

	Cabinet 10 February 2025
	Report from the Corporate Director of Children and Young People
	Lead Member – Cabinet for Children Young People and Schools (Councillor Gwen Grahl)
Authority to award contract for the provision of Speech & Language Therapy (SLT) for Children & Young People in Brent and Out of Borough Schools	

Wards Affected:	All
Key or Non-Key Decision:	Key
Open or Part/Fully Exempt: <small>(If exempt, please highlight relevant paragraph of Part 1, Schedule 12A of 1972 Local Government Act)</small>	Open
List of Appendices:	One Appendix 1: Equalities Impact Assessment
Background Papers:	None
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1.0 Executive Summary

- 1.1. The report concerns the procurement of a contract in respect of Speech and Language Therapy (SaLT) for children and young people in Brent schools and out-of-borough schools who have speech and language therapy needs identified in section F of their Brent Education Health Care Plan, to Central London Community Healthcare Trust (CLCH) NHS pursuant to the Provider Selection Regime. This report requests authority to award the contract as

required by Contract Standing Order 88. This report summarises the process undertaken in tendering this contract and the recommendation to whom the contract should be awarded.

2.0 Recommendation(s)

That Cabinet:

- 2.1 Approves the direct award of a contract for the provision of Speech and Language Therapy (SaLT) for children and young people in Brent schools, Additionally Resourced Provision and out-of-borough schools (the "Contract") following the Provider Selection Regime (PSR) process C for an initial period of three (3) years from 1 April 2025 to 31 March 2028 with an option to extend by a further one (1) year in the sum of £6,569,499 exclusive of VAT to Central London Community Healthcare Trust NHS (CLCH).

3.0 Details

3.1 Cabinet Member Foreword

- 3.1.1 The provision of speech and language therapy support enables Local Authorities to deliver their statutory duties under the Children and Families Act 2014 to meet the educational needs of children and young people as stated in a child or young person's Education Health and Care Plan (EHCP).
- 3.1.2 The recommendation to direct award this Contract to CLCH will contribute to the Borough Plan Priority for the Best Start in Life by ensuring children and young people have access to appropriate support for a positive journey into adulthood and independence. The recommendation also contributes to the delivery of the priorities identified in the SEND Strategy 2021-25, specifically the commitments to ensure that all children and their families have a range of support and opportunities available to them that support them to realise their aspirations and to be active citizens.
- 3.1.3 The number of children and young people with SEND is increasing in the borough, which is reflected in increasing need for specialist SaLT as set out in this report. A number of strategies are in place to support children and young people with SEND, including a capital programme to provide more local special school places and Additionally Resourced Provisions of over £44m.

3.2 Background

Local Context

- 3.2.1 Brent has 42,593 children and young people of statutory school age and the under 5-year-old population in education settings is 5,603. In Brent 15.7% of pupils have SEND compared to 11.9% in London and 18.0% nationally (4.6% have EHCPs and 11.1% are on SEN Support). In Brent schools, the highest number of pupils with SEN have Speech Language and Communication Needs (31.1%) followed by SEMH (Social, Emotional and Mental Health) (18.0%) and

autism spectrum disorder (16.0%). This data is from the January 2024 school census.

3.2.2 The largest ethnic groups of statutory school age are: Asian Indian (18.8%), Any Other White Background (15.6%), Any Other Ethnic Group (14.4%), Black African (11.4%) and White British (9.4%). A very high proportion of pupils have English as an Additional Language (65.0%). The largest spoken first languages other than English are: Arabic (9.9%), Gujarati (8.9%), Somali (5.0%), Romanian (4.9%) and Urdu (2.7%).

3.2.3 The Council entered into a contract with CLCH on 1 April 2019 for SaLT for pupils with a Brent EHCP in mainstream schools in Brent and out-of-borough and support for the Speech and Language Communication needs of children and families accessing Family Wellbeing Centres/Early Years settings. The contract was entered into for a period of 2 years, with an option to extend for a further 3 years. The Council exercised the option to extend the contract for a further one year and the contract is due to expire on 31 March 2025. Officers are therefore seeking to put in place contractual arrangements to ensure a continuation of service when the existing contract expires.

