

**REPORT FOR: CABINET**

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<b>Date of Meeting:</b>	13 October 2016
<b>Subject:</b>	Future in Mind – Children and Young People’s Emotional, Health and Well-Being Service
<b>Key Decision:</b>	Yes
<b>Responsible Officer:</b>	Paul Hewitt, Divisional Director of Children and Young People Service
<b>Portfolio Holder:</b>	Councillor Christine Robson, Portfolio Holder for Children, Schools and Young People
<b>Exempt:</b>	No
<b>Decision subject to Call-in:</b>	Yes
<b>Wards affected:</b>	All
<b>Enclosures:</b>	Appendix 1 Equality Impact Assessment Appendix 2 North West London Clinical Commissioning Group: Children and Young People’s Mental Health and Well-Being Transformation Plan – October 2015 and Annexe E – Harrow Local Plan

## **Section 1 – Summary and Recommendations**

This report sets out the background, the present position and the case for the proposed recommendation of jointly commissioning with Harrow Clinical Commissioning Group (CCG) a new emotional, health and well-being service for children and young people living in Harrow.

### **Recommendations:**

Cabinet is requested to:

1. Give approval to commission the Children and Young People's Emotional, Health and Well-Being Service collaboratively with the CCG through the appropriate agreement for 2 years with a potential 1 year extension.
2. Give approval for an extension of up to six months from December 2016 to the current service provider to ensure there is a continued service provision to Children Looked After.
3. Delegate authority to the Corporate Director for People Services, following consultation with the Portfolio Holder for Children, Schools and Young People, together with the Portfolio Holder for Finance and Commercialisation, to award an Agreement to Harrow CCG for the Future in Mind Children and Young People's Emotional, Health and Well-Being Service.

### **Reason:**

To fulfil Harrow's local priority within the Future in Mind Transformation Plan: to develop an integrated Emotional Health and Wellbeing Targeted Service as approved by the Health and Well-Being Board, October 2015. In addition, through the Sustainability and Transformation Plan (STP) for NW London and the local Harrow STP Harrow Council will continue to maintain and protect social care provision and explore further integration with health wherever possible.

To fulfil the statutory requirement of Local authorities, CCGs, NHS England and Public Health England in cooperating to commission health services for all children in their area.

To support the corporate parenting responsibilities of local authorities which includes having a duty under section 22(3)(a) of the Children Act 1989 to safeguard and promote the welfare of the children they look after, including the promotion of the child's physical, emotional and mental health.

To enable the Local Authority to fulfil its statutory duty of 'Promoting the Health and Well-Being of Looked-After Children' in response to the statutory guidance for local authorities, clinical commissioning groups and NHS England, March 2015.

## **Section 2 – Report**

### **Introductory paragraph**

1. To support the corporate priorities of ‘Promoting the Health and Well-Being of Looked-After Children’, in October 2015 the Health and Well-Being Board approved the Local Authority’s commitment to developing an integrated Emotional Health and Wellbeing Targeted Service which supports Harrow’s local priority within the Future in Mind Transformation Plan, whilst also making a difference for families, communities and the vulnerable.
2. The recommendation for approval to jointly commission the new service with Harrow CCG, will mean that the council is fulfilling its statutory obligations of: ‘Local authorities, CCGs, NHS England and Public Health England must work together to commission health services for all children in their area’. The Statutory guidance for local authorities, clinical commissioning groups (CCG) and NHS England, March 2015 page 6.
3. The Statutory guidance for local authorities, clinical commissioning groups (CCG) and NHS England, March 2015 states that the corporate parenting responsibilities of local authorities include having a duty (under section 22(3)(a) of the Children Act 1989) to safeguard and promote the emotional, mental health and physical welfare of the children they look after.

### **Background**

4. The core of government’s approach is to make sure that everyone who works with children and families have the skills, knowledge and motivation to do the best job they possibly can. They must ensure that children and young people are safe and can develop and succeed across all outcomes.
5. The cross-government strategy, No Health without Mental Health, February 2011 states: ‘The government is committed to ensuring that front line staff are enabled to put innovative ideas into practice. Ensuring that front-line staff are knowledgeable motivated and supported is one of the keys to closing the gap between central policy ambitions and the changes that actually take place. By adopting a personalised approach, practitioners working with service users, carers and their families will deliver the outcomes that individuals want.’ (p36).
6. A key outcome of the strategy is ‘More people will have a positive experience of care and support.’ the implementation framework specifically states that ‘frontline workers, across the full range of

services, are trained to understand (emotional wellbeing) and mental health and the principles of recovery' (p12). *No Health Without Mental Health: Implementation Framework, HM Government, July 2012*

7. There is explicit reference in both documents to the need for innovative service models. Our Systemic Early Intervention and Social Work Support Service model was designed in August 2012 with the aim of strengthening social workers' and early interventions workers' abilities to help children, young people and families take control of their lives and relationships and increase their self-esteem and emotional resilience.

