

A close-up photograph of two women laughing heartily. The woman on the left is a Black woman with her mouth wide open in a laugh, wearing a maroon long-sleeved shirt. The woman on the right is a white woman with short grey hair, wearing black-rimmed glasses and an orange zip-up jacket over a blue shirt. She has her hand on the shoulder of the woman on the left. The background is plain white.

For commissioners,
procurers and
providers

ewmpas

Transforming social care

A guide to better tendering

Working with the National
Commissioning Board and
funded by Welsh Government.

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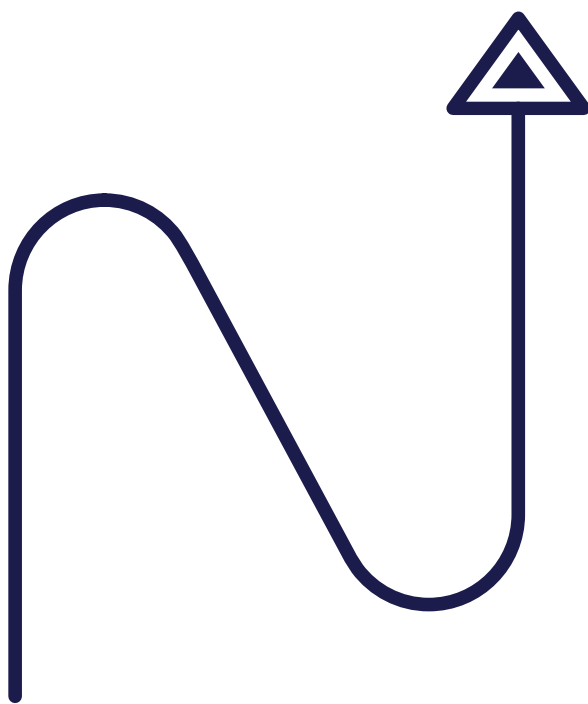
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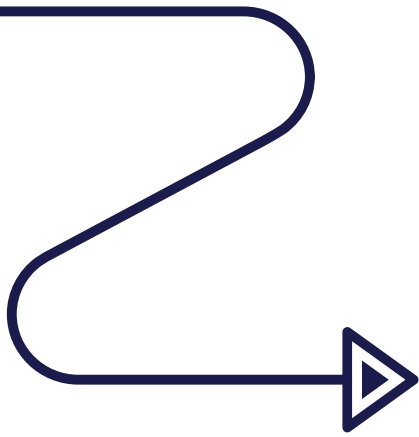
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01

Introduction





The main focus of this guide is on how to promote **Social Value Models of Delivery** through the tendering processes.

It describes:

- The criteria that need to be scored
- The sort of questions to be asked
- The sort of answers to be rewarded
- The weighting that should be applied

This guide is aimed at commissioners, procurers and service providers to help them understand why and how the promotion of Social Value Models of Delivery in tendering might impact on their activities.

However, tendering is not the only way in which to promote Social Value Models of Delivery.

It may not even be the most important activity in which commissioners and others should engage.

The development of social value models is a long-term strategic aspiration underpinned by Welsh well-being laws, and policies for a prosperous Foundational Economy.

It needs to be actioned not only in tenders, but before and after tendering, and even without the need for tendering. Perhaps the most important activity is to get everyone on board.

Everyone needs to understand what a Social Value Model of Delivery is, and why they are needed.

In simple terms; they are about delivering **Great Social Care and Added Value:**

Achieving the best outcomes for people and communities in both the short-term and the long-term.



Commissioners should talk to providers, and people who access services and other key stakeholders, about the desire to achieve great social care and added value.

Everyone needs to understand what this means and why it is the right thing to do – for the achievement of citizen well-being and the sustainability of public services.

The agenda should be framed in terms of positive change that can start now. The change can happen without any tendering.

Local providers can start to evolve their services into Social Value Models of Delivery without the need for tendering, but they will have added impetus from knowing that if tendering does happen, they will be geared up for meeting the specifications.

