

2 February 2021		ITEM: 10
Children’s Services Overview and Scrutiny Committee		
Emotional Wellbeing and Mental Health Service Re-Procurement		
Wards and communities affected: All	Key Decision: N/A	
Report of: Catherine Wilson, Strategic Lead, Commissioning and Procurement, Adults, Health and Housing and Sue Green, Strategic Lead, Integrated Commissioning and Transformation, Children’s Services		
Accountable Assistant Director: Michele Lucas – Assistant Director, Education and Skills		
Accountable Director: Sheila Murphy, Corporate Director of Children Services		
This report is Public		

Executive Summary

This paper sets out the options in commissioning emotional wellbeing and mental health support for children and young people. The current commissioning arrangements have been in place since 2015.

We recognise that we will face significant challenges in meeting the increasing demand for emotional wellbeing and mental health services as a result of the COVID-19 restrictions. The work to transform how mental health services are offered that has already commenced will provide the opportunity to take a whole systems approach to delivery that will better help ensure that we make best use of the resources available.

The current services to support children and young people’s emotional wellbeing and mental health in Thurrock are provided through a collaborative commissioning arrangement across Thurrock, Essex and Southend. This arrangement has led to an improved single point of access and seamless access to services in different tiers of need. This is particularly the case for access to tier two and tier three services which were previously accessed through different referral systems, often resulting in delays for children and young people in receiving support. The current commissioned service ends in 2022 and this report outlines the proposals for the collaborative re-procurement of this service to ensure we have continued support for children and young people in place.

The provision of a pan Thurrock, Essex and Southend Emotional Wellbeing and Mental Health Service brings together the budgets of the three local authorities and

seven Clinical Commissioning Groups (CCGs). This includes the financial contribution of £205k (subject to inflationary increases) from Thurrock Council.

It is the recommendation of the commissioner that Thurrock agrees to continue to work as part of the Collaborative Commissioning Forum to re-commission an integrated Emotional Wellbeing and Mental Health Service from 2022, thus ensuring we continue to provide a strong strategic overview across Thurrock, Essex and Southend economies of scale and the collaborative understanding of the view of all three local authorities and seven CCGs.

1. Recommendation(s)

- 1.1 That members consider the continuation of the collaborative commissioning arrangements in place and support the financial contribution from Thurrock Council as set out in the paper**
- 1.2 That members agree to the recommendation to Cabinet for the re-procurement of the tier two and tier three Emotional Wellbeing and Mental Health Service through the collaborative commissioning arrangements.**

2. Introduction and Background

- 2.1 Children and young people's emotional wellbeing and mental health services are provided through a collaborative commissioning arrangement across Thurrock, Essex and Southend. This arrangement has been in place since 2015 and has led to an improved single point of access and seamless access to services in different tiers of need.
- 2.2 The current commissioned service ends in 2022 and this report outlines the proposals for the collaborative re-procurement of this to achieve delivery commencement at the end of the current contract in 2022.

3. Issues, Options and Analysis of Options

- 3.1 There has been universal acknowledgment in policy over the past ten years of the challenges faced by children and young people in developing resilience and psychological wellbeing. For those children and young people with diagnosable mental health problems and their families/carers and the agencies that support them, the challenges are greater. It is known that 50% of lifetime mental illness (except dementia) begins by the age of 14 and 75% by age 18.
- 3.2 The provision of a pan Thurrock, Essex and Southend Emotional Wellbeing and Mental Health Service brings together the budgets of the three local authorities and seven Clinical Commissioning Groups and as such enables larger economies of scale.

