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Specification

CONTENTS

INTRODUCTION

The Better Care Fund Programme

The Better Care Fund (BCF) programme supports local systems to successfully deliver the integration of health and social care in a way that supports person-centred care, sustainability and better outcomes for people and carers.

It represents a unique collaboration between:

- The Department of Health and Social Care
- The Department for Levelling Up, Housing and Communities
- NHS England and Improvement
- The Local Government Association

The four partners work closely together to help local areas plan and implement integrated health and social care services across England, in line with the vision outlined in the NHS Long Term Plan. Locally, the programme spans both the NHS and local government to join up health and care services, so that people can manage their own health and wellbeing and live independently in their communities for as long as possible.

Launched in 2015, the programme established pooled budgets between the NHS and local authorities, aiming to reduce the barriers often created by separate funding streams. The pooled budget is a combination of contributions from the following areas:

- minimum allocation from NHS integrated care boards (ICBs)
- disabled facilities grant – local authority grant
- social care funding (improved BCF) – local authority grant

The BCF Policy Framework[1] and Planning requirements[2] for 2022-2023 were published on 19 July 2022. These documents set out the agreed way in which the BCF will be implemented in this financial year and the requirements that BCF plans must meet; this includes local areas setting ambitions against a number of metrics. The BCF metrics for 2022-23 are as follows:

- avoidable admissions to hospital
- admissions to residential and care homes
- effectiveness of reablement
- hospital discharges that are to the person's usual place of residence

Systems are required to submit their plans for approval by 26 September 2022.

Alongside the main BCF plan, a new requirement for 2022-23 is that Health and Wellbeing Boards are asked to submit capacity and demand plans for their intermediate care services, including discharge pathways, ahead of the winter. Acute Trusts and other providers will need to be involved in the development of these plans. Support for intermediate care services is a key focus of the BCF Policy Framework along with support related to the Discharge Taskforce.

Looking ahead, the Authority is working to try and put in place a two-year BCF Policy Framework for 2023-25. This will take into account wider reforms such as the establishment of ICBs and ICPs, social care reform and measures set out in February's Integration White Paper (e.g. shared outcomes, pooled budgets, integration pathfinders), and potential developments in relation to

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[1] https://www.gov.uk/government/publications/better-care-fund-policy-framework-2022-to-2023

[2] https://www.england.nhs.uk/publication/better-care-fund-planning-requirements-2022-23/

intermediate care.   The support offer over the period will need to be able to adapt in line with Policy and Planning Requirement developments.

BCF National Support Programme

The Better Care Fund (BCF) team was set up to provide oversight for the BCF programme and put in place national support for local systems. Their work includes ensuring that local areas have the right support available to them as they work towards delivering their BCF plans and improving integration between health, housing and social care services.

The national support programme is externally-commissioned and is now moving to a two and a half year funding arrangement (from Q3 of 2022-23), with a budget to develop an expanded and re-designed externally-commissioned support programme.

The overarching objective in moving to an expanded support offer – available to any local system in any region – is to expand the range and type of support made available to local systems, which is expected to add significant value in ensuring a strong level of uptake across local systems – at Health and Wellbeing Board (H&WB) level - and in sustaining positive changes to improve person centred integrated services, with a corresponding positive impact on service user outcomes and experience.

Key to the success of the BCF external support programme and evidencing its impact is separately commissioning an independent, external evaluation to run alongside delivery of support[3].

Overarching service summary

Evaluation of a comprehensive Better Care Fund programme of Health, Housing and Social Care and wider public service integration support that is tailored to a diverse range of local system needs and designed to help systems deliver person centred integrated services.

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[3] The core external support programme is being commissioned separately and therefore is beyond the scope of this specification. The provider(s) selected for the core support services contract will not be eligible to bid for the external evaluation contract

PURPOSE / BACKGROUND TO REQUIREMENT

Main aims of the external evaluation

The critical output from the independent evaluation is to build an evidence base to underpin the BCF external support programme and identify which aspects are working well and where further development and improvement are needed. This is so the Department of Health and Social Care ('the Authority') and other national BCF partners can gain a better understanding of the effectiveness and impact of support delivered to Local Systems and where possible any corresponding resulting benefits to the integration services that systems design and delivery.