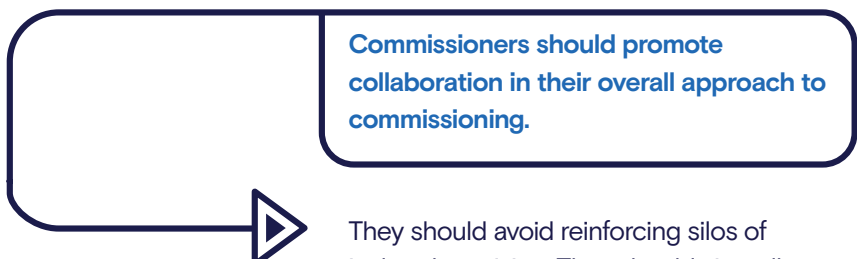
Commissioners should work with providers and others to identify an agenda for positive change and ways of measuring progress. This could start with collaborative experiments to help with shared challenges.

Everyone could be brought together to carry out a collaborative re-design of services in a locality – using the framework of a Social Value Model of Delivery, with its four elements of great social care and three elements of added value.

They should identify providers and others that might be logical (even if unusual) collaborators in the local area and encourage them to work together in pursuit of shared goals and mutual benefit.

Pursuing change collaboratively as an on-going activity can inform decisions to re-tender... or not re-tender.

A tender is a snapshot – the goal should be long-term trust, and the development of a local ecology of trusted suppliers, all delivering great social care and added value.



Commissioners should promote collaboration in their overall approach to commissioning.

They should avoid reinforcing silos of isolated provision. They should view all services as potential parts of a collaborating system.

Glossary



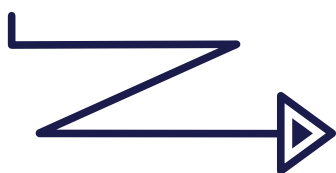
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Glossary

The transformation of social care envisaged by the Social Services and Well-being (Wales) Act represents a challenge to change for both commissioners and providers.

It is important that everyone has a shared understanding of the words and phrases that are used to describe what is being sought. The following glossary explains some key words with a particular emphasis on what providers might be expected to demonstrate in their tenders and service delivery.

ADDED VALUE



All care services provide social value simply by providing social care. But they can do more, particularly by engaging with the local community for reciprocal benefit and to support community resilience and resourcefulness.

They can add environmental value by reducing waste, minimising their carbon footprint, and initiating or participating in local environmental projects.

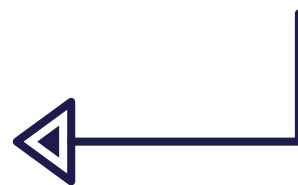
They can also add economic value through their approach to the remuneration of staff, their deployment of offices and higher paid roles within a locality, and their procurement decisions.

COLLABORATION

The provider must demonstrate that they are not inward-looking but connect and work with others to give people access to more resources, opportunities and supports.

This should involve collaborating with other professional organisations allied to care and support, but it should go beyond this.

We are looking for providers with a clear understanding of the value of working with others both inside and outside the care sector, and with relevant skills and experience in doing this.



CO-PRODUCTION / VOICE & CONTROL

The provider must demonstrate that they mobilise people's opinions and assets – including community and relational assets – and involve people who access services (users) and carers in the design, delivery and evaluation of their care and support.



The provider must respect people's right to take ordinary risks and make their own choices. The provider should also welcome the involvement of advocates to support people who have difficulty representing their own interests.

PREVENTION

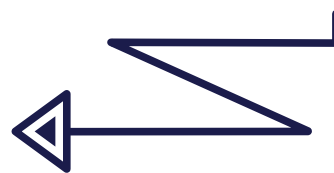


The provider must demonstrate that they think long-term and act to reduce or avoid dependency. Prevention is all about helping people to reduce risks to well-being and / or maintain their well-being before things get so difficult that they need lots of paid-for care.

Prevention activities are good for people because most people prefer being as independent as possible. And it's good for public services because it helps to keep down the pressure and unnecessary demand on limited finances.

WELL-BEING OUTCOMES

The provider must demonstrate that they do what matters to people. These are the things that make up the basics of a good life. They are all about having a life, not just having a service.



The Welsh National Outcomes Framework* flags up eight areas (or domains) of life:

- Physical and mental health and emotional well-being.
- Protection from abuse and neglect.
- Education, training and recreation.
- Domestic, family and personal relationships.
- Contribution made to society (community).
- Securing rights and entitlements.
- Social and economic well-being; and
- Suitability of living accommodation.

