

## Central Bedfordshire Council

Executive

9 October 2018

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### **Recommissioning Support Services for Children and Young People**

Report of: Cllr Steven Dixon, Executive Member for Families, Education and Children, [Steven.Dixon@centralbedfordshire.gov.uk](mailto:Steven.Dixon@centralbedfordshire.gov.uk)

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#### **Purpose of this report**

1. To outline the approach that has been taken and the rationale for the proposed option for recommissioning support services for children and young people.

#### **RECOMMENDATIONS**

**The Executive is asked to:**

1. **consider and approve the proposed option for recommissioning support services for children and young people.**

#### **Recommendations/Comments from Overview and Scrutiny**

2. The Children's Overview and Scrutiny Committee noted the approach to date and RECOMMENDED that regular performance reports of those external providers commissioned to provide services on behalf of the Council be delivered to the Committee at future meetings.

#### **Issues**

#### **Introduction and background**

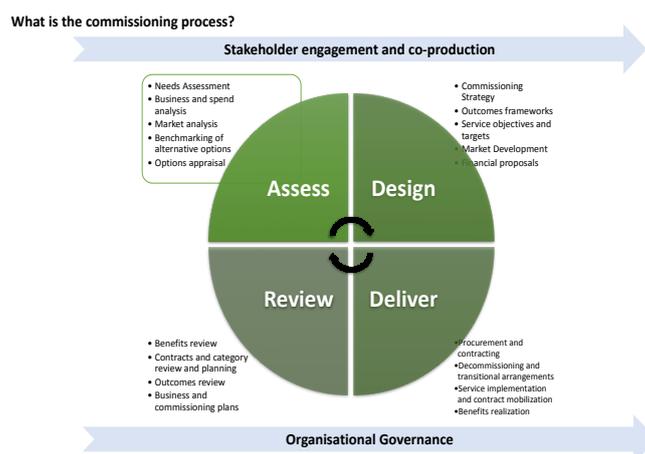
3. In January 2018 Central Bedfordshire Council Executive approved an approach recommended by the Children's Services Commissioning team for recommissioning a range of support and educational services for children and young people.

## Scope of services

- Children centres (Nine individual Children's Centres)
  - Supervised Contact (One statutory service to enable safe contact for children who are looked after by the Local Authority to have contact with their birth families)
  - Youth Work (Targeted youth work, Information, Information, Advice and Guidance (IAG), mentoring and Independent Visiting).
4. The original scope included some educational services for children with SEND, these have been removed to be considered under a separate alternative education project.

## Commissioning Approach

5. The approach to informing how we need to recommission these services has followed the Commissioning Cycle process as outlined below:



6. We have:
- Completed a needs analysis and service reviews
  - Reviewed the evidence base
  - Held a number of stakeholder engagement events and reached over a thousand people
  - Held a Provider Form for soft market testing
  - Carried out benchmarking of operating models in other areas
  - Completed indicative costings of potential options
  - Completed an Options Appraisal
  - Held a Public Consultation

## Key messages from Stakeholder Engagement

7. Central to informing the way forward are the views of our local service users and communities.

8. There is clearly much that is valued by local communities and partners about the current service delivery:
  - The recognition that there is support available
  - The high quality of the workforce
  - The sense of place and community that comes with fixed base provision
  - Access to learning opportunities for children, young people, parents and carers.
  - The role in helping to facilitate social networks
  - That most services are free or inexpensive to access.
  
9. However, as well as all that was valued a number of longer-term aspirations and opportunities to improve services and outcomes were identified throughout the engagement:
  - The need for more accessible and a wider range of venues with improved facilities
  - A greater range of activities across a number of services
  - More join up and communication between services to help create a 'one stop shop' approach.
  - More flexible delivery- this may apply to locations or the need to offer services at an earlier stage where needed
  - Better access to services- this referred to access to prevention and early intervention services as well as the issues of service thresholds and long waiting lists for some services
  - The need for more resources to address prevention and early intervention for emotional health and well-being and social issues.