We want to commission a flexible, mixed method evaluation. At a high level, the main aims of this evaluation isto support the BCF team and partner organisations to:

- Examine the effectiveness of the support programme's delivery (identifying which parts of the support programme work and which ones do not)
- Find out and show how the core support programme is working and wherever possible, to help the core provider to clearly demonstrate the impact of external support in terms of measurable (including quantitative where feasible) and more intangible, qualitative benefits. This could potentially include proxy measures to show quantitative benefits that may be linked to showing where value for money has been delivered.
- To bring about continuous improvement in the design and delivery of a range of support offered to local systems (including interventions that have the potential to reduce health and care inequalities)
- Ensure the Authority can gain a better understanding of the support programme's effectiveness. By effectiveness the Authority' means whether the support programme has helped local systems deliver person-centred integrated services and improved outcomes for service users.
- Understand how the Authority can inform potential policy developments linked to external support.
- Support and enable collaboration between partners across health, social care and housing.
- Capture and feedback evaluation findings at the end of every quarter and throughout the duration of the contract (with initial findings to be provided at the end of the first quarter of evaluation delivery). This will enable BCF team and suppliers to continuously improve the offer and have a better understanding of the impact of the support being delivered on an on-going basis.
- Share good practice across systems. This could include adding an improved evidence base to outputs of the support programme that have been proven to work by the evaluation. Outputs may include case studies, toolkits, and how to guides.
- Lead work with the Authority to identify robust data collection processes that the Authority will require the core provider(s) of support services to put in place to support and enable independent evaluation in an iterative way that helps to demonstrate the effectiveness and impact of support.

This project shall mobilise as soon as possible after commencement of the BCF external support programme, which is estimated to be delivered from mid-November 2022 for a contract period of just under 2.5 years.

Key principles underpinning delivery

A number of important key principles will need to underpin effective delivery of the external evaluation.

These include factoring in the practicalities in terms of local system capacity and level of involvement in supporting the evaluation on an ongoing basis and the essential need to avoid creating any confusion

or placing any additional burden on local systems in delivering the requirements of the evaluation.   In practical terms, these key principles will include:

- Flexing the evaluation approach as required - for example focusing on an appropriate sample of local systems as part of data collection
- Ensuring that any more in-depth, sample size evaluation conducted by the external evaluator is coordinated effectively alongside all 'lighter touch' feedback gathering led by the core support provider, immediately following delivery of support,
- Therefore, ensuring there is no duplication with the role local systems need to play as part of 'lighter touch' reporting requirements within the core support programme (for example local system input in feeding back to the core support provider on the outcomes and impact of the support delivered)
- Establishing clear parameters and scope for the external evaluation from the start
- Continually ensuring there is clarity and effective communication on the definition of evaluation including a clear focus on determining impact in terms of whether support made a difference (for example on changing behaviours through to supporting improvements in service user outcomes and experience) and how this more   detailed evaluation differs to obtaining local system feedback, for example on the perceived quality and range of support being delivered
- Agreeing from the start on roles, responsibilities and the most appropriate, selective and targeted use of evaluation team resources
- Agreeing from the start how best to optimise the timing of evaluation activities (e.g. cyclical delivery of evaluation activities may be beneficial in some instances)
- There being an appropriate range of evaluation criteria and data capture requirements, which will require effective joint working with the provider(s) delivering the core BCF external support programme to ensure all relevant data inputs are provided.

A broader aim is for this evaluation to also assess and make recommendations on how other parts of the BCF (beyond the externally commissioned support) can better demonstrate impact and value. This aspect will require further discussion with the evaluation provider but will relate to a smaller proportion of wider BCF programme areas that would also benefit from continuous improvement recommendations.