*<https://gov.wales/social-services-national-outcomes-framework>



**Why Social Value Models of
Delivery should be promoted**

03

Why Social Value Models of Delivery should be promoted








→ The Social Services and Well-being Act seeks the transformation of social care in Wales so that it achieves two principal objectives:

1. Services that achieve the well-being of citizens: “what matters” to them as they define it.
2. Services that are sustainable despite demographic trends.

Why Social Value Models of Delivery should be promoted

To achieve these two objectives, the Act promoted four headline principles, and one corollary principle.

They are all vital for achieving both objectives:

Headline Principles	Objective 1: Well-being	Objective 2: Sustainability
 <p>Well-being outcomes</p>	The focus is on achieving well-being outcomes – making a positive difference to people's lives – rather than on delivering service inputs and outputs.	People experiencing well-being are less likely to need acute or crisis services.
 <p>Co-production / voice & control</p>	Involving citizens is essential for finding out “what matters” and taking the right action.	Doing what matters, and involving citizens and their networks, can reduce the level of paid-for support.
 <p>Collaboration & partnership</p>	Collaboration increases the opportunities and resources for achieving well-being.	Collaboration increases the pool of resources across agencies and sectors, and enables cost sharing.
 <p>Prevention & early intervention</p>	Prevention reduces avoidable loss of well-being in the future. It also seeks to increase or maintain the independence of people who currently use services.	Activities which avoid future demands on services (and/or reduce current dependency) help to reduce the pressure on public finances.
Corollary Principle		
 <p>Added value (social, economic and environmental)</p>	The Act is not just about the well-being of those receiving care, but of the whole local population.	Care services which add value (above and beyond good care) are supporting sustainability across the public domain.

Social Value Models of Delivery are defined by their ability to deliver against the four principles of the Act and to add social, economic, and environmental value. It is because of this ability that they are to be promoted.

**Defining Social Value Models of
Delivery as simply as possible**



04

Defining Social Value Models of Delivery as simply as possible

SOCIAL VALUE MODELS OF DELIVERY



The concept of Social Value Models is over-arching. It uses the phrase “social value” to refer to models that, in fact, deliver more than just a narrowly defined “social value”.

The full requirements of a **Social Value Model of Delivery** include all seven elements



Defining Social Value Models of Delivery as simply as possible



In the context of social care,
Social Value Models of Delivery
deliver two things

1. Great social care

Great social care for individuals is itself a source of social value. Conversely, poor social care for individuals is not a source of social value.

2. Added value

Added value comes from models of care and support which deliver social, economic and environmental value, above and beyond the delivery of great care for individuals. This added value benefits the community and the wider world – and also benefits future generations.

Defining Social Value Models of Delivery as simply as possible

SOCIAL VALUE MODELS OF DELIVERY



The 4 elements of great social care



Well-being outcomes

Great care services understand that delivering inputs and outputs is no guarantee of great outcomes – and so they focus on outcomes.



Co-production / voice & control

Great care services recognise that they cannot deliver great outcomes for individuals without their active involvement in decision-making.



Collaboration & partnership

Great care services recognise that they cannot (in isolation) offer all the opportunities and resources that people need for their well-being.



Prevention & early intervention

Great care services seek to maintain or restore people's independence – as an important well-being outcome.

Defining Social Value Models of Delivery as simply as possible



The 3 elements of added value



Social value

The service contributes to the well-being of others – not just people who access services – through actions that benefit communities and public services in general.



Economic value

The service contributes to the local economy – through its employment practices and procurement practices.



Environmental value

The service contributes to local and global environmental sustainability – internally as an eco-aware organisation, and externally by supporting local green activities.



How to promote Social Value Models of Delivery through tendering

05





5.1 Weighting of quality and cost

Cost is always an important consideration in letting public contracts but giving cost too much weight will restrict the ability of commissioners to promote social value models. The credentials of these models are all about quality.

Although final decisions will be made by local commissioners, we have followed the logic of the White Paper in this guidance by using a weighting of 70% for Quality for illustrative purposes.

The 2021 White Paper on **Rebalancing Care and Support*** recommends a shift: “Away from price towards quality and social value”. This logically means that Cost will be weighted less than Quality, and by more than a narrow margin.

