

| Report for: | Cabinet |
| --- | --- |
| Date of Meeting: | 15 September 2022 |
| Subject: | Children and Young People’s Emotional Health and Well-Being Service |
| Key Decision: | Yes, decision effects communities living or working in an area of two or more wards of the Borough |
| Responsible Officer: | Peter Tolley - Director of Children’s Services |
| Portfolio Holder: | Councillor Hitesh Karia - Portfolio Holder for Children’s Services |
| Exempt: | No |
| Decision subject to Call-in: | Yes |
| Wards affected: | All |
| Enclosures: | None |

| Section 1 – Summary and Recommendations |
| --- |
| This report sets out the background, the present position and recommendations for re-tendering the current emotional, health and well-being service for children and young people living in Harrow, jointly with NHS North West London Integrated Care Board (ICB). Recommendations: Cabinet is requested to:   1. Approve the commencement of the re-procurement of the Children and Young People’s Emotional, Health and Well-Being Service collaboratively with NHS North West London Integrated Care Board (ICB) for a 3 year term with the option to extend for a further 2 years via the agreement between the Council and North West London CCG under s75 of the National Health Service Act 2006.  Reason: (for recommendations)  1. To fulfil the statutory requirement of Local authorities and NHS in commissioning health services for all children in their area. 2. 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

### Introduction

1. Harrow commissioned the Children and Young People’s Emotional, Health and Well-Being Service jointly with NHS North West London ICB in 2017. The service is provided by Barnardo’s and is known as Harrow Horizons.
2. Harrow Horizons provides services for Children Looked After and children known to social care, in accordance with the Local Authority’s duty and universal services. The current contract ends in March 2023, and there are no further extension periods available.
3. This report proposes that the service is redesigned and re-procured, with the ICB as the lead commissioner. The recommendation for approval to re-tender the jointly commissioned service with North West London ICB, will ensure that the Local Authority fulfils its statutory obligations to work together to commission health services for all children in their area. The procurement will contribute to the Council’s priority of Putting Residents First by providing mental health and emotional services for young people.

### Options considered

## The following options have been considered:

* Re-design and re-tender the service collaboratively with NHS North West London ICB via Section 75 of the National Health Service Act 2006 agreement.
* Commission a service independently. The Local Authority would lose the benefit from combining their limited resources to reach a greater proportion of vulnerable children and young people and thus meet their statutory responsibilities.
* Do not re-tender the service and allow the current contract to come to an end on 31st March 2023. This would not be considered a viable option for the local authority. Children looked-after, children in need and children in need of early support are more likely to have experienced multiple adverse childhood experiences, including deprivation and poverty as a result of low family income or parental unemployment, abuse, and trauma. 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.

1. The preferred option is to re-tender jointly with Health and develop the service specification with stakeholders, young people and professionals.

## Background

1. The Local Authority in accordance with the Children Act 1989, has a duty to ‘Promote the Health and Well-Being of Looked-After Children’. Increasing and improving mental health services through an integrated approach with local authorities and health services, was a key objective in the Government’s Future in Mind Transformation Plan. In this context, in October 2015, the Health and Well-Being Board, agreed to develop an integrated Emotional Health and Wellbeing Targeted Service with the former Harrow Clinical Commissioning Group (CCG) and the Council.
2. 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.
3. Within the Children’s Commissioner’s Report 2020/21, there is evidence that supports the need for local authorities to provide emotional, mental health support for Children Looked After (CLA).

1. Due to multiple adverse childhood experiences and trauma, Children Looked After are more likely to experience a mental health problem; the 2015 Future in Mind and the NHS Long Term Plan strategies identified CLA, as one of the most vulnerable groups in terms of emotional wellbeing and mental health.
2. From NHS national data, the estimation of children looked after meeting the criteria for a diagnosable mental health disorder will be approximately 50 per cent. The Department of Education and Department of Health acknowledge this in their statutory guidance on promoting the health and wellbeing of looked-after children.

