

Decision of Cabinet Member for Children Young People and Schools 8 July 2024

Report from the Corporate Director of Children and Young People

Lead Cabinet Member (where applicable)

AUTHORITY TO VARY AND EXTEND A CONTRACT WITH POSITIVE SUPPORT GROUP TO PROVIDE THE HOSPITAL DISCHARGE SERVICE (HDS) AND THE LOOKED AFTER CHILD RESILIENCE SERVICE (LRS)

Wards Affected:	All
Key or Non-Key Decision:	Non-key
Open or Part/Fully Exempt: (If exempt, please highlight relevant paragraph of Part 1, Schedule 12A of 1972 Local Government Act)	Open
List of Appendices:	None
Background Papers:	None
Contact Officer(s): (Name, Title, Contact Details)	Michelle Gwyther Head of Forward Planning & Partnerships michelle.gwyther@brent.gov.uk

1.0 Executive Summary

- 1.1 This report requests individual Cabinet Member approval to extend a contract in respect of positive behaviour support delivery post hospital discharge and the Looked After Child Resilience Service (LRS) with Positive Support Group (PSG), formerly known as Positive Support Behaviour Consultancy (PBSC), in accordance with paragraph 13 of Part 3 of the Constitution.
- 1.2 The report summarises the reasons for the request to vary and extend the contract for positive behaviour support post hospital discharge and the Looked After Child Resilience Service.

2.0 Recommendation(s)

That the Cabinet Member for Children, Young People and Schools, having consulted with the Leader:

2.1 Approves the variation and extension of the contract for positive behaviour support post hospital discharge and the Looked After Child Resilience Service with Positive Support Group as set out in section 3.

2.2 Approves the variation and extension of the contract detailed in 2.1 above for a period of nine months from 1 July 2024 to 31 March 2025, for the combined sum of £327,500.

3.0 Detail

3.1 The service will contribute to the Borough Plan's priorities of prosperity and stability and also contribute to thriving communities so as to increase the ability and confidence of foster carers and providers to successfully support young people and manage challenging and complex behaviours. The overall aim is to reduce placement breakdowns which are destabilising for young people and reduce the need for emergency and reactive placement moves with the consequence of higher weekly placement costs. Between April 2018 and February 2023, 31 LAC moved from a fostering to a residential placement, resulting in an average weekly cost increase for their placement of £3,151.

3.2 Background

- 3.2.1 The Council entered a contract for positive behaviour support delivery post hospital discharge, known as The Hospital Discharge Service (HDS) with Positive Support Behaviour Consultancy now known as Positive Support Group (PSG) on 3 July 2023 (the "Contract"). This contract was varied on 18 December 2023, to include the Looked After Child Resilience Service (LRS) from 1 November 2023 to 30 June 2024.
- 3.2.3 Both of these services are commissioned on a test and learn basis with Brent running both projects on behalf of NW London LAs. The funding for this has come from £700,000 received from the Integrated Care System (ICS) Child and Adolescent Mental Health Services (CAMHS) Provider Collaborative (the "Collaborative"), Central North West London (CNWL) and West London (WL) health trusts. The West London (WL) health trust committed a further £150,000 of funding in April 2024 to expand the projects beyond Brent and into other NW London LAs.
- 3.2.4 The objective of the Hospital Discharge Service was to enable the timely discharge of young people from emergency departments who presented at hospital with a mental health crisis but did not meet the criteria for Tier 4 provision. The project also aimed to reduce both the prevalence of young people's presentations in mental health crisis and the timescales between presentations at A&E.
- 3.2.5 The Contract with PSG for positive behaviour support delivery post hospital discharge was originally valued at £170,000 and was varied in December 2023 to allow for the additional cost of £100,000 to include the Looked After Child Resilience Service.
- 3.2.6 Brent are the lead commissioners for the overall project, and the eight participating authorities are Brent; Ealing; Hammersmith and Fulham; Harrow, Hillingdon, Hounslow, Kensington and Chelsea and Westminster. The additional funding received in April 2024 was to enable the extension of both

projects across additional NW London LAs to further the evidence bases for these approaches. These LAs are in agreement for Brent to extend the existing services under the Contract to benefit young people in North West London.