*<https://gov.wales/sites/default/files/consultations/2021-01/consutation-document.pdf> (page 8)

5.2 Weighting for Social Value Models of Delivery within the overall quality score



As defined above, the criteria for being a Social Value Model of Delivery fall into two categories: great social care and added value.

It is reasonable to assume that every contract specification for social care aspires for the delivery of “great social care”. The scoring of quality is the principal mechanism for achieving this at the tendering stage.








Commissioners will therefore already have much that is in place for the identification of credentials relating to the great social care element of social value models. However, commissioners need to ensure that the four key elements of great social care are strongly emphasised in every specification.

There will be other specific quality requirements as well, but unless the four key elements are included, the tendering exercise will not be geared towards promoting social value models.

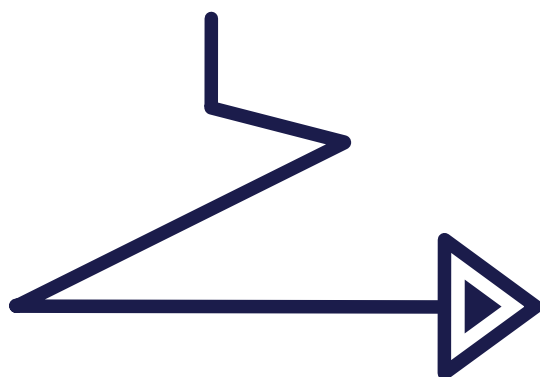
How to promote Social Value Models of Delivery through tendering

The second category of credentials for a social value model is “added value”. This category, as the phrase suggests, is additional to the normal expectations of Quality. It is about more than providing great social care for specific people in specific ways. It has three key elements.

The following table indicates how social value models can be weighted within the overall Quality score. For illustrative purposes, it is assumed that 70% is available for Quality.

		Elements to be scored	Potential spread of scores
Quality	Great Social Care	 Well-being outcomes	50%
		 Co-production / voice & control	
		 Collaboration and partnership	
		 Prevention and early intervention	
		Other contract specific quality requirements	
	Added Value	 Social value  Economic value  Environmental value	20%
Cost		Price	30%
			100%

5.3 Weighting for monitoring and reporting



Although evidenced responses generally score higher, the process of tendering is inevitably geared towards scoring the words that tenderers write when responding to Quality questions.

One downside of this is that some providers may be good at writing tenders but not so good at delivering on what they write. Another downside is that either or both commissioner and provider may view the awarding of the contract as the end of the process.








They may then both disengage and be satisfied with the provision of social care without any transformational elements: that is, without it being “great” and without any “added value”.

To address these risks, commissioners should make it clear that the monitoring of activities and outcomes is a seriously important part of the contract and will be followed through during the contract delivery period.

How to promote Social Value Models of Delivery through tendering

It is therefore recommended that tenderers be asked to describe their systems for monitoring and measuring and to express their clear commitment towards gathering qualitative and quantitative data and sharing it with commissioners and other key stakeholders. What tenderers say in relation to monitoring and reporting should also be given a significant score.

The following table indicates what this might look like, although weightings may vary depending on the nature of the contract:

		Elements to be scored	Potential spread of scores		Total	
			Delivery	Monitoring		
Total Quality	Great Social Care	 Well-being outcomes	40%	10%	50%	
		 Co-production / voice & control				
		 Collaboration and partnership				
		 Prevention and early intervention				
		Other contract specific quality requirements				
	Added Value	 Social value	15%	5%	20%	
		 Economic value				
		 Environmental value				
Cost		Price	30%			
			100%			

5.4 Scoring – keeping it simple

The following set of illustrative questions and indicators are not meant to be a cut-and-paste script for use in every tender.

They should be used to inform the actual questions and indicators that commissioners adopt for each tender. They can be used in information sessions with providers to help them understand the direction of travel and the breadth of aspirations for delivering great social care and added value. There may be some tenders where they can be used extensively, but commissioners are urged to use care and judgement.





Commissioners may want to rephrase the materials for a range of reasons:

1.

To make them clearer for the intended audience.

2.

To give emphasis to elements of care or added value which the commissioner is particularly keen to promote.

3.

To ensure that the complexity of the tender requirements is not an obstacle to smaller providers with limited capacity or tender writing.

4.