## **Current situation**

8. Morning Lane Associates were awarded an initial two year contract with the option of a 1 year extension to provide the Systemic Early Intervention and Social Work Support Service for the period from December 2012 – December 2014. The initial contract value was £322,000 per annum.
9. The service comprised of clinicians and psychologists who were allocated to different teams across the Early Intervention Service, Children In Need, Children in Need Assessment and the Children Looked After services.
10. There were three key areas of service delivery:
  - leading reflective consultation in group systemic units/pods where families presenting particular clinical difficulties are discussed and social workers are encouraged in their practice of systemic ideas
  - providing one-to-one clinical support to Social Workers seeking further consultation beyond the group setting
  - working directly with families and children where clinical expertise has the potential to break the cycle of repeated family breakdown or stabilise placements
11. The 1 year extension was exercised for the period from December 2014 – December 2015, with a reduced budget of £50,000 as required by the Medium Term Financial Strategy, commencing April 2015.
12. The reduction in budget led to a re-configuration of service delivery by Morning Lane which resulted in prioritising the local authority's statutory responsibility and needs of Children Looked After.
13. In March 2015 the government published Future in Mind, their strategy for promoting, protecting and improving children and young people's mental health and wellbeing. The report made 49 recommendations to improve young people's mental health services over the next five years with funding available for collaborative approaches to invest in children and young people's mental health services.

14. In order to access this funding, NHS Clinical Commissioning Groups (CCG) facilitated the development of local transformation plans, in collaboration with key stakeholders, including the Local Authority and Schools, outlining the way in which this money will be invested.
15. The Local Authority's investment into the Future in Mind local transformation plan would be the current contract value assigned to Morning lane Associates of £270,000 per year. Harrow CCG agreed to match this funding for the development of a new emotional, well-being service for children and young people living in Harrow. Schools will also be considering their individual contributions to the new service.
16. Harrow CCG together with the North West London CCG's collegiate wrote a joint plan with 8 priority areas, all with their local objectives which was approved by Harrow's Health and Well-Being Board in October 2015 and approved by NHS England in December 2015, Appendix 2.
17. The current Systemic Early Intervention and Social Work Support Service was due to end in December 2015, in light of the Future in Mind Strategy, in November 2015 approval was given by way of Strategic Procurement Board and the Portfolio Holder for Finance and Major Contracts and the Corporate Director for Children and Families to directly award a one year contract to Morning Lane Associates. The reason for the approval was to allow the Council to consider their options in commissioning a new service as per the Future in Mind Transformation Plan.

### **Why a change is needed**

18. The need to change the way in which partners commission emotional, mental health and well-being services is evident within the Future in Mind report that was published in March 2015. There is positive value of an enhanced and effective service which is best achieved through joint commissioning.
19. The report was produced by the Children and Young People's Mental Health and Wellbeing Taskforce, who were mandated to consider ways to make it easier for children, young people, parents and carers to access help and support when needed and to improve how children and young people's mental health services are organised, commissioned and provided. Working towards preventative integrated provision to maximise health outcomes.
20. The report makes 49 recommendations to improve young people's mental health services over the next five years and to enable an additional 70,000 young people to be treated by 2020. Children and young people's mental health and wellbeing are a national, regional and local priority. The Future in Mind report offers CCG's and key stakeholders the opportunity to work together to bring about real

transformation in the provision of services for this cohort of our population.

21. Over £1.5 million is spent each year by Lead Commissioning Authorities such as Health, Local Authority and Schools in Harrow, addressing mental health issues for children and young people, while the wider health, social and economic impact of mental health is far greater. Tackling the cost of mental illness has been identified as a priority and poses a challenge across Harrow.
22. By collaborating jointly with Harrow CCG and potentially with schools, the investment is maximized. Furthermore, the number of children and young people with needs that the service can work with is multiplied through joint commissioning.
23. Working in partnership develops the ownership and responsibility of all stakeholders, and supports the on-going sustainability of the service beyond the life of the contract. Through commissioning collaboratively, services are less siloed; promoting integration and overheads are reduced; offering a better value for money service. For families, this also means more joined-up, streamlined services, with clear pathways and consistency of service.
24. This new proposed service will support those children and young people aged 0 to 18, or up to 25 with a Special Educational Need or Disability with emotional health and wellbeing needs, that do not meet the threshold for specialist mental health services. In Harrow this covers approximately 3695 children and young people (Office for National Statistics mid-year population estimates for 2012). The service will include assessment, diagnosis, and treatment through a range of short to medium term therapeutic interventions. This new service will add value to existing provision through an enhanced referral route, enabling access for vulnerable young people and their families.