Activity examples beyond the core BCF external support programme are likely to include;

- measuring impact/benefits resulting from webinars led by the BCF team and BCMs
- evaluating impact and effectiveness of the broader BCF practice and evidence workstream (which extends beyond external support)
- evaluating a sample selection of regional and other small grant outcomes reports
- evaluating the impact and effectiveness of the Better Care Exchange, BCF bulletin and design and delivery of the BCF communications strategy (thereby providing an enabler focus to the evaluation).

Applying appropriate elements of the evaluation methodology to these broader aspects of the BCF programme, beyond core delivery of external support, will add further value to the BCF programme as a whole.

While the main contract will be with the Authority, it is anticipated that day to day programme oversight, contract management and relationship management will be led by the BCF team who will be the main point of contact for both the provider of support services and the provider for the independent evaluation.

DEFINITIONS

Keyword/Term	Summary/Description
BCF Plan Delivery	Delivery of BCF plans that set out a joined-up approach to integrated, person-centred services across local health, care, housing and wider public services.
BCM	Better Care Manager (BCM) - BCMs represent a network of Better Care Fund contacts for all seven regions across England. BCMs play a key role in helping to identify support needs and will act as a key regional point of contact for the provider of external support
DHSC	Department of Health and Social Care
Differentiated Support Offer	Support offer tailored specifically to meet the needs of individual Local Systems.
DLUHC	Department for Levelling Up, Housing and Communities
Enabler Programme	A programme of work designed to support and enable delivery of one or more core programmes of work for example core transformation programmes focusing on integration
Health & Wellbeing System Level (HWB System Level)	A view on information/topics from the level of Health and Wellbeing Boards (HWBs) which are forums where key leaders from the local health and care system work together to improve the health and wellbeing of their local population
Integrated Governance Arrangements	Governance structures that support integration across health, social care and housing
LGA	Local Government Association
Local Systems	Local areas in which the population of service users are grouped according to the Health and Wellbeing Board/Local Authority for that area
Out of Hospital	Any care that is not undertaken in a traditional hospital setting e.g. in the community, at the person's home or school or workplace or in a GP practice

Keyword/Term	Summary/Description
Outcomes Framework(s)	A framework of measurable outcomes that helps to link what is being done (activities) with the outcomes that are to be achieved, enabling progress to be measured against each target outcome
Person Centred Integrated Services	Person Centred Integrated Services means putting people and communities, not diseases, at the centre of joined up health and care systems, and empowering people to take charge of their own health and wellbeing rather than being passive recipients of services. Health, care and support should be tailored to the needs and preferences of the individual, their carer and family. Everyone should be able to say: 'I can plan my care with people who work together, to understand me and my carer(s), who allow me control, and bring together services to achieve the outcomes important to me.' National Voices, TLAP 2013.
Practice and Evidence Outputs (P&E)	Sharable examples of good practice
Trust-level	A view on information/topics categorised by NHS Trusts

SCOPE OF REQUIREMENT

In line with the core support programme delivery themes, the independent evaluation will focus on carrying out a targeted, proportionate evaluation to determine the effectiveness of support programme delivery.   This will include an appropriate blend of process and impact evaluation tools and techniques to look at the support interventions delivered, and the outputs generated to consider the impact of these.

The evaluation provider will be expected to identify elements of good practice where qualitative and/or quantitative benefit has been delivered to local systems to recommend how these can be further strengthened, scaled up and spread to other aspects of the support programme (including recommending how to ensure all regions could benefit from similar support) while also identifying – on an ongoing basis - areas for support programme improvement or further development.   Part of this may include developing options appraisals to enable the Authority to make informed decisions on next steps following improvement recommendations.

This will include evaluating the support programme in relation to the following areas of its delivery:

- Delivering a range of evidence-based tools and methods that are meaningful for local systems in benefits realisation
- Support and embed improved flow processes and discharge services across local systems
- Develop a strong local system diagnostic capability
- Design and deliver a comprehensive, diverse range of high quality support options
- Ensure a high degree of take up for support offer
- Ensure BCF plan element is integral to support offer

- Support systems to monitor & evidence their own achievement of change & improvement and recognising the role of support in this
- Facilitate effective joint working with Better Care Managers and developing their role in relation to external support
- Provide ongoing implementation support

In terms of scope for the evaluation, the primary focus will be to determine the overall quality and effectiveness of the support offer itself. By effectiveness the Authority' means whether the support programme has helped local systems deliver person-centred integrated services which in turn help improve outcomes for service users.