To avoid giving providers the impression that they must switch resources from core activities into other delivery activities or excessive monitoring.



5.5 Scoring for well-being outcomes

How to promote
Social Value
Models of
Delivery through
tendering

ILLUSTRATIVE QUESTION:



What is your approach to ensuring that the people you support experience what matters to them?

Please give examples of your systems and achievements.

ILLUSTRATIVE INDICATORS:

☐ Quality policy and systems clearly promote person-centeredness and the full range of well-being outcomes.

☐ Examples of doing what matters demonstrate:

☐ A commitment to fully engage with people and do more than just follow a care plan.

☐ A strong set of provider skills with specialisms in some of the domains of the National Outcomes Framework.

☐ An awareness of the need to engage with others outside the provider organisation in order to access other skills and opportunities for people.



5.6 Scoring for co-production / voice & control

How to promote
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Models of
Delivery through
tendering

ILLUSTRATIVE QUESTION:



In what ways do you ensure your services are co-produced with the people you support?

What structures and processes do you have to ensure people have a strong voice and real control over their life and service?

ILLUSTRATIVE INDICATORS:

- ☐ The provider's values and systems are clearly geared towards maximum involvement of users (and where appropriate, their carers) in the design, delivery and review of their support and goals.
- ☐ The provider uses techniques that ensure support activities are "done with" rather than "done to" people.
- ☐ The provider has structures which are designed to give the people who use services a strong voice and real control:
 - ☐ A membership structure to which the provider is accountable and / or clear involvement of people supported and staff in organisational governance and decision-making.
 - ☐ Peer group meetings.
 - ☐ Access to independent advocacy; clear and meaningful complaints procedures.
- ☐ The provider demonstrates that they take an asset-based approach to people and their social networks (friendships, family etc.), and augments rather than undermines their ability to help themselves and others.



5.7 Scoring for collaboration

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Models of
Delivery through
tendering

ILLUSTRATIVE QUESTION:



What is your understanding of the value of working with others both inside and outside the care sector?

Please share your ideas for potential collaboration that could be pursued during the contract.

ILLUSTRATIVE INDICATORS:

☐ The provider demonstrates a clear understanding of the benefits of collaboration in terms of:

- | | |
|--|--|
| <input type="checkbox"/> Organisational learning and development and sharing assets. | <input type="checkbox"/> Access to these opportunities and supports not being constrained by the resources of single agency. |
| <input type="checkbox"/> People having access to more opportunities and supports. | |

☐ The provider shows that they recognise the scope and value of collaborating:

- | | |
|---|---|
| <input type="checkbox"/> Within the professional sectors of health, care and housing. | <input type="checkbox"/> Outside the professional sectors, embracing schools, churches, community groups, local businesses, leisure clubs, etc. |
|---|---|

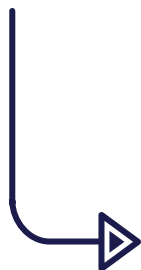
☐ The provider shows that they are aware of the locality and community in which they work.



5.8 Scoring for prevention and/or mitigation of risks to well-being

How to promote
Social Value
Models of
Delivery through
tendering

ILLUSTRATIVE QUESTION:



Please describe how you would help people to reduce their dependency on paid-for support, and how you could contribute to the prevention of unnecessary future demands on public services.

Give examples of your ideas for increasing the preventative impact of your work.

ILLUSTRATIVE INDICATORS:

☐ The provider's values and systems are clearly geared towards the maintenance and development of people's independence through:

- ☐ Skills teaching and enablement approaches.
- ☐ Encouraging self-help, positive risk and interdependency with others in their circle of support.
- ☐ Building confidence and mental well-being.
- ☐ Involving people's friends and families and wider community as natural supports.
- ☐ Reviewing progress and adjusting support levels as agreed with the commissioner.
- ☐ Where applicable, planning for a "step down" to a situation where less support is required.

☐ The provider demonstrates:

- ☐ An awareness of the potential for services to undertake some preventative outreach work.



5.9 Scoring for added value

How to promote
Social Value
Models of
Delivery through
tendering

ILLUSTRATIVE QUESTION:



Describe how you would seek to add social, economic, and environmental value on top of the core social value of your contracted work.

Consider the use of National TOMs Wales measures, but do not be constrained by them.

