



Cabinet
16 March 2015

**Report from the Strategic Director
Children and Young People**

Wards Affected:
ALL

**Authority to tender a contract for the Clinical Input into the
Inclusion Support Team**

1.0 Summary

- 1.1 The Clinical Input (psychology and psychotherapy) into the Inclusion Support Team (part of the Children and Young People's Department) is an integral part of the council's work to combat exclusion from schools. The multi-professional Inclusion Support Team is funded by the Dedicated Schools Grant (DSG) with agreement from Schools Forum and works together using an early intervention approach to support vulnerable pupils (age 4-16) at risk of exclusion from school.
- 1.2 After a competitive commissioning process, a 12 month contract was awarded to the Anna Freud Centre commencing on the 1 April 2014. A further six month extension was granted in order to gather significant evidence around the impact of this service. The current contract will end on the 30 September 2015.
- 1.3 Officers have reviewed the outcome data from this clinical input and as a result of its positive impact recommends this provision continues (see section 3). This report requests approval to invite tenders for the provision of Clinical Input services to the Inclusion Support Team as required by Contract Standing Orders 88 and 89.

2.0 Recommendations

- 2.1 That the Cabinet gives approval to the pre-tender considerations to seek expressions of interest and invite tenders for clinical input to the Inclusion Support Team as set out in paragraph 3.12 of the report, with a proposed contract period of three years with an option to extend for a further one year.
- 2.2 That the Cabinet gives approval to officers to evaluate the tenders on the basis of the evaluation criteria set out in paragraph 3.12 (vi) of the report.

3.0 Detail

- 3.1 In 2013, the services to support children excluded from school and at risk of exclusion were reviewed as part of a One Council project. This led to a major restructuring, working in partnership with schools. One of the key aims of the restructuring was to put a stronger emphasis on preventative work, intervening at an earlier stage to prevent exclusion of children from school. In particular, the review identified that the work to work with children at risk of exclusion needed clinical input (psychology and psychotherapy) as an integral component.
- 3.2 Following the service review, the Inclusion Support team was therefore established as a multi-professional team that supports vulnerable young people aged 4-16 who are at risk of exclusion from school. The team works to support inclusion in mainstream schools and address emerging concerns as soon as they arise for individuals, groups and families. They receive referrals from schools at a weekly panel meeting where key workers are allocated and the team work together to ensure appropriate support is provided. The five commissioned clinical staff work alongside four Inclusion Support Officers, one Family Support Worker, one Alternative Provision and School Engagement Coordinator, two SEBD (Social, Emotional and Behavioural Difficulties) Advisory teachers, one SEBD Casework Officers and one Behaviour Support Worker. All are funded from Dedicated Schools Grant. The service currently operates at full capacity with a high level of referrals. In particular, officers are observing an increase in complexity of need at a young age in their caseloads with pupils requiring more intensive wraparound support.
- 3.3 The current Clinical Input into the Inclusion Support Team is provided by five part-time Anna Freud Centre clinical members of staff (equating to 2.1 FTE). This support consists of two psychotherapists, two psychologists and one

family therapist. All members of staff are experienced mental health clinicians with a range of professional training including Family Therapy, Clinical Psychology, Child and Adolescent Psychotherapy and Social Work.

Their role is to:

- a) Undertake comprehensive assessment of pupils who have social, emotional and mental health difficulties and develop an action plan to address identified needs;
- b) Work intensively with a small number of individual pupils with more severe and complex social, emotional and mental health difficulties through delivery of an education plan including evidence based approaches and multi-agency working as appropriate;
- c) Contribute to the successful reintegration of pupils into mainstream settings; and
- d) Help strengthen school staff's skills and competencies in understanding the underlying needs of children and young people and in managing behaviour in mainstream schools/pupil referral units, including monitoring and assessing the quality of school interventions.

3.4 From commencement of the current contract, the provider has submitted quarterly outcome reports which are discussed in regular contract management meetings. In the nine months from 1 April 2014 to 31 December 2014 the Anna Freud team worked with 80 pupils; 55 per cent from primary schools, 30 per cent from secondary schools and 15 per cent from Alternative Provisions; this includes Ashley College (our health needs service) Brent River College (our Key Stage 3 and 4 PRU) and Alternative Provisions (such as Plan B, Red Balloon, 14-16 college places and virtual learning where a number of our young people are placed). The sessions delivered to pupils/families included both direct and indirect therapeutic intervention.