3.2.4 The Provider Selection Regime (“PSR”) came into effect on 1st January 2024. The PSR introduced new regulations governing the procurement of health care contracts which support the move from commissioning to the new collaborative arrangements, including the creation of Integrated Health Systems, under the Health and Care Act 2022. Officers are recommending awarding the Contract following the Provider Selection Regime (PSR) process C to CLCH (the existing provider) for an initial period of three years (3) with the option to extend by a further 12 months (1 year) for a total contract value of £6,569,499 (exclusive of VAT) for the following reasons:

- The current contract for the provision of speech language therapy expires on 31 March 2025.
- The provision of SaLT is statutory and therefore the provisions of the Contract will help the Council to comply with its statutory duties for needs specified in Section F of a child’s education Health Care Plan (EHCP).
- The Central London Community Healthcare NHS Trust (the ‘CLCH’) has developed positive working relationship with schools and the local authority and the award of this Contract will support continuation of quality services that are in the best interests of children and young people.
- There is added value in this service being delivered by CLCH as it allows the service to be aligned with their delivery of Brent’s community Speech and Language Therapy services commissioned by Northwest London ICB. The extension would maintain strategic alignment of services. This will ensure that children and young people and families have access to a seamless service.

3.2.5 At the end of Quarter 2 2023/24 (September 2024), the existing contract with CLCH supported 765 children and young people with SLCN on their EHCP, an increase of 7.9% from the same quarter the previous year. In addition, there are

children who are not covered by the current Contract receiving SaLT through spot purchase arrangements (72 as at October 2024).

New Model

3.2.6 Officers have been working with system partners to review the delivery model in Brent. A joint agreed statement was developed by the working group for the new model which states:

- Local Authority Children's Services (Public Health and Education) and the Health Integrated Commissioning Partnership (ICP) work together to ensure all children and young people communicate to the best of their ability so that they thrive through childhood and into adult life. These partners, alongside parent carers, build on the strengths of the linguistic and cultural diversity of Brent to create and foster opportunities for good development.
- The focus of our approach is based on the principle that children and young people's communication skills are best developed through interaction with those who are most familiar to them in everyday situations, both at home and in education settings. We aim to achieve this by ensuring a whole system approach - providing training and guidance to parents and a wide range of professionals (from maternity services to health visiting to nurseries and schools) who can then support children and young people in their everyday, functional interactions with peers and adults. For those children and young people who need it, therapeutic assessment, intervention and support will be available at a targeted and specialist level.
- This approach will contribute to improved outcomes, educational attainment and emotional health and wellbeing for Brent children and young people. It will also ensure that we nurture highly skilled staff, ensuring a workforce that is confident and responsive to individual communication profiles.

3.2.7 The purpose of the new model is:

- To build on existing provision across the continuum of need, from universal to specialist.
- To clarify needs at each level of provision and set out which agency/LA department is responsible for funding/delivering that element of provision.
- To meet previous gaps in service delivery.

The table below shows the developed model:

1	Universal	The focus is on early intervention and is available to all. It empowers parents and staff to facilitate support for all children and particularly those at risk of developing speech language and communication needs (SLCN).
2	Targeted 1 Max 40% of children will be between universal, targeted 1 and targeted 2 levels	<p>This level is linked to the graduated approach and is mainly setting/school-led, i.e. it is delivered universally or almost universally, and therefore not necessarily focused on the needs of individual children.</p> <p>Interventions include those which have been established with the help of the Speech and Language/or Assistant (SaLT/Assistant) but become self-sustaining within settings.</p>
3	Targeted 2	T2 interventions would include those that require the direct involvement of SaLT for assessment and monitoring, but which can be delivered by staff and/or parents, with relevant training provided.
4	Specialist Max. 10% of children at this level	This level supports those children who have a defined clinical need and where the therapist's expertise, together with the parents and/or key workers, will make a significant contribution.