The BCF team is seeking to commission a flexible, mixed method evaluation which uses different forms of quantitative and qualitative evaluation to examine the effectiveness of the support programme's delivery, identifying which parts of the support programme work well and represent best value and which aspects need improving or developing further, to gain a better understanding of its impact.   The evaluation should consist of:

- A process evaluation using qualitative approaches to gather feedback from a range of local system stakeholders on an ongoing basis across health, social care and housing and incorporating a method of gathering service user feedback.
  - An evaluation approach that includes both formative and summative evaluation activities
  - Using the formative evaluation as a way to build robust theories of change for the proposed interventions; and then using those as the basis for both setting planning milestones and capturing data.
- Using qualitative approaches to investigate local systems' experience of external support including satisfaction levels and perception of value added.

In addition, depending on the evaluator's findings, this could potentially include proxy measures to show quantitative benefits that may be linked to showing where value for money has been delivered. The scope of the evaluation should also consider the role of the evaluator after the core support phase is completed. The evaluation should not overlook the importance of additional follow-on support. as the intelligence gleaned from evaluating an agreed selection of regular follow up check in's - carried out after the main phase of support - would add further value to the external evaluation.

In demonstrating the effectiveness (and where possible impact) of support, it is important to recognise that in some instances, certain aspects of local system performance and associated stakeholder behaviours and the partnership dynamic (that may potentially be the root cause of local system challenges), may not be realistic to positively impact through external support within a short to medium term timeframe (for example within one quarter) . This may require other interventions that are beyond the scope of the BCF support programme (for example systems facing regional escalation).

Deliverables

The type and range of deliverables will be determined according to the provider's proposed delivery model to achieve the outcomes specified and will be agreed through discussion with the Authority. Deliverables are likely to include a combination of interventions and targeted outputs designed to deliver the key components of a high-quality external evaluation. Example deliverables are outlined below and may range from evaluation reports (including interview and/or survey results and conclusions), options appraisal outputs, training programme materials and documented recommendations through to potentially supporting the core provider (through co-production) to add value to and help to validate some of their outputs including delivery reports, case studies, presentations, toolkits, guides and videos.

A key deliverable will be for the provider to develop clear insights into barriers, enablers and the way in which support delivery and local system uptake varies between regions including showing the reasons for variation in uptake and the estimated impact of this.

The specific deliverables and the main agreement for the BCF external support programme shall be shared with the evaluation Delivery Partner as soon as possible after contract award.

As part of delivery the supplier should produce a series of detailed reports which:

- Evaluate the effectiveness of external support delivery drawing on input from a range of NHS, local authority (including social care and housing) and voluntary sector stakeholders. The evaluation should set out which parts of the support programme work well and should identify opportunities for improvement including any identified need for culture change and lessons learned–
- Detail the impact of external support on local health and care systems where possible (including care organisations as well as resultant impact on service users)
- Translate and clearly present evaluation findings including setting out implications and key recommendations
- Make a number of recommendations for future commissioning and delivery of external support

Adopting the principle outlined above regarding not placing any additional burden on local systems in order to meet the requirements of the evaluation, it will be the responsibility of the evaluator to arrange access to existing data sources and undertake any primary data collection (including gathering qualitative data such as local system feedback using the most appropriate data collection methods as recommended by the evaluator). Where possible the BCF team and partner organisations will support this process.

Given that in some instances evaluation findings may be viewed by the provider of support services (and/or local systems receiving support) as sensitive in nature, it is expected that the external evaluator will act accordingly including providing relevant reassurances to the provider of support services and where appropriate, ensuring confidentiality in handling relevant evaluation information and data.   This includes obtaining approval from the Authority and relevant stakeholders on the type and level of information to be included in quarterly and annual evaluation reports and determining whether any key elements would be appropriate to publish (for example via the Better Care Exchange).