3.5 Through this quarterly reporting the Anna Freud Centre provide in depth case studies on the targeted work they have done with individual young people, and the outcomes of the interventions. For example, family therapy for a ten year old pupil whose home life was leading to disruptive behaviour in school. Intensive family therapy over a ten week period positively improved the family interactions and dynamics; as a result the school have seen a rapid improvement in his progress and behaviour. A second example is Child Psychotherapy sessions for an eight year old pupil referred for repeated fixed term exclusions as a result of persistent disruptive behaviour and violence

towards peers. As sessions progressed, this pupil was able to understand his own behaviour through play, link his behaviour to his feelings, and to recognise particular situations, like feeling unfairly treated, and how to negotiate them without immediately reacting. He is now able to manage much better in classroom situations, and has more friends and better peer relationships. He is more reflective, calmer and able to recover from setbacks much faster. The service has seen significant improvements in a large number of pupils as a direct result of this clinical input and collaborative working with other professionals in the wider Inclusion Support team. Importantly, since September 2014 there have not been any permanently excluded primary age pupils signifying the value of this early intervention model in terms of outcomes.

- 3.6 The current contract with the Anna Freud Centre (AFC) benefits from the organisation's 'Evidence Based Practice Unit'. The AFC is currently working with the Inclusion Support team to systematically evaluate progress and impact using standardised measures. This will allow the service to map outcomes against interventions more effectively. The AFC has added value to the wider Inclusion Support Team through their professional expertise, providing drop in clinics to discuss cases and providing their input from a clinical perspective into the weekly referral meetings (ISR).
- 3.7 A longer term contract of three years would enable tenderers to provide stability of provision and consistency in staffing and relationships with pupils and families. It would also mean this evidence of impact collated through the evaluation project can be analysed and developed to inform future practice.
- 3.8 The current contract is due to expire on the 30 September 2015. In order to continue this service, a new contract needs to be re-tendered and awarded by July 2015. This will allow sufficient time for a handover period for a new supplier to take over the service should the current provider not win the contract. The tender process will need to start in April 2015. Feedback from schools and relevant officers is good and the contract deliverables appear to be fit for purpose. Officers are not therefore considering making significant changes to the current specification.
- 3.9 The value of the proposed contract is estimated at £135,000 per annum, £405,000 over the three year life of the contract and £540,000 should the contract be extended for a further 12 months. As a High Value Contract under the Council's standing orders a full tender exercise needs to be conducted.

3.10 Under the new Public Contract Regulations 2015 (“the Regulations”), Clinical Input service is classified as a Schedule 3 service (social and other specific services) and is below the relevant threshold, therefore subject to a lighter touch regime under the Regulations; such services being below threshold are exempt from adhering to the normal OJEU timescales. Officers are proposing to follow broadly the OJEU timeframe as set out below. An open or one stage procedure will be followed; in accordance with the timeline below.

3.11 In accordance with Contract Standing Orders 89 and 90, pre-tender considerations have been set out below for the approval of the Cabinet.

Ref.	Requirement	Response	
(i)	The nature of the service.	Clinical Input into the Inclusion Support Team	
(ii)	The estimated value.	£135,000 per year, £405,000 over the three years life of the contract, and/or £540,000 if the contract is extended for 12 months.	
(iii)	The contract term.	Three years with the option to extend for a further 12 months.	
(iv)	The tender procedure to be adopted.	Schedule 3 - social and other specific services procedure to be followed – Open tender process.	
v)	The procurement timetable.	Indicative dates are:	
		Adverts placed/ITT issued on request	15 April 2015
		Deadline for tender submissions	15 May 2015
		Tender evaluation	1 June 2015
		Panel evaluation/Moderation Exercise	5 June 2015
		Cabinet approval	July Cabinet Date tbc
		Cabinet 5 day call in period.	July Cabinet + 5 days Date tbc

Ref.	Requirement	Response	
		Contract Mobilisation	10 August 2015
		Contract start date	1 October 2015
(vi)	The evaluation criteria and process.	<ol style="list-style-type: none"> 1. An open or one stage tender will be used to tender the requirements. 2. Tenders will be evaluated in line with best value principles to identify the economically most advantageous tender having regard to price and quality elements. The price, quality ratio will be a 60/40 split in favour of price. 3. Quality will be evaluated by analysis of method statements produced by the tenderers these include; 4. Proposals for ensuring effective quality management of the service and maintenance of the quality standard including self monitoring and evaluation will be evaluated. 5. The tenderers' approach to working in partnership with all key stakeholders including the Council, children/young people and parents will be evaluated. 6. The Tenderer's proposals for adhering to child protection and safeguarding requirements will be evaluated 7. Specific safeguarding and health and safety matters relevant to the contract will be evaluated. 8. Price will be evaluated using a proportionate scoring methodology. 	
(vii)	Any business risks associated with entering the contract.	<i>There are no specific business risks associated with this tender.</i>	
(viii)	The Council's Best Value duties.	The procurement process and on going contractual requirement will ensure the Council's Best Value obligations are met.	
(ix)	Consideration of Public Services (Social Value) Act 2012	This is a highly specialist market but officers will endeavour to ensure the requirements of the Act are taken into account as part of the procurement.	