Proposed New Speech, and Language Therapy Contract

3.2.8 The contract will deliver:

- An equitable and inclusive SaLT service to children and young people aged from 0 to 25 years with an EHCP where SaLT has been identified as a need in Section F within mainstream schools and Additionally Resourced provision (both in and out borough) and, where applicable, young people attend further educational facilities including colleges.
- The provision of SaLT to Brent children and young people in out-of-borough mainstream schools and FE colleges within a 12 miles radius of Brent Civic Centre.
- The contract will deliver SaLT as identified in Section F of EHCPs, review the level therapy provision and contribute to the statutory annual review. Where stated as part of an EHCP, the provider will also deliver training to staff in schools to support implementation of the SaLT programme.
- Young people known to the Youth Justice Service will have access to SaLT where that is stated in Section F of their Plan.

3.2.9 Taking a baseline of 1035 CYP with SaLT needs as of 1st April 2025 and building in a 7% growth in subsequent years, the expected number of CYP to be supported each year of the contract is:

Contract Year	Current CAP	In contract year growth, spot arrangement and ARPs: Baseline @Oct 2024	% increase from current CAP
24/25	770	1035	34%
New Contract Years	Number of CYP	plus Annual growth	Expected Number of CYP supported in each contract year
Year 1	1035	0%	1035
Year 2	1035	+7%	1108
Year 3	1108	+7%	1186
Year 4	1186	+7%	1269

3.2.10 Officers are recommending a direct award of the Contract under the Provider Selection Regime for the provision of SaLT with CLCH for a period of 3 years from 1 April 2025 – 31 March 2028, with an option to extend by 12 months (1 year) for a total contract value of £6,569,499 exclusive of VAT. The Contract will provide SaLT for 1035 children and young people in 2025/2026 with the number of children and young people supported increasing by 7% each Contract year.

3.2.11 The Contract procurement has been managed under the Provider Selection Regime (PSR) which was to be introduced under the Health and Care Act 2022. The PSR governs the procurement of health care services in England by bodies including NHS England, ICBs, NHS Trusts and local authorities. The provision of SaLT is therefore in scope. The PSR removes the requirement to competitively tender and provides an alternative framework to allow collaboration leading to contract award.

4.0 Award Considerations

4.1 The Council, as a relevant authority under the Health Care Services (Provider Selection Regime) Regulations 2023 ('PSR'), must follow the appropriate procurement process as determined by the PSR when procuring relevant health care services.

4.2 The PSR mandate allows the following processes: a) direct award process — which is subdivided into three forms of direct award (A, B, and C); b) the most suitable provider process and c) a competitive process.

4.3 Officers have identified direct award process C as the most suitable process to procure the Contract for Speech and Language Therapy for children and young people in Brent with an EHCP and have addressed its requirement as follows:

Ref.	Requirement	Response
(i)	Description of the relevant health care services to which the contract relates, including the most relevant CPV (Common	85100000-0 - Health services