### **Drivers for Change**

10. Our approach to recommissioning these services has helped to identify some very clear drivers for change:
  - More focus is needed on holistic family-based prevention and early intervention approaches to help reduce Adverse Childhood Experiences
  - Need for more flexibility to be able to respond to specific locality pressures and poorer outcomes to capture the differing needs
  - Interventions and services must be outcome focused to ensure they have the greatest possible impact whatever the demographic context
  - There are significant emotional health and wellbeing needs which are not currently being supported
  - Health inequalities persist across the Local Authority area.
  - Currently a quarter of pupils go nowhere to access information on growing up and body changes or about issues with social media-, we need digital and physical solutions

- With the exception of Children's Centres these services are used by a very small proportion of the population and all universal services are not used to the extent they could be.
- Missed opportunities to link with library and leisure centre provision.

## Service Model Approach

11. These drivers of change as well as the areas of opportunity and value identified and highlighted through engagement and analysis lead to very clear characteristics needed in an operating model:

Characteristic	Requires	Looks like
<b>Housing and population growth</b> Social isolation	Flexibility Resilience Sense of place and community	Integrated offer in each locality with <b>flexible</b> delivery points in local communities
<b>Needs</b> that are changing, varied, widespread and growing	Flexibility Increased capacity through different ways of working Awareness of unmet needs	Needs led services that are <b>flexible and adaptable</b>
<b>Fragmentation</b> in commissioning and service delivery- internal and external	Integration- within CBC and with partners	<b>Multi agency and multi disciplinary</b> approach with co location. Development of joint commissioning arrangements.
<b>Budget pressures-</b> MTFP- youth services, Supervised contact and high needs block overspends	Cost effectiveness and value for money, building community capacity and using community resources and assets	Partnership working <b>with local communities, building capacity</b> for self help, making best use of community buildings and facilities
<b>Education outcomes-</b> below what should be in some areas for EYFS,KS2 and KS4	Flexibility to target- child development and EET	Focus on outreach, development of knowledge and skills
<b>Health inequalities</b>	Focus on universal prevention and early intervention-targeted where needed- first 1000 days and by demography	<b>Accessible</b> , one stop shop delivery in the right place, at the right time
<b>Universal services</b> are not used to the extent they could be	Better communication and awareness raising	<b>Branding</b> of services under one umbrella to develop recognition and trust

12. There are some key factors in relation to our current operating model that need to be addressed to incorporate the characteristics described above:

- Services are operating separately without the required integration and holistic approach needed
- We need more services to be appropriately sharing information and data
- We need to develop more out of school support services for 6-12 year olds
- We are not consistently offering the services we should be up to 25 years for children and young people with SEND.

13. When considering the strategic aims of the children's service here in Central Bedfordshire alongside the feedback from our local communities, the services considered in the scope of this project need to be:

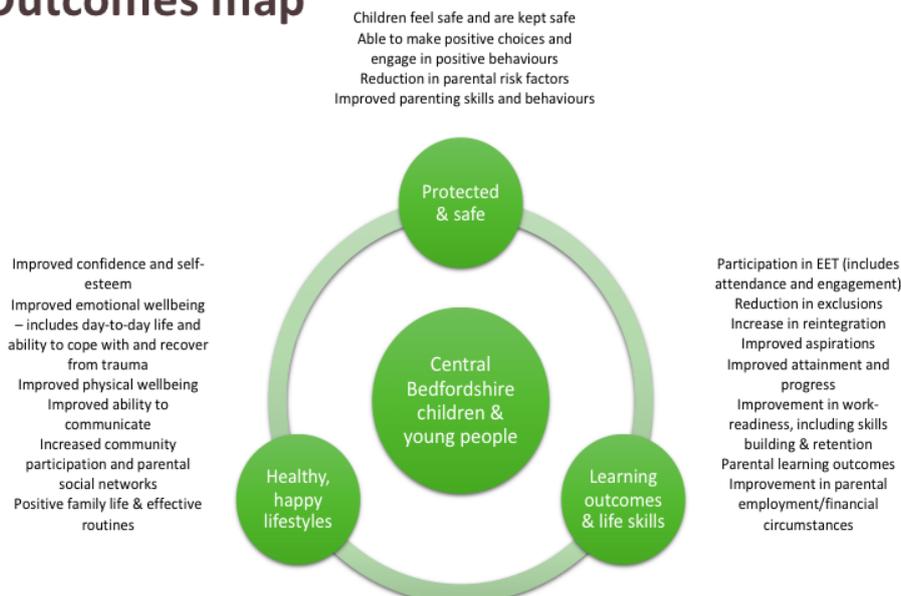
- co-ordinated around the needs of the family
- flexible and able to respond to changing needs
- based on outcomes to ensure that the impact and purpose are clear.

## Commissioning for Outcomes

14. We need to focus on the impact of these services in contributing to improving outcomes for our children and young people. This means a move away from focussing on what is delivered in terms of numbers and activities, towards understanding the true impact and effectiveness of services. An outcomes-based approach means:

- Commissioning for outcomes and not activity
- Delivering the outcomes which matter most to children, young people and their carers –and their experience of services matters as much as the outcomes
- An outcome focused approach requires an integrated system to minimise hand-offs and deliver a co-ordinated response
- Getting outcomes right at the earliest stage will help reduce system costs e.g. unplanned admissions, children in care, mental health services
- An Outcomes Framework to monitor contract performance
- An Incentive based approach to achieve priority outcomes
- High level outcomes for these services will be mapped to the Central Bedfordshire Children and Young Peoples Plan 2018-2021 outcomes map:

## Outcomes map



## Voice of the CYP- outcomes framework

15. The outcomes framework for use with these services will be thoroughly tested with children and young people, to make sure it is presented in language they relate to as well as testing that we have captured the outcomes that are important for them. The outcomes framework for the new Community Health Services was developed with a range of stakeholders, including young people and may form a starting point for developing the outcomes for the support services:
- I want services that are child and young person friendly
  - I have one up to date record that is used by everyone involved in my care
  - I have the support and information that I need to have a healthy pregnancy and birth, and to give my baby the best start in life
  - I want services that help me live a healthy lifestyle, support me to be resilient to cope with life's ups and downs and help me avoid harming my health and wellbeing
  - I have the right support at the right time to be able to achieve my goals, aspirations and potential and to become an independent adult
  - I want services to make sure concerns for me or my family's safety are identified, reported and dealt with quickly and effectively.

## Options for consideration

16. A number of options for the way we could deliver these services to achieve the best possible outcomes and respond to the feedback from stakeholder engagement were considered.
17. The Options considered are outlined in the table below.
18. The Options have been assessed by:
- **Desirability**- meets the strategic objectives of the Council and priorities of stakeholders
  - **Viability**- financially and sustainability
  - **Feasibility**- ease of implementation
19. For all the Options below there is the principle of a ring-fenced grants pot aligned to each locality to enable use of Voluntary and Community Sector services and promote flexibility of provision (micro commissioning) to facilitate and support options and activities for this age group.