4.0 Impact of the Hospital Discharge Project

- 4.1. As of 13 June 2024, the Hospital Discharge Service has shown the following impact:
 - 39 referrals were received from eight local authorities within the ICS footprint.
 - 14 fourteen referrals were accepted.
 - The 25 other referrals did not meet necessary criteria were not in a hospital and / or out of age range.

4.2. Discharge locations from hospital from the 14 accepted referrals

- Seven were discharged home with ongoing PSG support. This avoided a placement cost.
- Six were discharged to a placement, with ongoing PSG support.
 - Two into residential home placements
 - Four into supported accommodation placements
- Five of these six young people have maintained their placements. The sixth young person had a planned move to another residential home not included in the project with PSG support. This placement remains stable and the young person is making progress.
- One young person escalated from hospital to a Tier 4 setting and onto a Psychiatric Intensive Care Unit (PICU) whilst receiving ongoing PSG support. They have since been transferred to a Tier 4 setting outside of London.
- Seven cases have now closed and seven remain active. Only one case was closed because the parent withdrew consent for support.

4.3. Other impact seen.

- The service started with eight residential homes via seven providers. This has now expanded to twelve residential homes and four semi-independent units across thirteen providers.
- A Community of Practice facilitated by PSG, has been developed to share good practice, further upskill local provision, and support sufficiency.
- Homes not part of the twelve in the service but where young people are moved to, are included in the CoP.
- Re-presentations to hospital for some young people living at home have not been fully eliminated. However, the timeframe between representations has increased, and the duration in hospital for these representations has reduced significantly.
- Family members have reported they feel more skilled and confident to manage presenting behaviours, resulting in a reduced need to present to hospital. This has also enabled young people to return home quicker than before the service and mean they have not required residential home or supported accommodation placements.

 At the time of writing no North West London young person who fits the Hospital Discharge criteria is awaiting discharge from a North West London hospital.

4.4. Data Analysis of the impact of HDS – all information below is as of 20 June 2024

- 4.4.1. PSG's risk assessment and scoring matrix tool allows HDS staff to produce risk scores for young people, before, during and at the end of service intervention. The average risk score for closed HDS clients had reduced by 44.5%
- 4.4.1. PSG undertake assessments to determine where young people score themselves in respect of progress to achieving goals they identified at the commencement of the service. The average goal score for young people had increased by 42.5% i.e., if they scored themselves 5 out of 10 at the start of the service, they would now score themselves approximately 7.3 out 10.
- 4.4.2. The Experience of Service Questionnaire (ESQ) produced a 96.5% positive score across both young people, providers and families and services supported by HDS.

5. Impact of the Looked After Children Resilience Project (LRS)

- 5.1. As of 14 June 2024, the Looked After Child Resilience Service has shown impact in the following ways:
 - 18 referrals have been received from Brent social workers and supervising social workers.
 - 14 of these referrals were viewed as being at the point of imminent breakdown and so suitable for inclusion in the LRS.

5.2 **Impact seen.**

- 10 of these placements have been supported and are now stabilised preventing escalating needs and increased placement packages and costs.
- One Brent foster carer had wished to resign from fostering at the point of being referred to LRS. They now continue to foster for Brent, have attended all the LRS programme of support and strongly advocates for the LRS.
- Two placements have changed in a planned way in accordance with the child's care plan but these were stabilised before the move so the child did not move in crisis. The current placements remain stable with PSG support.
- The number of CYP who are currently experiencing 3+ placement moves has reduced to 12% (May 2024) compared to the 2023/24 outturn of 14% (this is for all placements and not just foster placements).

5.3. Data Analysis of the impact of LRS - – all information below is as of 20 June 2024 (please note the small sample size)

- LRS use the Connor-Davidson Resilience scale (CD RISC) tool to measure resilience and identify strengths and areas for improvement.
- Of the two closed LRS cases, one CYP reported an increase in their score of 52%, and the foster carers identified an average 51% increase in their resilience.