Ref.	Requirement	Response								
	Procurement Vocabulary) code(s) – PSR Schedule 1									
(ii)	Are you also procuring other goods or services along with the relevant health services as described above (mixed procurement)?	No								
(iii)	The value.	£6,569,499 exclusive of VAT								
(iv)	The contract term.	Initial period of three (3) years from 1 April 2025 to 31 March 2028 with an option to extend by a further 12 months (1 year)								
(v)	The procurement process adopted.	Provider Selection Regime Route C Direct Award.								
vi	Are you required to use direct award processes: A (one capable supplier) or B (patient choice) under the PSR?	No								
vii	Did you consider the Most Suitable Provider or Competitive Processes? Why neither of those processes have been recommended for this procurement?	Officers are satisfied that the existing provider is meeting the current contractual arrangement. Officers believes the existing provider will continue to meet the requirements of the new contract and therefore did not seek a competitive process.								
viii	Are the proposed contract arrangements changing considerably from the existing contract?	No, Officers have determined the considerable change threshold has not been met. The changes in the relevant care services to which the proposed contracting arrangements related (compared with the existing contracts) are attributable to a decision of the Council; however, the decision had to be made due to external factors as a result of higher volume of service user volumes which is beyond the control of the relevant authority or the provider. The proposed contracting arrangements are not materially different in character to the existing contract when that existing contract was entered into.								
ix	Is the existing provider (CLCH) satisfying the existing contract to a sufficient standard and is likely to be able to satisfy the new contract to a sufficient standard?	Yes, see (xi)								
x	The procurement timetable.	<table border="1"> <thead> <tr> <th>Stage in Procurement</th> <th>Indicative dates</th> </tr> </thead> <tbody> <tr> <td>Publication of notice of intention to make an award to existing provider</td> <td>18/02/2025</td> </tr> <tr> <td>Standstill period of at least 8 working days</td> <td>19/02/2025 - 27/02/2025</td> </tr> <tr> <td>Confirmation of award</td> <td>28/02/2025</td> </tr> </tbody> </table>	Stage in Procurement	Indicative dates	Publication of notice of intention to make an award to existing provider	18/02/2025	Standstill period of at least 8 working days	19/02/2025 - 27/02/2025	Confirmation of award	28/02/2025
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Ref.	Requirement	Response	
		Contract start date	01/04/2025
(xi)	The evaluation criteria and process.	<p>Key criteria as follows:</p> <p>Quality and innovation 30%</p> <ul style="list-style-type: none"> • Provider will be able to satisfy the new contract to a sufficient standard. • The service should support the Local Authority to fulfil its statutory duties through the delivery of the services within this contract. • Resources are to be recruited to meet the projected increase and growth annually. <p>Value 30%</p> <ul style="list-style-type: none"> • Provider will be able to satisfy the new contract to a sufficient standard. • The provider actively engages in reviewing gaps in provision with key partners and is working to understand how resource can support the new model of delivery. <p>Integration, collaboration and service sustainability 25%</p> <ul style="list-style-type: none"> • Provider will be able to satisfy the new contract to a sufficient standard. • The service is currently meeting the Borough based plan, and the new service specification and contract outlines opportunities for the provider to do this again. For example, CLCH sits on the steering group for the Start for Life programme. <p>Improving access, reducing health inequalities and facilitating choice 5%</p> <ul style="list-style-type: none"> • Provider will be able to satisfy the new contract to a sufficient standard. • The new specification outlines an equitable and inclusive Speech and Language Therapy Service to children and young people aged from 0 to 25 years with an Education Health Care Plan, where SaLT has been identified as a need in Section F, within linked early years settings, mainstream schools and ARPs (both in and out borough) and, where applicable, some young people attending further educational facilities including colleges. • The service delivers training to staff in schools to support implementation of the programme. <p>Social value 10%</p> <p>While there is no specific commitment to the Council's Social Value and Ethical Procurement policy, the provider is actively engaged in reviewing gaps in provision with key partners within the wider system and is working to understand how resource can support the new model of delivery. This supports improvements in the cohort's life chances to realise their aspirations by ensuring early intervention at all ages and support for children, young people and families.</p>	
xii	Information as to how any conflicts or potential	No conflicts of interest were declared.	