## **Options considered**

25. The statutory legal framework, including national guidance has been considered in reviewing the commissioning options. Relevant Directors, Heads of Children's Services Teams, Heads of Schools, Young People and their families have been consulted when looking at best practice and learning points across the 8 North West London Group. This information can be found in Appendix 2.
26. Do not commission a service. This would not be considered a viable option for the local authority. Looked-after children, children in need and children in need of early support are more likely to have experienced deprivation and poverty as a result of low family income or parental unemployment. About 38-49% of children and young people who are looked after in England are reported to have emotional and mental health problems and a high proportion experience poor health, educational and social outcomes after leaving care. The local authority

would therefore not be fulfilling their statutory duty with regards to promoting the emotional health and well-being of children looked after.

27. Commission a service independently, this option has been considered. The current service provider, Morning Lane Associates (MLA) were commissioned in October 2012 to provide Systemic Early Intervention and Social Work Support Service to assist front line staff working directly with children and families with emotional and mental health needs, to develop their skills, knowledge and confidence in this area. This service has been extended beyond the contract term since the Future in Mind strategy was introduced in March 2015, to allow the local authority to consider the implications of the recommendations.
28. Commission Service collaboratively with Harrow CCG via Section 75 of the National Health Service Act 2006 agreement. There is a strong emphasis on Health and Social Care partners working together to commission services that meet the needs of vulnerable children and young people and their families in their area. Through consultation with stakeholders, young people and professionals, the option of commissioning together with Health is recommended. The Local Authority would benefit from combining their limited resources to reach a greater proportion of vulnerable children and young people and thus meet their statutory responsibilities.

## Implications of the Recommendation

### Resources, costs

29. The following is based on an anticipated total annual contract value of £540,000 (made up of £270,000 contribution from the CCG and £270,000 Local Authority contribution). The Staffing calculations are based on Royal Collage of Psychiatrist guidance and averaged assumptions:

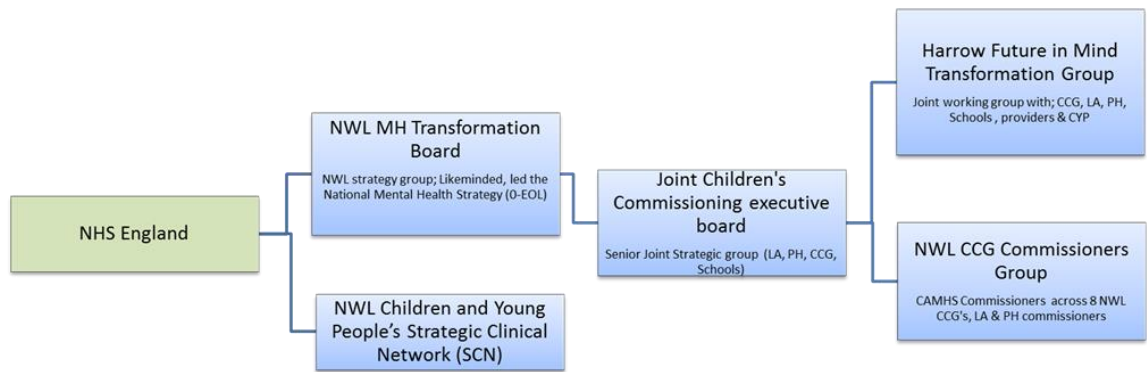
Direct delivery	
Full time equivalent	9
Service operations (Manager, admin)	
Full time equivalent	3
Total service overheads	24%
Total no. annual therapeutic sessions	7380
Total therapeutic sessions per month	615
Total no. of CYP seen annually (av. 6 sessions)	1230
Percentage of the prevalence	33%

30. For illustration purposes each 1 Full time equivalent Clinician's direct delivery is calculated as:
- 7 hour day x 5 days a week = 35 hours a week
  - Minus holidays (6 weeks) and study leave (1 week) = 45 weeks
  - Minus supervision, team meetings, CPD (4 weeks) = 1 weeks
  - 7 hours per day (3 hours admin/break) = 4 sessions/ day at 1h each
  - 5 days a week = 20 sessions per week
  - 20 x 41 weeks = 820 a year
  - $820 / 12 = \mathbf{68 \text{ sessions per month}}$
31. The proposed model will offer more therapeutic sessions per month than what we currently are able to commission internally. Therefore, in the long term, by investing in this new service provision, will have a substantial impact on reducing, delaying and preventing mental health needs from occurring, as all the research noted in this report demonstrates. Not only this, but the service will promote resilience and self-help approaches, with the aim of reducing referrals to specialist mental health services when needs have progressed and worsened.