ILLUSTRATIVE INDICATORS:

- ☐ The provider demonstrates that it understands how **social value** can be added in a range of ways:

Examples:

- ☐ Enabling the people it supports to be active contributors to their community.
- ☐ Organising social events that benefit others as well as people receiving care and/or support.
- ☐ Offering learning experiences for local pupils and students and or work experience or volunteering opportunities for other community members.

NB This is not an exhaustive list.

Example of a TOMs measure relating to social value:

- ☐ NTW41: Initiatives taken or supported to engage people in health interventions (e.g. stop smoking, obesity, alcoholism, drugs, etc.) or well-being initiatives in the community, including physical activities for adults and children.



5.9 Scoring for added value (...continued)

How to promote
Social Value
Models of
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ILLUSTRATIVE INDICATORS (continued):

- ☐ The provider demonstrates that it understands how **economic value** can be added, and has a track record of doing so in a range of ways:

Examples:

- ☐ Offering good employment terms and conditions and a fair wage (i.e., a minimum of the Real Living Wage and pay commensurate with duties and the value placed upon staff for the tasks undertaken).
- ☐ Offering good career paths within the locality, as an agency and or through collaborating with other employers in the health and care sector).
- ☐ Investing in local offices.
- ☐ Buying from local suppliers.
- ☐ Reinvesting surpluses into social care and public benefit activities.

NB This is not an exhaustive list.

Example of a TOMs measure relating to economic value:

- ☐ NTW1: No. of local direct employees (FTE) hired or retained (for re-tendered contracts) on contract for one year or the whole duration of the contract.
- ☐ NTW4: Fair Work Wales Standard and related “good” and “fair” employment practices are implemented and facilitated.
- ☐ NTW7: No. of weeks of training opportunities (Levels 2,3, 4+) that have either been completed during the year, or that will be supported by the organisation until completion in the following years.

- ☐ The provider demonstrates that it understands how **environmental value** can be added, and has a track record of doing so in a range of ways:

Examples:

- ☐ Recycling and re-using equipment.
- ☐ Reducing carbon emissions in buildings.
- ☐ Reducing unnecessary staff travel.
- ☐ Supporting “green” activities within the service and outside.

NB This is not an exhaustive list.

Example of a TOMs measure relating to environmental value:

- ☐ NTW22: Policy and programme to achieve net zero carbon by 2030 including monitoring plan with specific milestones.
- ☐ NTW19: No. of tonnes of hard to recycle waste diverted from landfill or incineration through specific recycling partnerships.

5.10 Scoring for monitoring and reporting




How to promote
Social Value
Models of
Delivery through
tendering

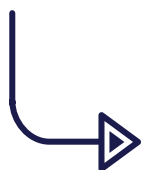
ILLUSTRATIVE QUESTION:



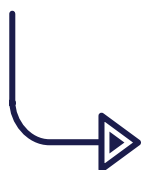
How would you monitor the progress of your activities in respect of the following **Social Value Model** requirements?

Great Social Care		Well-being outcomes
		Co-production / voice & control
		Collaboration and partnership
		Prevention and early intervention

Added Value		Social value
		Economic value
		Environmental value



How would you measure the well-being impact that your care and support has on the people you support?



And how would you report on progress to commissioners, the people you support, and other local stakeholders?

5.10 Scoring for monitoring and reporting

(...continued)

How to promote
Social Value
Models of
Delivery through
tendering

ILLUSTRATIVE INDICATORS:

- ☐ The provider demonstrates that it can apply a range of **quantitative** methods for monitoring relevant requirements.

Examples:

☐ Well-being goals being achieved.

☐ Economic impact data.

☐ Reductions in need for support.

☐ Environmental impact data.

NB This list is not exhaustive.

- ☐ The provider demonstrates that it can apply a range of **qualitative** methods for monitoring relevant requirements.

Examples:

☐ User and carer feedback.

☐ Outreach activity reports.

☐ Partner feedback.

NB This list is not exhaustive.

- ☐ The set of quantitative and qualitative methods covers all the requirements of a social value model of delivery.

- ☐ The provider proposes a clear cycle of actions for reporting against the requirements of a social value model of delivery, utilising the outputs of the monitoring methods.