Ref.	Requirement	Response
	conflicts of interest have been managed	
xiii	<p>Procurement Principles - briefly explain how this procurement has been made with a view to:</p> <ul style="list-style-type: none"> ◦secure the needs of the people who use the services ◦improve the quality of the services, and ◦improve efficiency in the provision of the services <p>And carried out transparently, fairly and proportionately</p>	<p>Under the Children and Families Act 2014, local authorities have a responsibility to meet the educational needs of children and young people as stated in a child or young person's Education Health and Care Plan (EHCP).</p> <p>A working group was set up to review the provision of Speech Language Communication Needs and Occupational Therapy in Brent resulting in the development of a new Model and a joint statement agreed which ensures all children and young people communicate to the best of their ability so that they thrive through childhood and into adult life.</p> <p>These partners, alongside parent carers, build on the strengths of the linguistic and cultural diversity of Brent to create and foster opportunities for good development. The service will therefore provide a smooth transition for the CYP as they get older and become an adult.</p> <p>The Council have undertaken a thorough assessment of the provider's capabilities against the key criteria and have determined a competitive procurement exercise was not required because the provider is likely to satisfy the original contract and will likely satisfy the proposed contract to a sufficient standard.</p>
(xiv)	Any business risks associated with entering the contract.	No specific business risks are considered to be associated with entering into the Contract.
(xv)	The Council's Best Value duties.	It is considered that by adopting the procedure detailed in Section (v) above, award will result in the Council achieving best value.
(xvi)	Consideration of Public Services (Social Value) Act 2012	<p>The outcome of the Contract is designed to benefit those living in Brent.</p> <p>Social Value is a requirement of the Contract.</p>
(xvii)	Any staffing implications, including TUPE and pensions.	There are no implications for Council staff arising from the procurement.
(xviii)	The relevant financial, legal and other considerations.	<p>Financial – See Financial Considerations section 6 below.</p> <p>Legal – See Legal Considerations section 7 below.</p> <p>Other – N/A</p>
(xix)	Sustainability	Given the nature and value of the Contract, it is not possible to include specific sustainability requirements.
(xx)	Key Performance Indicators / Outcomes	Appropriate Key Performance Indicators / Outcomes will be included in the Contract.
(xxi)	London Living Wage	The Contract will require the payment of the London Living Wage.

Ref.	Requirement	Response
(xxii)	Contract Management	A contract manager will be appointed, and appropriate contract management provisions will be included in the Contract.

5.0 Stakeholder and ward member consultation and engagement

5.1 Consultation has taken place with a range of internal and external stakeholders to inform future delivery. Parent and carers, schools and early years' settings were consulted at the start of the review (October 2023). A meeting was held with Parent Carer Forum to discuss the proposed changes in November 2023. A series of workshops were held in Spring 2024 with services across Children and Young People Directorate, delivery partners, Public Health and NWL ICP/ICB. Respondents were overall positive about improving access to therapies. Updates on the progress of the review have been taken to Schools Forum.

6.0 Financial Considerations

6.1 The current SaLT contract is funded from the High Needs Block of the Dedicated Schools Grant with an annual budget allocation of £1.11m and £0.14m allocated for spot purchases, totalling £1.25m.

6.2 As a demand led service, incorporating spot purchases into the overall contract would mitigate the risk of exceeding the available budget for the service.

6.3 The total available budget over four years, starting from April 2025 is £5.46m. This includes funding for spot purchases and a projected 7% annual growth from 2026/27. This amount aligns with the current forecast spend of £1.25m for the current financial year (excluding provision for children and young people in ARPs).

6.4 The proposed contract cost of £6.57m would create £1.1m budget pressure over the 4 years. This pressure includes the extension of the contract to provide services for children and young people in ARPs, with an estimated cost of £0.717m over this period. The £1.1m pressure will be addressed through a review of services funded by the High Needs Block of the DSG and a subsequent realignment of funding to ensure the High Needs Block budget remains balanced.

7.0 Legal Considerations

7.1 Officers are recommending the award of the Contract to the existing provider CLCH without competition by following the Provider Selection Regime's direct award process C which was introduced by the Health Care Services (Provider Selection Regime) Regulations 2023 ('PSR') which came into force on 1 January 2024, and that replaced the Public Contracts Regulations 2015 for

defined health care services; and National Health Service (Procurement, Patient Choice and Competition) Regulations 2013.