## Current situation

1. Harrow Horizon’s Children and Young People’s Emotional Health and Wellbeing Targeted Service is delivered and managed by experienced clinicians and mental health practitioners, the service works closely with schools, providing short- to mid-term therapeutic intervention. Offering mental health and therapeutic support, including early intervention. It offers a person centred, age appropriate and flexible approach.
2. An innovative approach to the co-production of the Harrow Horizons service was adopted. Children and young people from Harrow were involved in the design of the current service, selecting the provider and naming the service from the outset. Subsequently a small number of young people have continued to be involved in Harrow Horizons youth participation group that encourages the voices of service users to help develop and improve the quality of provision.
3. The Council and Harrow CCG entered into a Section 75 Agreement to commission this service. As the lead commissioner and following a competitive procurement process, Harrow CCG, appointed the national charity Barnardo's, as the service provider.
4. The contract with Barnardo's commenced in April 2017, the local authority in partnership with Health intends to procure a new service commencing 1st April 2023.

1. The contract value of £550,000 per annum is shared between the local authority (£270,000) and NHS NW London ICB, (£280,000).

**Why a change is needed**

1. As the service contract period ends, there is the opportunity to review the outcomes and asses the model that was designed in 2016. Since the service commenced there have been a number of other initiatives to support children and young people’s mental health and wellbeing. These include both NHS, Local Authority and community/voluntary sector services for example mental health support teams, 16-25 young adult offer and social workers in school initiative.
2. In addition, there are also post covid emerging needs which need to be considered. Undertaking a new service redesign at this time will be in the context of current services and demand ensuring that there is a holistic approach to the offer in Harrow. It is acknowledged this does not capture the full complexity of need for children/young people with mental health difficulties as detailed by Future in Mind.
3. As children and young people’s emotional wellbeing and mental health affect all aspects of their lives, no one service alone will be able to meet their needs. The procurement proposed will be part of the local integration of children and young people’s pathways, and in line with the development of an integrated family hub model.
4. By working in partnership with the voluntary sector and wider partners, for example social care, schools’, GP’s and families’/carers, improving understanding and supporting mental health interventions with children and young people and improving outcomes. The new service offer will address inequalities, including focusing on areas of high deprivation or low rates of access into traditional healthcare systems.
5. The development of a new service specification will be aligned to the Thrive framework, which is an integrated, person centred and needs led approach to delivering mental health services. The framework will focus on the “Getting Help” and “Getting More Help” quadrants.
6. Getting Help -This grouping comprises those children, young people and families who would benefit from focused, evidence-based help and support, with clear aims, and criteria for assessing whether these aims have been achieved. The professional may not necessarily be a trained mental health provider but may be a range of people who can provide targeted, outcomes-focused help to address the specific mental health issue.
7. Getting More Help – include those who need more extensive and specialised goals-based help. This grouping also comprises those children, young people and families who would benefit from focused, evidence-based interventions, with clear aims, and criteria for assessing whether these aims have been achieved. In this service this would be for a small number of children for example those children looked after or those with ASD.
8. In summary, some of the key principles of the Thrive framework are:

* Needs-led
* Outcome-focused
* Shared decision making
* Proactive prevention and promotion
* Partnership working
* No “wrong door”