Ref.	Requirement	Response
(x)	Any staffing implications, including TUPE and pensions.	See section 5.4 and 7.1 below.
(xi)	The relevant financial, legal and other considerations.	See sections 4 and 5 below.

3.13 The Cabinet is asked to give its approval to these proposals as set out in the recommendations and in accordance with Standing Order 89.

4.0 Financial Implications

4.1 The estimated value of this service over the period of the contract is £135,000 per annum, £405,000 over the three years of the contract. In the event that the option to extend for an additional 12 month is taken, this will amount to a total of £540,000. The current budget envelope for this service is £135,000 and will be used to fund the contract. The budget is entirely funded by the Dedicated Schools Grant ¹ and has been approved by the Schools Forum.

4.2 The proposed plan is intended to ensure better stability and consistency of the Inclusion and Alternative Education Service, and improve the longer term outcomes and life chances of Brent's vulnerable pupil population at risk of permanent exclusion. The target is that this early intervention reduces the demands and related costs relating to permanent exclusions (i.e. specialist placements in the PRU or Alternative Provision) in the future. It also aims to reduce demand on other related services such as CAMHS² by addressing problems before they reach the service threshold.

5.0 Legal Implications

5.1 Clinical Input services fall within the social and other specific services listed in Schedule 3 of the Regulations and are subject to a lighter touch regime

¹ IAES delivery & funding proposals following restructure presented to and ratified at the Schools Forum of 26th February 2014

² CAMHS (Child and Adolescent Mental Health Services) provide specialist mental health services in Brent to children and young people. They offer assessment and treatment when children and young people have emotional, behavioural or mental health difficulties.

("Schedule 3 Services"). Under the Regulations Schedule 3 Services are required to be advertised in the OJEU where they are above their relevant EU threshold (currently set at £625,050). Schedule 3 Services are afforded greater flexibility in determining the procurement procedure to be applied in connection with the award of contracts. Consequently as the estimated value of this proposed tender (£540,000 including possible extension) will be below the relevant EU threshold, officers are not required to issue an advert in the OJEU.

- 5.2 The estimated total value of this contract is in excess of £250,000 making it a High Value Contract under the Council's Contract Standing Orders, as such the proposed contract is subject to the Council's own Standing Orders and Financial Regulations and therefore the Cabinet is required to consider approval of the pre-tender considerations as set out in paragraph 3.12 above (Standing Order 89) and the inviting of tenders (Standing Order 88).
- 5.3 Once the tendering process is undertaken, Officers will report back to Cabinet in accordance with Contract Standing Orders, explaining the process undertaken in tendering the contract and making recommendations for an award.
- 5.4 In the present case if the contract is awarded to a new contractor the Transfer of Employment (Protection of Employment) Regulations 2006 (as amended) ("TUPE") is likely to apply where there is a service provision change from the incumbent contractor to a new contractor and there are an identified grouping of employees of the current contractor who spend all or most of their working time dedicated to the delivery of the services to be taken over by the new contractor.

6.0 Diversity Implications

- 6.1 An Equality Impact Assessment (EIA) is being prepared in conjunction with the Equalities team. An initial screening has been completed to be reviewed by the Equalities team. A full EIA will be completed for the July Cabinet Meeting where the tender award report will be presented. This will include consultation with pupils, parents and schools and will impact the specification and contractual agreement during contract award.

7.0 Staffing and Accommodation Issues.

- 7.1 This service is currently provided by an external contractor and there may be implications for staff arising from re-tendering the contract.
- 7.2 No accommodation implications arise for the Council out of the retendering of this contract.

8.0 Public Services (Social Value) Act 2012

- 8.1 The Council is under duty pursuant to the Public Services (Social Value) Act 2012 to consider how the services being procured might improve the economic, social and environmental well-being of its area; how, in conducting the procurement process, the council might act with a view to securing that improvement; and whether the council should undertake consultation.
- 8.2 The services being procured have as their primary aim improving the social and economic well being of some of the most vulnerable groups in Brent. They are highly specialist with only a very limited number of suppliers who can meet the Council's requirements. Nevertheless, officers will endeavour to ensure the requirements of the Act are implemented as part of the procurement process.

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