		Desirability	Viability	Feasibility
1.	<p>Recommission as is: (Effectively Do Nothing) X 9 Separate Children's Centres Targeted Youth Work IAG service Mentoring Service Independent Visiting Service Supervised Contact Service (x14 contracts)</p>	<p>Does not support the 'one family, one worker, one plan' priority and is more likely to lead to fragmentation and silo working through services potentially being provided by multiple providers</p>	<p>Not Value for Money (VFM) as incurs overhead costs from multiple organisations and smaller scale operations leading to higher costs. Lack of flexibility and resilience in smaller scale services. No ability to generate funding to develop a 6-12 year old offer by an external partner.</p>	<p>Requirement for greater capacity for contract management and oversight. Increased dedicated contract managers would be required to oversee this number of contracts</p>
2.	<p><b>Five 0-19 (SEND 25) services on locality footprints</b> Outsourced x 5 contracts on locality footprints.</p> <p><b>All age Supervised Contact CBC wide</b> - outsourced, x 1 contract</p>	<p>Recognises the stakeholder feedback on the importance of Place and community and allows locally tailored solutions Five separate locality services could lead to some fragmentation across CBC, especially for youth provision.</p>	<p>Services are potentially not at a big enough scale to deliver VFM but due to the locality focus could generate more local goodwill and match funding. There is not currently the funding available to deliver the whole 0-19 offer.</p> <p>The Supervised Contact Service to be contracted area wide for costs at scale and flexibility but with a locality focus on delivery.</p>	<p>The Public Health 0-19 teams are organised on the locality footprints so will align well to the locality provision. Increased contract management capacity required</p>
3.	<p><b>One 0-19 (SEND 25) service on locality footprints- in house Supervised Contact run as in-house service or separately outsourced</b></p>	<p>Feedback from providers and stakeholders is that Council run services are not necessarily the preferred option to work with vulnerable families. It may signal a lack of support from the Council to develop the local market. CBC has a vibrant private and VCS sector who would be well placed to deliver these services.</p>	<p>In order to achieve the outcomes, it is assumed CBC management capacity would need to be increased. There would need to be investment in the right resource to develop the same innovation and approach to utilising resources that an external provider would bring.</p>	<p>Currently the teams are separate and would need a change programme to bring them together around consistency Accommodation, equipment etc would all need to be sourced.</p>
4.	<p><b>One 0-5 year service with locality focussed delivery</b> (outsourced x 1 contract)</p>	<p>Would help to deliver the 'one children's centre model through having a consistent provider and delivery model for the whole area.</p>	<p>Would be able to potentially access funding opportunities not open to the Council and to set up Crowd Funding initiatives. One all area 0-5 service potentially</p>	<p>Management of contracts can be absorbed into current team structure</p>

	<p><b>All age, all area Supervised Contact Service</b> (outsourced x1 contract)</p> <p><b>Universal and Targeted Youth Service supported by Youth Partnership-</b> outsourced (outsourced x 1 contract)</p>	<p>Would help develop one virtual children's centre approach with an external provider Streamlines cost and service delivery Youth Partnership can co-ordinate services</p>	<p>too big for smaller local providers to bid for.</p> <p>Youth partnership trading arm could generate additional income to fund gap in services and create new offer on behalf of Local Authority</p>	
5.	<p><b>Five separate 0-12 years Locality services</b> Outsourced x 5 contracts</p> <p><b>All age, all area Supervised Contact service</b> Outsourced x 1 contract</p> <p><b>All area universal and targeted Youth Service</b> Outsourced one contract</p> <p>(x7 contracts total)</p>	<p>Recognises the stakeholder feedback on the importance of Place and community and allows locally tailored solutions. Recognises the gap in support services for 6-12 year olds.</p>	<p>Services are potentially not at a big enough scale to deliver the best VFM but due to the locality focus could generate local goodwill and match funding, as well as the potential for smaller, more local organisations to bid for services.</p>	<p>Increased contract management capacity required</p>

20. **The preferred option is No. 5:** to procure five 0-12 year old contracts aligned to the localities, one all age, all area contract for supervised contact and one contract for universal and targeted youth provision.

**Reason/s for decision**

21. This would aim to achieve needs led, locality focussed provision for 0-12 year olds.
22. The size of the contracts would enable both schools and the Voluntary Sector to bid for locality contracts if they wish.
23. To continue to outsource the services would be more favourably perceived by the local market and would avoid the significant extra management capacity costs and employee liabilities that an in-house model would incur, as well as presenting more opportunities for raising community funds.

