

Decision to inject Supporting Families funding into to 3 x contracts to enable Specialist Coordinator Roles in Early Help

Date: 15th November 2022

Report of: Children & Families - Commissioning Team

Report to: Director of Children & Families

Will the decision be open for call in? Yes No

Does the report contain confidential or exempt information? Yes No

Brief summary

- This is a key decision report regarding use of some of the Earned Autonomy Supporting Families (Families First) funding. The request to take a key decision was published on the list of forthcoming decisions on 14th October 2022.
- The report seeks permission to inject Supporting Families funding into contracts held by the Authority for the purposes of specialist coordinator roles in Early Help. The contracts are all commissioned by Adults & Health:
 - For the Community Drug and Alcohol Prevention, Treatment and Recovery Service (currently known as Forward Leeds)
 - For the Community Based Mental Health Service (currently known as Live Well Leeds).
 - For the Leeds Domestic Violence Service Women's Aid (DN194503).
- Contractual arrangements have been in place for these specialist coordinators within the above contracts since July 2019. This was obtained initially via decision D48705, a subsequent extension to this was sought in March 2021 via decision D52901 with approval for the current arrangements via decision D55039 in February 2022.
- The current arrangements are due to expire in March 2023. This report is seeking permission to inject Supporting Families funding to commence on 1st April 2023 for a period of 24 months (up to 31st March 2025). The total cost of the decision is: £772,454. This is broken down to: 2023/24 = £383,551, 2024/25 = £388,904

Recommendations

- a) The Director is recommended to approve:
- 1) An injection to the contract for the Community Drug and Alcohol Prevention, Treatment and Recovery Service (currently held with Humankind and known as Forward Leeds DN210921). The injection of funds is Supporting Families - Earned Autonomy funding of up to £250,262.00 to commence on 1st April 2023 for 24 months for the purposes of 3 x specialist coordinators for substance misuse. A new contract for the Community Drug and Alcohol Prevention, Treatment and Recovery Service is to be awarded to commence on 1st April 2023 and a separate decision has been sought for this (D55671).
 - 2) An injection to the contract for the Community Based Mental Health Service (currently held with Touchstone and known as Live Well Leeds DN325642). The injection of funds is Supporting Families - Earned Autonomy funding of up to £277,793.00 to commence on 1st April 2023 for 24 months for the purposes of 3 x specialist coordinators for mental health. The current contract with Touchstone is due to expire on 31st March 2024. A variation in respect of this injection will be made for 12 months (1st April 2023 to 31st March 2024) in accordance with Contract Procedure Rule 21.7 and under the Public Contracts Regulations 2015 via Regulation 72 (1) (b) Modification of contracts during their terms. The tender for the new Community Based Mental Health Service for a new contract commencing on 1st March 2024 will include an injection of supporting Families funding for 12 months.
 - 3) An injection to the contract for the Domestic Violence and Abuse Services (currently held with Leeds Women's Aid and known as Leeds Domestic Violence Service DN194503 - CONTRACT-9Y9N-Z2LOII). The injection of funds is Supporting Families - Earned Autonomy funding of up to £244,400.00 to commence on 1st April 2023 for 24 months for the purposes of 3 x specialist coordinators for domestic violence. This will be done via a variation to the contract in accordance with Contract Procedure Rule 21.7 and under the Public Contracts Regulations 2015 via Regulation 72 (1) (b) Modification of contracts during their terms.
- b) The total value of this decision is £772,454.00 and is therefore a key decision and subject to call in

What is this report about?

- 1 This report seeks permission inject Supporting Families funding with the city's commissioned providers for substance misuse, domestic violence and mild to moderate adult mental health to continue specialist coordinators roles within Early Help.
- 2 An Early Help review has taken place and ascertained that continuation of this provision is required and is an essential element of the city's Early Help system. The main reasons for this are to:
 - Be able to draw on the expertise, knowledge and latest intelligence and practice of the lead organisations as the experts in their field.
 - Sharing of best practice in the city in line with operating practices in each of the contract areas.
 - Ensure fluid and responsive referrals to the main contract for appropriate cases.
 - Enable joint workforce development between early help provision and the lead organisations.
- 3 Multi agency posts within Early Help is also in line with the recommendations within the McAllister Car Review.
- 4 A Memorandum of Understanding (MoU), that sits alongside the main contract, is in place between the Local Authority (Children & Families) and each provider. The MoU has been reviewed and changes have been proposed that ensures the provision continues to meet the current and evolving needs in Early Help.

What impact will this proposal have?

- 5 The purpose of the specialist coordinator roles is to:
 - To upskill the workforce around their approach to working with families experiencing mental health, domestic violence and/or substance/alcohol misuse.
 - To act as a single point of contact within the Early Help system regarding advice and support to practitioners around their specialist area including hosting surgeries for practitioners.
 - Utilising, sharing and growing skills, knowledge and expertise across the partnership.
 - Act as a conduit between Early Help and the consortium/range of providers within their specialist area.
 - To act as a champion for the Think Family approaches and to ensure this is cascaded and championed within their host organisations and wider partnerships.
 - Provide expertise on case work
- 6 All of the above in turn will lead to better and more effective support to children, young people and families to ensure they can achieve good outcomes in line with the Children & Young People's Plan and the Children & Families 3A's strategy (Attend, Attain, Achieve).
- 7 We have recognised a gap in need for families where parents are at the pre-contemplative to change stage and aim to address support for this work through the changes to these contract arrangements. The impact will of this will be that families will be supported earlier in the life of their problem to improve the outcomes for the family.