Based on the key learning and recommendations from evaluation reports, delivery of the external evaluation will need to include development of an appropriate range of improvement products. These may include outputs such as (but not limited to) toolkits, guides and videos or other relevant deliverables that will support the provider(s) of external support to implement key recommendations and improvement opportunities emerging from the findings, on an ongoing basis. This will be done by working closely with BCF team and partner organisations to help define the products and determine how they fit with existing improvement tools.

Also linked to improvement tools and related shared learning, the provider for the external evaluation must also demonstrate and deliver an effective training programme on implementing any improvement tools and approaches to ensure appropriate knowledge transfer and to facilitate continuous improvement in delivery of external support to local systems.

Core Delivery

Delivery timescales: The specific timeframe for meeting each objective and generating deliverables will need to be developed in discussion with the provider, however the initial delivery phase is due to commence in Q4, 2022-23.

The Authority 'expects the first period of delivery to involve a **gradual, phased start** in terms of laying the groundwork for an effective evaluation with an initial focus on developing key relationships through to establishing the full range of data collection arrangements needed to underpin the evaluation. It is anticipated therefore that evaluation activities will gradually become more resource intensive by month 3 and this should be reflected in the ITT resource plan.

No.	Objective	Outcome(s)	Example Deliverables
1	**To evaluate and demonstrate the impact of support and to help the programme demonstrate value for money**	Delivery of support is underpinned by robust, independent external evaluation. Evaluation findings cover both qualitative and quantitative impact of support Collaborative working between provider(s) of support, BCF team, BCMs, Government departments, NHSE, LGA and the partner organisation leading on independent external evaluation. All relevant data and related evaluation inputs are provided in a timely way.	Clear data collection processes in place to enable impact of support to be evaluated on an ongoing basis. Delivery plans, governance charts and other relevant outputs demonstrating joint working arrangements
2	**To review and assess the return on investment for external support services**	Greater ability to demonstrate value for money in delivery of external support. Clear examples of areas within core support programme where further development is needed in order to demonstrate VfM – with clear improvement recommendations	High-quality evaluation report with specific examples where VfM has been demonstrated. Recommendations on how to further extend support initiatives that do demonstrate VfM
3	**To deliver a robust continuous improvement element for the external support programme including developing improvement tools and techniques**	Range of improvement tools and techniques developed to strengthen and continuously improve programme delivery. Evaluation enables real time, flexible and responsive adjustment of the approach to make the programme even more effective. Internal teams (e.g. BCF team and BCMs) are empowered to use improvement tools and techniques.	An effective range of health-social care improvement products (e.g. toolkits, guides, videos). Effective training programme developed to ensure robust knowledge transfer

No.	Objective	Outcome(s)	Example Deliverables
4	**To ensure evaluation techniques are evidence-based and draw upon qualitative and quantitative data from a wide range of sources**	Evaluation methodology is underpinned by available evidence (including appropriate evidence-based national guidance) and qualitative and quantitative data analysis. Evaluation approach reflects deployment of high level analytical skills & specialist skills and experience in undertaking process evaluation and economic analysis	Regular qualitative and quantitative data analysis outputs as part of summary reports (potentially quarterly) presented in a clear, concise manner, illustrating effective use of evidence-based techniques and clearly outlining key evaluation findings and improvement recommendations. Regular analysis of changes in demand for external support services and robust comparison with available supply
5	**To ensure external evaluation is informed by comprehensive stakeholder engagement which is regularly used to inform & iteratively refine support programme delivery**	Access to a broad, comprehensive range of channels and networks to reach a wide range of key stakeholders, including: National level: BCF team, BCMs, departments, LGA, NHSE. Local system level: Relevant key partner organisations across health, social care, housing, VCSE and service user interest groups. Evidence of improved effectiveness of external support in reducing health and care inequalities, informed by stakeholder engagement that may be linked to identifying inequality issues/improvement opportunities. Clear link and feedback loop established between programme delivery, stakeholder engagement, capturing stakeholder input and subsequent programme improvement / refinement	Communication and engagement plan (for communication with support programme provider and local systems) Stakeholder map. Transparent process for ensuring stakeholder feedback is used to strengthen and improve support programme delivery on an ongoing basis.
6	**To ensure the external evaluation approach is underpinned by a strong working relationship with provider(s) of external support and informed by a clear**	Provider organisation for external evaluation demonstrates clear awareness and understanding of current and anticipated challenges facing local systems across health, housing and social care and facing individual provider organisations.	Engagement plan to build a strong relationship with provider(s) of external support programme. Evidence through evaluation outputs that the evaluation approach:

No.	Objective	Outcome(s)	Example Deliverables
	understanding of local system challenges	Both core support provider and evaluator working effectively together to co-design hypothesis development. Clear consensus across evaluation provider, BCF team, NHSE and Government departments regarding which aspects of local delivery are realistic for external support interventions to improve & influence and where the link between cause and effect in terms of measurable improvement, is realistic to demonstrate. Ensuring there is a shared understanding between the core support provider, the external evaluator and the system on what success looks like and development of a set of shared quantitative and qualitative measures and/or evaluation criteria that are in line with this shared understanding. This may include being creative in determining what is meaningful to measure.	• Recognises and understands the challenges and complexity of improving integration • Demonstrates an understanding of local system challenges and • Applies a **proportionate approach** to reflect that level of impact and ability to link cause & effect depends on type, intensity and duration of support delivered and certain local system factors (to be clearly identified in partnership with provider(s) of external support)
7	**To establish robust programme governance arrangements to track progress of the evaluation and raise / escalate any issues or challenges in good time**	Provider of external evaluation is able to report regularly (e.g. quarterly) into the contract lead. Early identification of risks, issues or challenges including difficulties in clearly linking cause & effect in relation to impact of support delivered. Evaluation provider effectively identifies and helps to manage potential risks around intellectual property and sharing of approaches and tools used.	Monthly and quarterly progress reports
8	**To flexibly enable the evaluation to also extend more broadly to wider BCF support activities and interventions.**	External evaluation assesses the impact of the full range of support that BCF team provides (including those beyond the external support programme)	Set of clear recommendations on how impact can be better demonstrated and improvement opportunities in relation to wider support activities / interventions. Impact summary focusing on (for example): webinars led by the BCF team and BCMs broader practice and evidence workstream

No.	Objective	Outcome(s)	**Example Deliverables**
			activities (extending beyond support) sample selection of small grant outcomes reports Better Care Exchange BCF bulletin

Reporting

The chosen provider shall submit quarterly summary reports which will focus on illustrating the continuous tracking of the evaluation's progress to ensure any issues or challenges are raised in a timely manner. An end of year in-depth report will also be required which will focus on illustrating the outcomes and impact of the evaluation on the BCF external support programme.

These reports will be submitted to the BCF team and will be a formal requirement as part of governance and reporting to both the BCF Performance and Support Sub-group and BCF Programme Board. In line with the deliverables outlined in the main support programme specification and KPIs, these reports will summarise the effectiveness and value for money in relation to activities and support delivered to local systems and provide an independent assessment of the impact of the core BCF external support programme at the end of each quarter. On a quarterly basis, all reports shall also provide a spend update based on total forecast and expenditure.

While the main contract will be with the Authority, it is anticipated that day to day programme oversight, contract management and relationship management will be led by the BCF team who will be the main point of contact for both the provider of support services and the provider for the independent evaluation. This will include regular update meetings (e.g. fortnightly) between the evaluator and BCF team.

LOCATION

The programme will be delivered both remotely (including conducting interviews and other activities via MS Teams) and in the field at a variety of locations across England or via virtual means when required.

BUDGET

The proposed budget estimate for the independent, external evaluation over just under two and a half years from Q4, 2022-23 is **£360,000.   This does not commit the Authority – it is an indicative budget and subject to change by the Authority.**