24. We would provide support to enable the establishment of a Family Partnership to aid collaboration and co-ordination as well as supporting the longer-term development of the new offer for 6-12 year olds.
25. The Supervised Contact service would continue to be outsourced as one all age, all area service.
26. The universal and targeted Youth Service would be outsourced as one service, amalgamating all the current separate contracts. The provider will be expected to lead a fund-raising function as part of a CBC led Youth Partnership to support the delivery and co-ordination of youth provision across the area. This is in line with the draft Youth Act 2018.

### **Public Consultation**

27. Engagement activities to develop proposals were carried out from February 2018. The formal Public Consultation took place from July 30<sup>th</sup>- September 21<sup>st</sup>. The consultation was promoted by the Communications team through a press release, e- mail bulletin, social media posts and on our consultation webpage. The Children's Services Commissioning team also carried out a number of supporting engagement activities with families and young people.
28. An Interim Consultation report was produced to inform this report and the high level results are outlined below:
  - The proposal to develop the 0-5 Children's Centre offer into a Family Service for 0-12 year olds offer was widely supported, highlighting a key enthusiasm for whole family involvement in the services. The majority of respondents also agreed with the proposal to commission the Family Services through five locality contracts. There were some concerns expressed, particularly from the Ivel Valley area, where there are four Childrens Centres, that the proposal to commission the Centres on a locality basis would mean some Centres would close. This is not the plan and it will be made explicit in the specification that the current centres are to remain open for service delivery.
  - The majority of people were happy that no major change is made to the Supervised Contact service and that it should be commissioned through one contract.
  - Almost half the respondents agreed with no change to the Youth offer, there were a high percentage of people who neither agreed or disagreed which may mean that people are not familiar with the current offer. The majority also agreed that the current separate services should be amalgamated and commissioned through one contract.

- A large majority of respondents agreed with the proposal to take an outcome-based approach to the services.
  - The proposal to use of a range of community buildings was also supported by a large majority of people.
  - There is a very high level of support for the development of Family and Youth Partnerships.
  - The proposal for a voluntary donation model was supported by a large majority of people, with some comments around making sure that this does not exclude those who are unable to pay.
29. The final Public Consultation report is attached at Appendix 1 (to follow).
30. The results of the full consultation reflect those of the interim report. The conclusion therefore is that overall there is support for the proposals.

### **Council Priorities**

#### Great resident services

31. The proposal is for locality services which are flexible and tailored to meet the needs of the locality from a range of community venues.

#### Improving education and skills

32. Part of the Youth Service contract remit is to deliver independent careers advice to prevent young people from being not in education, employment or training. In providing this careers advice alongside the mentoring service, it is anticipated that there will be an improvement in education and skills for this cohort.

#### Protecting the vulnerable; improving wellbeing

33. The services that form this broader procurement have targeted elements within them which protect vulnerable children and young people alongside supporting early identification of risks and issues within the wider family. The core offer for these services and for the targeted youth provision is to improve overall wellbeing through engagement and advice.

## Creating stronger communities

34. One of the key components within the model is to create the circumstance for the providers to be embedded within the local communities and to tailor services and micro commission from local organisations to meet local need. This will create stronger communities as individuals and organisations will be able to be directly involved in service delivery.

## A more efficient and responsive Council

35. The service model which is proposed for procurement has been developed to ensure that the front-line services which will be delivered on behalf of the Council continue to be responsive and efficient.