- 7.2 The Council as a defined Relevant Authority under the PSR, is required to apply the PSR for the purposes of procuring relevant health care services. Relevant health services are a statutory defined term under the regulations (Schedule 1). Officers in the table at section 4 have identified the Speech and Language Therapy (SaLT) for children and young people in Brent schools as relevant health care services subject to the PSR.
- 7.3 Unlike the Public Contracts Regulations 2015, the PSR regime has no minimum financial threshold for its application. However, it mandates the Council to follow one of the processes under the PSR and comply with the procurement principles which require the Council to make decisions in the best interests of the services' users.
- 7.4 Officers have identified direct award process C as the most appropriate process to award a contract to the incumbent provider on the basis that the Council is not required to follow direct award processes A or B, the term of the current contract is due to expire 31 March 2025, and Officers propose the new Contract to replace it. In the table at section 4, above, Officers have explained that the "considerable change" threshold is not met and that after applying key criteria and basic selection criteria their view is that the existing provider is satisfying the existing contract and will likely satisfy the proposed Contract to a sufficient standard.
- 7.5 Furthermore, Officers have also explained the steps taken in order to procure the Contract ensures compliance with the procurement principles and therefore, are now seeking authority to award the Contract to CLCH so a notice of intention to make an award to the existing provider can be published in Find a Tender containing the information set out in Schedule 3 of the PSR.
- 7.6 A contract procured using the direct award process C must not be entered before the end of the standstill period. The standstill period begins the day after the notice of intention to make award is published on Find a Tender and it must last for a minimum of eight working days. The standstill period is to give a service provider who is either aggrieved or believes that PSR have not been complied with, the opportunity to make written representations to the Council particularising concerns before the contract is formalised. Such representations should be received before midnight on the eighth working day after the standstill period begins. Following the end of the standstill period, and providing that no written representations are made during the standstill period the relevant authority can enter into the contract.
- 7.7 Contract Standing Order 86f (iv) states that subject to complying with any relevant parts of Procurement Legislation, Tenders need not be invited, nor quotations sought for contracts for health care services procured in compliance with the Provider Selection Regime PROVIDED that advice is sought from the Corporate Director of Law and Governance and Head of Procurement.

- 7.8 The award is subject to the Council's own Standing Orders and Financial Regulations in respect of High Value Contracts given the procurement is valued at more than £5 million. Part 3 of the Council's Constitution state that contracts for services exceeding £5 million shall be referred to the Cabinet for approval of the award of the contract.
- 7.9 As the decision being sought here is a Key Decision, it may not be taken by Cabinet unless this matter has been published on the Forward Plan. The Key Decision must be published on the Forward Plan (Paragraph 30 of the Access to information rules) and must be included on the Forward Plan not less than 28 days before the decision is to be made. (Paragraph 34 of the Access to Information Rules). The decision to award has been placed on the Forward Plan for the requisite 28 days. The decision is subject to the Council's 5 clear day call-in period and may not be implemented until after expiry of the call-in period provided that no call in has been made.
- 7.10 There are no TUPE implications as the Contract is being awarded to the same provider who is delivering the current services and there will be no Council staff impacted by this decision.

8.0 Equity, Diversity & Inclusion (EDI) Considerations

- 8.1 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.
- 8.2 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.
- 8.3 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.
- 8.4 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.

8.5 Cabinet is referred to the contents of this report for information, in particular the Equality Analysis at Appendix 1

9.0 Climate Change and Environmental Considerations

9.1 The proposals in this report have been subject to screening and officers believe that there are no adverse impacts on the Council's environmental objectives and climate emergency strategy.

10.0 Human Resources/Property Considerations (if appropriate)

10.1 This service is currently provided by an external contractor and there are no implications for Council staff arising from the direct award to the incumbent provider.

11.0 Communication Considerations

11.1 Given that the recommended award of the Contract is to the incumbent provider, it is not considered that the award of the Contract has any direct communication considerations.

Report sign off:

Nigel Chapman

Corporate Director, Children and Young People