- 3.3 It is proposed that there is a continuation of the jointly commissioned approach for the delivery of children and young people's Emotional Wellbeing and Mental Health Service. This includes the continuation of £205k per annum (subject to inflationary increases) contribution from Thurrock Council to an overall annual budget of approximately £21m, including from the Thurrock Clinical Commissioning Group, with whom we work closely.
- 3.4 As there is no delegation of commissioning functions to the lead for the proposed project, West Essex CCG, from Local Authorities or CCGs, there are no pooled funds created. There is no requirement to enter into partnership agreement under s75 of the NHS Act 2006 for Local Authorities.
- 3.5 The proposal for the term of this project is seven years with the option to extend for a further three years. This is in line with the scale and size of the project.
- 3.6 The contract covers a minimum of 35% of children in Thurrock to have access to the service, this is the same access rate for all locality areas covered by the service specification.
- 3.7 The proposed specification requires the following key principles are factored in to the delivery of the service:
 - 3.7.1. An integrated responsive and evidence based Tier 2 and Tier 3 Emotional Wellbeing and Mental Health Service across Thurrock, Essex and Southend to all children and young people aged from 0 until their 18th birthday, or 25th birthday for those service users with Special Educational Needs (SEN) and/or disabilities, including those with Education Health and Care (EHC) plans, and who require longer term mental health support (these may involve adult services where applicable and appropriate). Ensure those children and young people aged 18 years needing long term mental health support receive appropriate provision to meet their needs and have a smooth transition to adult mental health services where they meet the criteria for acceptance into adult services.
 - 3.7.2. Equitable service provision for those children and young people from the more vulnerable groups, prioritised based on their mental health clinical presentation.
 - 3.7.3. To provide assessment and treatment compliant with national and local standards for children and young people with emotional wellbeing and mental health disorders who meet the acceptance criteria for the service, who also present with complex physical health needs including learning disability, autistic spectrum disorder, attention deficit and hyperactivity disorder, to improve access and multi-agency intervention.

- 3.7.4. Children/Young People Misusing Substances and/or with a gambling addiction to work in partnership at appropriate levels and where clinically specified for mental health treatment.
- 3.7.5. CCG locality based Child and Adolescent Mental Health Services through the Emotional Wellbeing and Mental Health Service – including a team working in Thurrock.
- 3.7.6. A single point of access to carry out screening and appropriate directing and/or signposting for those that do not meet the acceptance criteria into other appropriate services for emotional wellbeing and mental health needs.
- 3.7.7. Out of hours and emergency care available 24/7, 365 days per year. A crisis intervention and intensive support team, which aims to prevent hospital admission for those children and young people whose mental health state requires an urgent response within 24 hours.
- 3.7.8. Offer a first appointment to all children and young people who meet the referral criteria. This first appointment, unless in unscheduled or urgent care, should be as soon as possible and no later than 4 weeks.
- 3.7.9. Provide interventions and treatments, where required and agreed with children, young people and families/carers, as soon as possible, and no later than 18 weeks from first referral, with the median experienced wait for treatment being no longer than 12 weeks.
- 3.8 Consideration has been given to the best way to provide support to children and young people, however any change to how we commission as an individual authority will reduce the availability of a seamless service and single point of access due to the level of funding available by the local authority.
- 3.9 It is recommended by the commissioner that Thurrock agrees to continue to work as part of the Collaborative to re-commission an integrated Emotional Wellbeing and Mental Health Service from 2022 with a strategic overview across Thurrock, Essex and Southend. This provides economies of scale and the collaborative understanding the view of all three local authorities and seven CCGs whilst retaining local support.
- 3.10 The changes in the health landscape being considered across Thurrock, Essex and Southend with place based commissioning being at the forefront mean that a collaborative commissioning agreement will support the ability to work across these systems. Place based outcomes via the locality teams will allow for:
 - A strengthening of place-based clinical leadership
 - Accountability and quality of local health services
 - Development of relationships with local public and third sector

- Delivery of education and training opportunities to interested parties such as GPs, schools
- Working with key strategic partners in the locality areas

3.11 The ongoing provision of emotional wellbeing and mental health services for children and young people will support the work to transform the offer and better offer a seamless pathway between adult and children's support where appropriate. The work to transform mental health services through a whole systems approach that is already underway includes a focus on these aspects.

