fund
Community Circles
Time Banking UK
Temp Time Credits
Working off contract Suffolk
National Academy for Social Prescribing
Alvanley Family Practice Social Prescribing case studies
Community Hubs
Community Hubs in Thurrock
New Economics Foundation - Community Micro-enterprises in Social Care
Time Banking Cambridgeshire
Developing a Health and Social Care Community Business Market

Making connections, reducing need for formal services

Thurrock First
Community Circles
Three Conversations
Coventry Self Assessment
Doing Good in Leeds

Promoting independence – enablement, recuperation, recovery, rehabilitation progression

Just checking monitoring
Brain in Hand
Medway and Kent Pathways to Independence
Thurrock Local Area Co-ordination
Open Dialogue approach
Rapid Response Team Mid Yorkshire

Community development support

Leeds neighbourhood networks
Third Sector Procurement and Contracting Coventry
Somerset Village Agents
Thurrock Stronger Together
Wigans Community Investment fund  
TLAPs Directory of innovations in community-based support

Self-directed support

National Personal Budgets Survey  
Personal Budgets Experience Survey  
ISFs TLAP  
SDS TLAP webpage of resources  
Community Catalysts and Micro Enterprises

Workforce models, roles and development

Wellbeing Teams  
Buurtzorg  
Greater Manchester HSCP

Growing diversity and choice in support, reducing institutionalised provision, using and releasing assets

TLAP’s reimagining social care report (Somerset, Wigan and Thurrock  
Somerset Microenterprise Project  
SharedLives  
Homeshare  
Extra Care Charitable Trust  
Example of live in care  
Co housing UK  
Community Circles in Extra Care  
Tameside living well at home programme  
Power to Change - A cooperative homecare model  
Teaching Care Homes project

Investment, business development and support

Greater Manchester Transformation Fund  
Life chances investment fund  
Power to Change  
Grants online

Co-produced development of assets and support

Stronger Partnerships for Better Outcomes  
Lambeth Living Well Collaborative  
Sutton’s Citizens Space  
Area Action Partnerships Durham  
Understanding Community Assets Transfer  
What is community management  
Establishing a charity  
Skills for Care Commissioning for Wellbeing Qualification  
Leadership for empowered and healthy communities
Contracting, procurement and finances

Social Value Act 2012
Recommissioning Camden MH Services
Commissioning for co-production and outcomes
Integrated commissioning for better outcomes
Collective purchasing
Commissioning 2.0 (Andy Brogan)
Contracting models for integrated care
King’s Fund commissioning and contracting report
Thinking differently about commissioning
Community Fund Holding (In Control)

Outcomes and monitoring

Shropshire Making It Real Local Account
Commissioning for outcomes and social value Lambeth and Cornwall
Dynamic Model for Wellbeing
In Control POET
Working together for change
Commissioning for outcomes and coproduction
LGA Integrated commissioning for better outcomes

Contact us

Social Care Innovation Network