### **Performance Issues**

32. The current service is monitored by the council through scheduled quarterly meetings with the lead commissioner, service provider and the Divisional Director of Young People Services with input from service managers.
33. The new proposed service and performance indicators will be monitored by the Transformation Group which was established (formerly Harrow's Emotional, Behavioural and Mental Health Group), to progress the implementation of the Local Transformation Plan. The Transformation Group meets monthly and includes the following members:
- Clinical Director with lead for Paediatrics (Chair)
  - Divisional Director Children and Young People Services
  - Children Services Commissioner, Harrow Council
  - Integrated Children's Commissioning Manager, Health and Social Care
  - Head of Service, Early Intervention, Children's Centres and YOT
  - Deputy Head, Canons High School
  - Head Teacher, Kingsley High School
  - Head of Alexandra School
  - Head Teacher, Roxeth Primary
  - Public Health Strategist – Children
34. In addition to the Transformation Board, there is a formal governance structure that will be jointly accountable for the risks, implications and monitoring of the outcomes and performance as set in the service specification.





## Risk Management Implications

35. Risk included on Directorate risk register? Yes  
Separate risk register in place? No
36. The key risks include: Financial, demand for service and implementation of service.
37. Financial:
- Annual investment in the service of £270,000 from the LA alone, will deliver a quarter of the proposed service model, significantly reducing the numbers of children and young people that may be seen, with a majority of children and young people with eligible needs still without a service.
  - The Future in Mind funding is only sustainable for the next three years. There is a risk in raising expectations for a service that may be decommissioned at the end of the three years if funding is not renewed.

Mitigation: The service will prioritise referrals based on level of need and vulnerability of the child/young person. Schools may invest in other emotional, mental health and well-being services within their individual schools and the local authority will continue to provide services for children looked after as per the council's corporate responsibilities.

Opportunities: There may be savings identified if the LA does not invest in the proposed service.

38. Demand for Service
- There might be higher demand for this service than anticipated which the service may not be able to cope with, creating a long waiting list.

Mitigation: The service will be able to work with small numbers of children and young people with emotional health and wellbeing needs in Harrow.

Opportunities: Schools may recognise the high demands and be in a position to consider financial contributions. As the demand increases, there may be an increased service delivery once financial commitment is secured, thus reducing waiting lists.

39. Implementation of new service

Slippage in the timeline may cause delays to the service launch date.

- The awarded service providers may not be able to mobilise quickly enough.
- There may not be a suitable provider(s) that is able to deliver this service.

Mitigation: Harrow CCG will take the lead in the procurement process, the proposed timeline allows for these risks to be mitigated. There will continue to be a service available in the interim for the most vulnerable children and young people.

Opportunities: Collaborative working with Health and Schools to promote joint accountability and sustainability of the service. Joint commissioning should also maximise the benefits of the service through ensuring it is as joined up and seamless for families as possible; based on identified need.

## Legal Implications

### 40. Recommendation 1- New Scheme

Section 75 of the National Health Service Act 2006 permits CCG and Local Authorities to commission services jointly.

### 41. Recommendation 2- Contract Extension

(i) the original contract award was awarded to Morning Lane Associates for the period December 2012 – December 2014, the Council exercised its option and extended that contract for a further year until December 2015.

(ii) A procurement Gate 2 report was approved on the 11<sup>th</sup> January 2016 to make a 6 month direct award to Morning Lane from December 2015 to June 2016, with an option to extend for a further 6 months which expires December 2016.

(iii) The current recommendation is for an extension of the direct award contract up to 6 months.

(iv) The original contract in 2(i) was a Part B Services award as defined in the Public Contracts Regulations 2006 (PCR2006) and so was not regulated by the PCR 2006.

(v) The direct award contract and any extension will be Schedule 3 services under the Public Contract Regulations 2015 ('PCR 2015'), these services are regulated by the PCR 2015, if the total value of the Schedule 3 service exceeds £589,148.

(vi) The aggregate value of the direct award (£272,336) and the value of the current proposed extension £270,000 makes a total of £542,336, this proposal is therefore very near the threshold of ('PCR 2015') £589,148.