## Corporate Implications

36. All risks and mitigation plans are reviewed regularly by a wider project group.
37. The main procurement risk concerned the ability of smaller organisations such as local voluntary sector and schools to bid for these contracts. This was mitigated by separating the 0-12 years contract into five lots aligned to the localities.
38. Quality of service from a new provider is a further risk. Service specifications are in the process of being developed with front line staff with clear performance indicators and contract monitoring schedule so the council is sighted on the performance of these providers and can act quickly should quality decrease.
39. Business continuity of larger providers remains a corporate risk for the Council following the collapse of Carillion and profit warning for other large scale outsourcing organisations over the last few years. This will be a question in the initial tender document and will be tested throughout competitive dialogue.
40. Staffing (both current and future) remains a corporate risk for the Council as this is a change from current service models. Regular communication is going out to Children's Centre staff and, when new providers are announced there will be a clear mobilisation period to enable good communication and engagement with their new management organisations.

## **Legal Implications (POR)**

41. LGSS Law have been involved in advising on the legal issues applicable to this project and make the following comments.
42. The use of the Competitive Dialogue (CD) procurement procedure is appropriate for this project in view of the required changes to service provision outcomes that will need to be carefully assessed and evaluated. The CD will commence with an OJEU Notice and follow the recommended procurement stages for CD.
43. The CD procedure has accommodated the services being divided into various Lots and the possibility of multiple contracts arising, albeit that the procedure also allows for a lesser number of contracts, depending on the number and nature of the tenders, as well as the outcome of the various dialogues.

One service [Supervised Contact] will not be included in the CD but will be procured using an Open procurement procedure.

44. The current services contracts have been assessed in terms of any need to extend for the period until the new service provision can take effect.
45. LGSS Law will continue to support the project team throughout the CD process and will have particular responsibility for general advice and drafting of the final contracts with the service providers.

## **Financial and Risk Implications**

46. The current budgets for these services are broken down as follows:

### **Children's Centres:**

- Nine Centres with individual budgets totalling: £1,520,000 p/a

### **Youth Services**

- Information, advice and Guidance: £160,000 p/a
- Targeted Youth Work: £189,000 p/a
- Mentoring and Independent Visiting: £55,000 p/a

### **Supervised Contact**

- £300,000 p/a

47. The total financial envelope for the new services in scope is £2.22M per annum, before MTFP saving targets.
48. MTFP savings apply to Youth Services of £20k for 19/20 and £59k for 20/21 and onwards
49. The proposal is for initial contract lengths of five years with two optional one-year extensions.
50. The potential maximum financial commitment for the services over a maximum period of seven years is therefore £15.07M, after MTFP savings applied to youth services. The recommissioned services would need to come in within this budget envelope.
51. The new service budgets will be allocated as follows:

#### **Family Service (0-12 years)**

- To be allocated aligned to each of the five locality services- total: £1.52M p/a (over 7 years = £10.64m)

#### **Youth Service**

- One all area budget to cover all elements of the service- total: £384kp/a 19/20, £325k 20/21 and ongoing (over 7 years = £2.33m)

#### **Supervised Contact**

- One budget to fund one all area, all age service- total: £300kp/a (over 7 years =£2.1m)

#### **Equalities Implications**

52. Central Bedfordshire Council has a statutory duty to promote equality of opportunity, eliminate unlawful discrimination, harassment and victimisation and foster good relations in respect of nine protected characteristics; age disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.
53. An Equalities Impact Assessment has been completed with regards to this recommissioning programme. (Appendix 2) The services that are in scope of this programme will aim to reduce inequalities by improving outcomes for vulnerable children and families, which includes those from minority communities.

54. The specifications for the new services will include requirements to ensure that providers have expertise in the area of Lesbian, Gay, Bisexual and Transgender (LGB&T) support, which has been identified as an emerging need and that they will be expected to adhere to best practice guidance relating to LGB&T.

### Next Steps

Activity	Timescales
Procurement process	October 2018- May 2018 (issue of final tender beginning March following Dialogue)
Award Contracts	Standstill period completed 27/5/19
Mobilisation	1/9/19

### Appendices:

1. Public Consultation Report
2. Equalities Impact Assessment

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