4. Reasons for Recommendation

4.1 This recommendation provides the opportunity to:

- Continue to work collaboratively across all three local authorities and seven CCGs.
- Continue to build on the successes and learning of the collaborative since 2015 and look at the legacy of the work already undertaken to support children and young people.
- A joined up and integrated service for children, young people, families and other professionals in the system, with a single point of access and well-connected system of support.
- Economies of scale due to being part of a collaborative of ten partners and further enhance and refine delivery models.

5. Consultation (including Overview and Scrutiny, if applicable)

5.1 The proposal has been discussed across the Collaborative Commissioning Forum, and with the Children's Directorate Management Team. Local work to transform the Mental Health offer through a whole system approach is ongoing and this will include a focus on the pathway between children's and adult services. As this work develops, discussion will be held at the Brighter Futures Board and Health and Wellbeing Board as appropriate.

5.2 If agreed, the joint approach will include consultation with children and young people locally, especially those from vulnerable groups throughout the procurement process.

6. Impact on corporate policies, priorities, performance and community impact

6.1 This commissioning supports the following corporate priority:

People – a borough where people of all ages are proud to work and play, live and stay.

This supports delivery of:

- high quality, consistent and accessible public services which are right first time
- build on our partnerships with statutory, community, voluntary and faith groups to work together to improve health and wellbeing.
- communities are empowered to make choices and be safer and stronger together.

7. Implications

7.1 Financial

Implications verified by: **David May**
Strategic Lead Finance – Children’s Services

The costs of providing safe and effective interventions associated with supporting children and young people in the community with crisis support or outreach can be considerably less than those associated with inpatient care. The provision of mental health services through a collaborative approach brings economies of scale and provides a wider range of access to services. Earlier access to services and the reduction of delays in access prevents longer term need and therefore a reduction in costs.

7.2 Legal

Implications verified by: **Courage Emovon**
Principal Lawyer / Manager – Contracts & Procurement Team

The Council have a statutory obligation to provide for the Health and wellbeing of its local residents and the proposals in this report reflects that duty and obligation.

The NHS Long Term Plan published in January 2019, restated the Government’s commitment to deliver the recommendations in The Five Year Forward View for Mental Health and set out further measures to improve the provision of, and access to, mental health services for children and young people.

Whilst the recommendations in this report support the delivery of mental health support for children and young people, it is noted that Legal services will be on hand to advise on any issues arising from the recommendations as and when required.

7.3 Diversity and Equality

Implications verified by: **Roxanne Scanlon**

Community Engagement and Project Monitoring Officer – Adult’s, Housing and Health

Under the Equalities Act 2010 Local Authorities and CCGs have a duty to have regard to the need to:

(a) Eliminate unlawful discrimination, harassment and victimisation and other behaviour prohibited by the Act. In summary, the Act makes discrimination etc. on the grounds of a protected characteristic unlawful.

(b) Advance equality of opportunity between people who share a protected characteristic and those who do not.

(c) Foster good relations between people who share a protected characteristic and those who do not including tackling prejudice and promoting understanding.

The protected characteristics are age, disability, gender reassignment, pregnancy and maternity, marriage and civil partnership, race, religion or belief, gender, and sexual orientation. The Act states that ‘marriage and civil partnership’ is not a relevant protected characteristic for (b) or (c) although it is relevant for (a).

The initial equality impact assessment completed as a part of this exercise indicates that the proposals in this report will not have a disproportionately adverse impact on any people with a particular characteristic. A full equality impact assessment will be completed as a part of the procurement process.

7.4 Other implications (where significant) – i.e. Staff, Health, Sustainability, Crime and Disorder)

None

8. Background papers used in preparing the report (including their location on the Council’s website or identification whether any are exempt or protected by copyright):

- None

9. Appendices to the report

- None

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