(vii) As stated the current proposal is very close to the PCR 2015 threshold, this means the extension to this service cannot exceed the value of £270,000, stated in this report.

(viii) If the value exceed the PCR threshold this could put the Council at risk of challenge for not observing PCR requirements which include advertising the service. Legal have been informed by Children and Young Persons Services that it is unlikely that they will need the full 6 months to let the service.

(ix) Though the aggregate value of the direct award and the extension is less than the PCR threshold, there is still a duty on authorities to observe the Treaty principles of non discrimination, equality, proportionality and transparency.

## Financial Implications

42. The anticipated total annual contract value is £540,000 made up of £270,000 contribution from the CCG and £270,000 Local Authority contribution.
43. In addition, funding may be available from contributions from Harrow schools. This funding has not been factored into the base budget for this project and therefore will serve to provide additional capacity within the project if funding is secured.

## Equalities implications / Public Sector Equality Duty

44. Section 149 of the Equality Act 2010 requires that public bodies, in exercising their functions, have due regard to the need to (1) eliminate discrimination, harassment, victimisation and other unlawful conduct under the Act, (2) advance equality of opportunity and (3) foster good relations between persons who share a protected characteristic and persons who do not share it.
45. Equalities Impact Assessment has been undertaken on the proposals to commission the Children and Young People's Emotional, Health and Well-Being Service collaboratively with the CCG via Section 75 for 2 years with a potential 1 year extension. The Equalities Impact Assessment is included in Background Papers.
46. The conclusions of this assessment is that the implications are either positive or neutral, with no adverse effect. The service will reduce inequalities by improving access to emotional, mental health interventions to those vulnerable children and young people in Harrow.
47. The assessment has not identified any potential for unlawful conduct or disproportionate impact and conclude that all opportunities to advance equality are being addressed.

## Council Priorities

47. The Council's vision is: **Working Together to Make a Difference for Harrow**

The Council priorities are as follows:

- Making a difference for the vulnerable
- Making a difference for communities
- Making a difference for local businesses
- Making a difference for families

The Council Strategic Themes are to:

- Build a Better Harrow.
- Be More Business-like and Business Friendly.
- Protect the Most Vulnerable and Support Families.

48. The recommendation supports these priorities and strategic themes by:

- Ensuring Harrow Council fulfils its statutory duty of 'Promoting the Health and Well-Being of Looked-After Children' in response to the statutory guidance for local authorities, clinical commissioning groups and NHS England, March 2015.
- To support the corporate parenting responsibilities of local authorities which includes having a duty to safeguard and promote the welfare of the children they look after, including the promotion of the child's physical, emotional and mental health.
- To fulfil the statutory requirement of Local authorities, CCGs, NHS England and Public Health England in cooperating to commission health services for all children in their area, thus building a better Harrow.
- Protect the Most Vulnerable and Support Families by providing opportunities to children and young people that have a positive impact on their emotional wellbeing which can impact on the community overall.

### **Section 3 - Statutory Officer Clearance**

Name: Jo Frost	<input checked="" type="checkbox"/>	on behalf of the Chief Financial Officer
Date: 31 August 2016		
Name: Laretta Faulkner	<input checked="" type="checkbox"/>	on behalf of the Monitoring Officer
Date: 1 September 2016		

<b>Ward Councillors notified:</b>	NO, as it impacts on all Wards
<b>EqIA carried out:</b>	YES
<b>EqIA cleared by:</b>	Chair of the Directorate Equality Task Group

## **Section 4 - Contact Details and Background Papers**

### **Contact:**

Priya Ganatra  
 People Services Commissioner  
 020 84209237  
[Priya.ganatra@harrow.gov.uk](mailto:Priya.ganatra@harrow.gov.uk)

### **Background Papers:**

1. Equalities impact Assessment (see enclosure)
2. Promoting the health and well-being of looked-after children: Statutory guidance for local authorities, clinical commissioning groups and NHS England:  
[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/413368/Promoting\\_the\\_health\\_and\\_well-being\\_of\\_looked-after\\_children.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/413368/Promoting_the_health_and_well-being_of_looked-after_children.pdf)
3. No Health without Mental Health: A cross-government mental health outcomes strategy for people of all ages, February 2011  
[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/213761/dh\\_124058.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/213761/dh_124058.pdf)

<b>Call-In Waived by the Chair of Overview and Scrutiny Committee</b>	<b>NOT APPLICABLE</b>  <i>[Call-in applies]</i>
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