- Foster parents also complete a SLDM measure (Sheffield Learning Disabilities Outcome Measure), which captures the confidence in managing behaviours of concern. It is completed as a pre/post measure, and of 2 closed cases the average increase in score was 42%,
- The average risk score for closed LRS clients had reduced by 29% because of the LRS service.
- The Experience of Service Questionnaire (ESQ) produced an 88.5% positive score.

6.0 Stakeholder and ward member consultation and engagement

- 6.1 There has been on-going engagement with Brent social care staff and managers, local providers, young people, colleagues in other NWL local authorities and within the NWL CAMHS trusts when developing the initial proposals for both HDS and LRS and on-going developments.
- 6.2. Detailed engagement via focus groups with Brent young people, staff, and foster carers, as well as other stakeholders took place during the 'discovery phase' during November and December 2024 to co-design the training and three tier support offer, prior to the delivery of the service from January 2024.
- 6.3. The lead member has been kept appraised of service design and implementation through previous reports and in lead member briefings as required.

7.0 Financial Considerations

- 7.1 The value of the proposed variation and extension is £327,500, which will increase the overall contract with Positive Support Group to a total of £597,500.
- 7.2 The cost of this proposed extension of the Contract will be funded from £850,000 received from the Integrated Care System (ICS) Child and Adolescent Mental Health Services (CAMHS) Provider Collaborative (the "Collaborative"), Central North West London (CNWL) and West London (WL) health trusts.
- 7.3. After taking into account existing commitments, it is expected that the remaining funding available from the ICS as at 01/07/24 is £353K. The cost of the proposed variation is £327K so that would leave around £26K for other priorities.

8.0 Legal Considerations

- 8.1 Officers recommend the variation and extension of the Contract as set out in paragraphs 2.1 and 2.2.
- 8.2 The value of the original contract was subject to partial application of the Public Contract Regulation 2015 (PCR 2015). The variation and extension are now governed by the Provider Selection Regime, pursuant to the Health and Care Act 2022 (the "PSR").

- 8.3 The contract contains a clear an unambiguous provision allowing for the variation and extension as recommended and as such extension is permitted in accordance with the PSR and would not be deemed a considerable change under the PSR. As the value of the variation is less than £500,000 a transparency notice is not required at this time. Officers will note the requirements under the PSR to keep clear records detailing the decision-making process and rational for any contract modification, including a variation.
- 8.4 As set out in paragraph 3.10, pursuant to paragraph 13 of Part 3 of the Constitution, the Cabinet Member for Children, Young People and Schools, subject to consultation with the Leader, has delegated powers to agree the proposed extension and variation.

9.0 Equity, Diversity & Inclusion (EDI) Considerations

- 9.1 Pursuant to s149 Equality Act 2010 (the "Public Sector Equality Duty"), the Council must, in the exercise of its functions, have due regard to the need to:
 - (a) eliminate discrimination, harassment and victimisation and other conduct prohibited under the Act
 - (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it; and
 - (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it,
- 9.2 The Public Sector Equality Duty covers the following nine protected characteristics: age, disability, marriage and civil partnership, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation.
- 9.3 Having due regard involves the need to enquire into whether and how a proposed decision disproportionately affects people with a protected characteristic and the need to consider taking steps to meet the needs of persons who share a protected characteristic that are different from the needs of persons who do not share it. This includes removing or minimising disadvantages suffered by persons who share a protected characteristic that are connected to that characteristic.
- 9.4 There is no prescribed manner in which the council must exercise its public sector equality duty but having an adequate evidence base for its decision is necessary.
- 9.5 The proposals in this report have been subject to screening and officers believe that there are no adverse equality implications.

10.0 Climate Change and Environmental Considerations

10.1 The services are currently provided by an external contractor and there are no implications for Council staff arising from extending the contract.

10.2 There are no property / accommodation implications for the Council.

11.0 Human Resources/Property Considerations (if appropriate)

N/A

12.0 Communication Considerations

N/A

Report sign off:

Nigel Chapman

Corporate Director Children and Young People