How does this proposal impact the three pillars of the Best City Ambition?

Health and Wellbeing

Inclusive Growth

Zero Carbon

8 This proposal supports the best council outcomes of:

- Be safe and feel safe
- Enjoy happy, healthy, active lives
- Do well at all levels of learning and have the skills they need for life
- Earn enough to support themselves and their families

What consultation and engagement has taken place?

Wards affected:

Have ward members been consulted?

Yes

No

9 Consultation has taken place with:

- Head of Early Help, Service Delivery Manager – Families First, Early Help Hub Managers
- Representatives from Forward Leeds, Live Well Leeds and Leeds Domestic Violence Service
- Finance
- Adults & Health commissioners
- Procurement and Commercial Services

What are the resource implications?

10 The total cost for the decision is: £772,454. This is broken down to:

- 2023/24 = £383,551
- 2024/25 = £388,904

11 These posts are fully funded via the Supporting Families grant (external funding).

12 This decision is considered to be essential spend as:

- External funding: this decision is fully funded via Department for Levelling Up & Housing and Communities funding as part of the national Supporting Families programme (formerly Troubled Families). There are distinct requirements of the funding which includes the target number of outcomes the programme is required to achieve. As Leeds is an Earned Autonomy area there is an expectation on exceeding these targets by at least 20% in order to retain the status. If the outcomes of the programme are not met; there is a risk that the funding could be clawed back and/or that Leeds will lose its Earned Autonomy status and would be reverted back to a payment by results model. The Coordinator roles are seen as an essential element of the wider Early Help landscape in supporting & achieving the necessary outcomes to maintain our earned autonomy status and retain the funding.
- Prevent further costs: continued investment in this provision will enable the providers to retain the staff delivering this crucial area of work and will promote continued investment in the development of services to meet the needs of families who require early help; thereby preventing unnecessary escalation/or the need for costly social work intervention.

What are the key risks and how are they being managed?

- 13 If this decision is not approved the specialist coordinator roles will not continue. Ultimately this will impact on the outcomes we can achieve for children, young people and families.
- 14 In injecting additional funds into these contracts there is a potential risk of challenge from other providers who may have bid for the contract when it was originally tendered competitively had this increased funding been included. However, as the increased funding represents (i) 0.37%, (ii) 4.18% and (iii) 3.26% respectively of the original contract values it is considered that the variations represent a minor part of the overall contract value and therefore the risk of such a challenge appears low
- 15 The Director should be satisfied that the recommended course of action provides best value

What are the legal implications?

- 16 This is a key decision and as such the decision is subject to call-in. The request to take a key decision was published on the list of forthcoming decisions on 14th October 2022. There are no grounds for keeping the contents of this report confidential under the Access to Information Rules.
- 17 This variations noted in this decision are in line with contract procedure rule (CPR) 21.7 and with The Public Contracts Regulations 2015 under the Regulation 72 (1)(b) Modification of contracts during their terms
- 18 The contract variations are being sought under Regulation 72 (1) (b) which provides an exception “where all of the following conditions are fulfilled:
- (i) for additional works, services or supplies by the original contractor that have become necessary and were not included in the initial procurement, where a change of contractor:
 - (ii) cannot be made for economic or technical reasons such as requirements of interchangeability or interoperability with existing equipment, services or installations procured under the initial procurement; and
 - (iii) would cause significant inconvenience or substantial duplication of costs for the contracting authority, provided that any increase in price does not exceed 50% of the value of the original contract.
- 19 In making the variations, the above conditions of Regulation 72 (1) (b) are deemed to be satisfied as the funding was not available at the time of the procurement and has been allocated on the basis that the activity be delivered through our mainstream commissioned service
- 20 There is no overriding legal obstacle preventing the variation of this contract under Regulation 72 of the Public Contracts Regulations 2015. The percentage uplift are within the range permitted under Regulation. In making the final decision, the Director of Children & Families should be satisfied that the course of action chosen, as to varying the contract, is the best course of action for the Council and should be satisfied that in doing so it represents best value for the Council.

Options, timescales and measuring success

What other options were considered?

- 21 Consideration was made whether this provision should be competitively tendered to the open market. This option was not pursued as it is considered essential that this provision is provided by the city's main contracts for substance misuse, domestic violence and mental health.
- 22 Consideration was also made whether this provision could be delivered in house. This option was not pursued as it is considered essential that this provision is provided by the city's main contracts for substance misuse, domestic violence and mental.

How will success be measured?

- 23 The Families First team continue to work hard to enable effective mechanisms for the success and impact of this provision to be evidenced. A number of mechanisms are already in place to do this; however use of the Mosaic (online case management system) is being developed for this provision. The providers have all confirmed they are open to trying different techniques to do this and work will continue to develop this.
- 24 A proposed outcome of the review is for the Families First team to lead on the measurement & monitoring of outcomes across Early Help which will also include this area of work.
- 25 An independent evaluation of Early Help Hubs which is part of a national evaluation that will inform practice throughout the country.

What is the timetable and who will be responsible for implementation?

- 26 Once approved the appropriate variations will be processed as soon as possible to allow the provider to notify staff of the increased contract duration.

Appendices

- Appendix 1 – Equality, Diversity, Cohesion and Integration (EDCI) screening form

Background papers

- N/A