Advice on monitoring and reporting

The awarding of the contract is only the start of a process of creative endeavour and collaborative learning. There should be no expectation that providers will deliver on all the aspirations of the contract from day one or even year one.

- ✓ Delivering great well-being outcomes can take time and is a constantly moving target because of the changing aspirations and circumstances of the people being supported.
- ✓ Working co-productively is also a dynamic process, often requiring changes of mindsets and power relations.
- ✓ Working collaboratively is not something a provider can achieve on their own and will be affected by a range of internal and external factors.
- ✓ Working preventatively will also depend on what freedom and capacity a provider has to engage with current or potential clients for their long-term benefit.
- ✓ Delivering on the contract's aspirations for added value (social, economic, and environmental) will also take time and be contingent on internal and external variables.

For these reasons, it is important that the provider not only presents evidence in the tender that they have the attributes to deliver on the contract, but that they are also committed to continual learning and development in an open and reciprocally beneficial relationship with the commissioner and other stakeholders.

The core processes should be self-monitoring and reporting, bringing to the table both what is working and what is not working, so that all parties can learn and develop together. The provider's descriptions of how it plans to monitor progress, and of its commitment to participate in a learning partnership, will have a significant weighting in the scoring of their tender submission.

It is not the intention of commissioners to set performance indicators and tightly monitor providers as a "command and control" tool. Monitoring and reporting arrangements will be tools for generating useful discussion and for shared problem solving within a mutually trusting relationship.

How to promote Social Value Models of Delivery through tendering



Commissioners will work collaboratively with providers to monitor and review management information as this assists all parties to identify areas of strength and areas where there may be a need for greater focus or additional resources going forward.

Commissioners will use management information to continuously assess progress being made towards achieving targets and outcomes and to inform future strategy.

5.11 Scoring framework

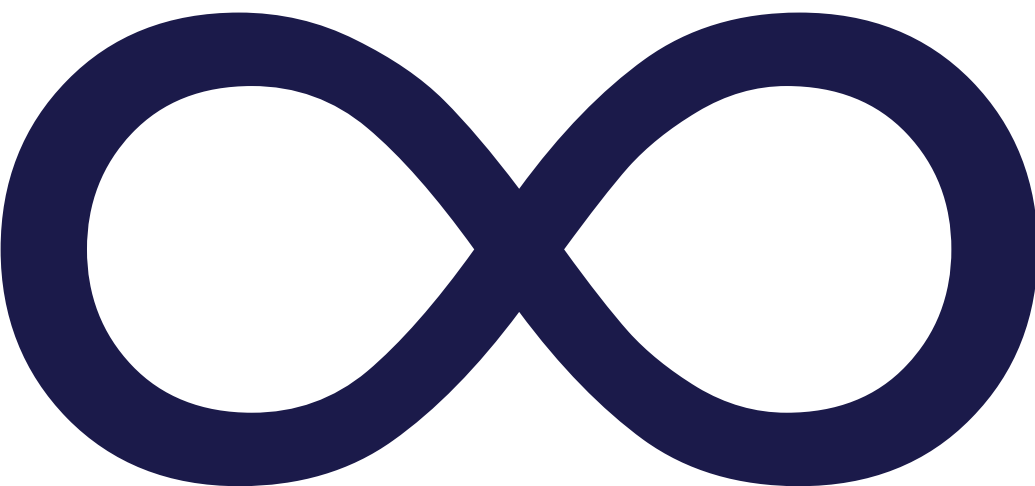
How to promote
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Score	Elements to be scored	Potential spread of scores
5	Excellent Answer	Exemplar response, with a high level of substantiating information and detail provided.
4	Good Answer	High quality response, with good level of substantiating information provided.
3	Acceptable Answer	Good standard of response with majority of requirements met, but with some minor reservations.
2	Poor Answer	Acceptable basic response with significant reservations but not sufficient to warrant rejection.
1	Very Poor Answer	Unsatisfactory response – Does not meet minimum requirements or is inadequately substantiated.
0	No Answer Given	An unanswered response, or a response that does not fulfil the requirement in any way.





Appendix





Appendix

- O1 How do Social Value Models of Delivery relate to the Part 2, Section 16 of the Social Services and Well-being (Wales) Act?
- O2 How to use the commissioning cycle to promote Social Value Models of Delivery.
- O3 Using co-production in tendering to realise greater social value.