1. The specification will be developed and informed by the Hay Harrow 2022 Mental Health review (2022), Harrow Public Health’s Children and Young People’s Emotional Wellbeing and Mental Health Needs Assessment (2020) and the People and Young Peoples Integrated Partnership priority to identify and develop services that improve the emotional wellbeing and mental health of children and young people. This will build on the extensive engagement work carried out with children, young people, parents and professionals in 2016, that informed the original business case/specification for the service.
2. The new service will be informed by a sound evidence base and sources of data and analysis about the local partnerships’ arrangements for children, young people and families. It will be underpinned by a population health approach to tackle inequalities.
3. 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).
4. There is an additional need to ensure the new service specification meets corporate parenting responsibilities and prioritises the mental health needs of children looked after for both assessments and therapeutic support. The number of children looked after by Harrow Council has remained largely stable over time, at approximately 185 children at any given time.
5. Because of their experiences both before and during care, looked-after children are at much greater risk of poor mental health than their peers. [Research](https://www.nice.org.uk/guidance/ph28/evidence/ep22-the-mental-health-of-looked-after-children-under-5-years-joe-sempik-430133293) suggests that around 45% of looked-after children have a diagnosable mental health disorder, and up to 70%-80% have recognisable mental health concerns.<https://www.healthylondon.org/mental-health-services-for-looked-after-children-and-care-leavers-new-survey-results> July 2020
6. As a result of waiting time and high access thresholds smaller problems too often escalate to the point of crisis (children and young people’s mental health House of Commons Committee report 21/22). It has also been reported that prolonged waiting times to receive mental health services are common and may have negative consequences for example are more likely to refuse services if they face longer waiting times – *(The Effect of Waiting Time on Youth Engagement to Evidence Based Treatments January 2013* [*Community Mental Health Journal*](https://www.researchgate.net/journal/Community-Mental-Health-Journal-1573-2789)*50(2) January 2013 Community Mental Health Journal 50(2)*
7. The service will include assessment 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 children with a social worker, other vulnerable young people and their families.

#### Performance Issues

1. Harrow Horizon received 754 referrals, of which 703 were accepted between April 2020-March 2021 which was during Covid. The impact of the pandemic is a key contributing factor. From April 2021- March 2022 Harrow Horizons received 987 referrals with 935 receiving an intervention. This has impacted on waiting times.
2. Referrers report the long waiting times are impacting on children's mental health and emotional wellbeing of some of the most vulnerable groups as they have to wait to access support. Long waiting times can result in increase in severity of mental health presentations, as a result children end up in crisis. Reduced waiting times will be a focus in the development of the new service.
3. The new service and performance indicators will be jointly monitored by the local authority and NHS North West London ICB. The performance and monitoring of outcomes will be reported the Integrated Children and Young People’s Board.
4. A key performance indicator would include priority access for children looked after and children with a social worker, to ensure this vulnerable group is triaged appropriately in referrals, assessment and intervention. The Multiagency partnership has undertaken work to identify the cohort of children looked after by Harrow who are most likely to require mental health services, based on key well-being indicators, including strength and difficulty questionnaires (SDQs), placement stability, missing episodes and Education, Health and Care Plans (EHCP). To avoid delays in providing mental health support, the new service will have a dedicated offer of consultation and liaison support for looked after children and/or their network to ensure the needs of this vulnerable group are appropriately prioritised.

#### Environmental Implications

1. There are no environmental issues identified

#### Data Protection Implications

1. There are no data protection implications. The current service provider has a signed service level agreement in place with the Local Authority and Health.

### Risk Management Implications

1. Risks included on corporate or directorate risk register? NO

1. Separate risk register in place? NO
2. The relevant risks contained in the register are attached/summarised below. NO
3. The following key risks should be taken into account when agreeing the recommendations in this report:

| **Risk Description** | **Mitigations** | **RAG Status** |
| --- | --- | --- |
| Failure to fulfil statutory requirement to work together with NHS to commission services | * Agree to combine budgets and jointly work together to redesign 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. | **Green** |
| Failure to fulfil statutory duty of ‘Promoting the Health and Well-Being of Looked- After Children’ | * 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, prioritising children with a social worker. | **Green** |
| Failure to follow Procurement regulations | * NHS North West London ICB will take the lead in the procurement process. * The council will work closely with the NHS to ensure all procurement regulations are followed. | **Green** |
| Failure to support the corporate parenting responsibilities of the local authority | * The new service specification will be designed to meet the Authority’s corporate parenting responsibilities and prioritises the mental health needs of children looked after for both assessments and therapeutic support. | **Green** |

### Procurement Implications

1. The Council will work closely with NHS North West London ICB and have oversight of the procurement plans, tender documentation and ensure that this is compliant with the Public Contract Regulations 2015.