Appendix 01

How do Social Value Models of Delivery relate to the Part 2, Section 16 of the Social Services and Well-being (Wales) Act?

Under Section 16 of Part 2 of the Social Services and Well-being (Wales) Act 2014, local authorities have a duty to promote “social enterprises, co-operatives, co-operative arrangements, user-led services and the third sector” in the delivery of care and preventative services.

On close examination of the Act, the duty is sufficiently flexible to allow any type of organisation to meet the criteria (for example, by creating a co-operative arrangement, or by supporting a user-led service).

This flexibility is helpful from the perspective of procurement law, as it is generally not possible to bar an organisation from tendering for a contract simply because it is not a social enterprise, co-operative or part of the third sector. (Regulation 77 offers some wriggle room, but it is for exceptional circumstances, not routine contracting).

It is also helpful that the Code of Practice relating to Section 16 explains that the organisations, arrangements and service types listed in the “duty” are to be promoted because they are oriented towards delivering against the principles of the Act – and adding value.

Consequently, when it comes to tendering for care contracts, commissioners should focus on specifying and scoring tenders against these delivery expectations. In so doing, they will encourage and reward all providers that can demonstrate their ability to deliver a “Social Value Model” of care and support. And in so doing, they will also fulfil their Section 16 duty.

In summary: the focus should be on the pattern of delivery, not the type of organisation.

Involve people and providers in population needs assessments.

Involve them in the review of service provision.

Involve them in the analysis of resource allocations.

Involve them in identifying blockers and enable for the achievement of great social care and added value – and use this to shape policy.

Involve people and providers in planning services

Involve them in the co-designing of services

Involve them in the setting to monitor and evaluate

Use the seven elements of a Social Value Model of Delivery as a framework for planning, co-designing and measuring.

Using the commissioning cycle to promote Social Value Models of Delivery



Involve people and providers in evaluation of services

Use the seven elements of a Social Value Model of Delivery as a framework for the evaluation of individual services and agencies.

Use the seven elements to evaluate the performance of the local market and the strength of contributions from beyond the market.

The seven elements of Social Value Model of Delivery

1. Well-being outcomes
2. Co-production
3. Collaboration
4. Prevention
5. Social value
6. Economic value
7. Environmental value

Involve people and providers in the developing of contracts.

Ensure the seven elements of Social Value Model of Delivery are built into contracts.






Maintain a collaborative relationship with people and providers – using measures as tools for learning.

Help providers to develop their ability to deliver as Social Value Models.

Appendix 03

Using co-production in tendering to realise greater social value.

The objective is to involve people with lived experience in the tendering process by working together with them to:

-  Produce service specifications.
-  Design co-produced method statement questions and model answers.
-  Evaluate submissions.
-  Welcome the successful provider.
-  Monitor and review the contract.

First steps

1. Reach people using established networks.
2. Work closely with procurement and legal to ensure compliance with the regulations and to decide the approach i.e., will people be part of the officer panel working to bring insight to all method statement questions or will people develop one or two method statements that they evaluate?
3. Decide what percentage of the award criteria will be given to the co-produced method statements if this is the approach taken (10/15/20%?)
4. Be clear about the ask and what support people will have to be involved e.g., provide a one-page document that outlines what is being co-produced, the timescales, what support is available, how people will be remunerated etc.
5. Check how much involvement people with lived experience want/have time to commit to.

Next steps

1. Make the approach clear to providers at the tender stage to minimise challenge.
2. Involve citizens in any pre-tender supplier engagement events.
3. Build Co-production expectations into all service specifications/terms and conditions.
4. Adapt current methods for procurement to make them accessible for people with lived experience e.g., easy read scoring mechanisms
5. Lengthen the timescales for the process as extra time will be required.
6. Provide some basic training on key elements of procurement.
7. Support people to be objective whilst not crushing their insight and or their enthusiasm to secure what feels right for them – it will be messy, but that is the point.

Afterwards

1. Provide opportunities to de-brief after the process and keep people in the loop regarding decisions and awards.
2. Involve people in provider feedback and in welcoming new suppliers to the market.
3. Consider what arrangements are required for their ongoing involvement in monitoring and review (if people are interested in an ongoing role).

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