### Legal Implications

1. Under section 22(3)(a) of the Children Act 1989, local authorities 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.
2. Section 75 of the National Health Service Act 2006 permits CCG and Local Authorities to commission services jointly. Section 75 NHS Act 2006 arrangements are not subject to the Council’s Contract Procedure Rules.
3. The Council and North West London CCG entered into a Section 75 Agreement under the National Health Service Act 2006; this agreement enables the Council and the CCG to enter into partnership arrangement to provide services and pool resources. This agreement remains valid until 2027 therefore the commissioning intentions as set out in this report for the emotional health and wellbeing services can be fulfilled through the Section 75 Agreement. The CCG as lead commissioners and the contracting authority must adhere to the Public Contracts Regulations 2015 and any applicable NHS Regulations in their appointment and award of the new contract.

**Financial Implications**

1. The anticipated total annual contract value is £550,000 comprising £280,000 contribution from North West London ICB and £270,000 Local Authority contribution.
2. Financial commitment will be for 3 years plus a maximum of 2 years extension periods.

### Equalities implications / Public Sector Equality Duty

1. Equalities Impact Assessment was undertaken as part of the initial procurement process. The findings in this assessment showed 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.
2. The assessment has not identified any potential for unlawful conduct or disproportionate impact and conclude that all opportunities to advance equality are being addressed.
3. NHS North West London ICB are the leading the procurement process and will complete a equality impact assessment.

* During the monitoring of the contracts, recent equalities data on the service users since the commencement of the service shows;
  + **Increase** in demand, 233 referrals more in 2021/22 than in the previous year.
  + Slightly more girls than boys - 54% girls, 45% boys and 1% other
  + **38%** 5–11-year-olds, **44%** 12-15 year olds and with smaller percentages for the under 5’s,16- 17 year olds and with 1% 18-25 with SEND

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Ethnicity Data**   |  |  | | --- | --- | | **Asian or Asian British:** | 36% | | **White or White British:** | 34% | | **Mixed Race:** | 13% | | **Black or Black British:** | 9% | | **Other Ethnic Identity:** | 8% | | **Disability Data**   |  |  | | --- | --- | | **Total % of CYP with Known Disability** | 11% of all referrals | | **ASD:** | 41% | | **ADHD:** | 29% | | **Learning Disability:** | 13% | | **Physical Disability:** | 6% | | **Others  Complex or Multiple Needs, Sensory Impairment, Behavioural Disability, speech, language or communication** | 11% | |

## Section 3 - Statutory Officer Clearance

**Statutory Officer: Jo Frost**

Signed on behalf of the Chief Financial Officer

**Date:** 16 August 2022

**Statutory Officer: Puja Shah**

Signed on behalf of the Monitoring Officer

**Date:** 26 August 2022

**Chief Officer: Peter Tolley**

Signed off by the Director

**Date:** 26 August 2022

**Head of Procurement: Lisa Taylor**

Signed on behalf of the Head of Procurement

**Date:** 23 August 2022

**Head of Internal Audit: Susan Dixson**

Signed by the Head of Internal Audit

## Date: 1 September 2022

## Mandatory Checks

### Ward Councillors notified: NO, as it impacts on all Wards

### EqIA carried out: NO

The initial EqIA was carried at the start of the procurement. NHS North West London is the lead and will carry out a joint EqIA.

## Section 4 - Contact Details and Background Papers

**Contact:** Priya Ganatra, Strategic Commissioning Manager

[Priya.ganatra@harrow.gov.uk](mailto:Priya.ganatra@harrow.gov.uk)

Phone: 07976957586

**Background Papers:** None

Call-in waived by the Chair of Overview and Scrutiny Committee - **NO**