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# **Children and Families Committee**

16 September 2024

Paediatric Speech, Language and Communication Therapy Service

## **Report of: Executive Director for Children and Families**

## Report Reference No: CF/28/24-25

Ward(s) Affected: (All Wards);

### **Purpose of Report**

- 1 To update the committee following the review, consultation and engagement by the council and Cheshire & Merseyside Integrated Care Board (ICB) of the paediatric speech, language, and communication therapy (SLCN) services.
- 2 To provide the committee with oversight of the proposed service model and to seek authorisation to follow a competitive tender process and award the successful provider the joint service contract from April 1<sup>st</sup>, 2025.
- 3 This service falls under the 'fair' priority of the council's Corporate Plan 2021-2025, and specifically to reduce inequalities, promote fairness and opportunity for all and support our most vulnerable residents.

#### **Executive Summary**

- 4 This paper follows on from the report on the 12<sup>th</sup> of February 2024.
- 5 The council and ICB have completed the review, consultation and engagement and service redesign, and the next steps are to conduct a full formal tender to seek best value service for its local citizens.

### RECOMMENDATIONS

The Children and Families Committee is recommended to:

- 1. Approve the new service model and authorise the procurement for a new service contract for a 5-year term with a 1 + 1 year extension period.
- 2. To approve the joint commissioning of the SLCN service between the council and ICB, formalised with a Section 256 Agreement.
- 3. Delegate authority to the Executive Director of Children's Service and/or equivalent authorised officer to award the contract for the jointly commissioned Paediatric Speech Language and Communication Therapy Service.

# Background

6 The report to committee on the 12<sup>th</sup> of February 2024, outlined the background, and the legal responsibilities (Appendix A).

## **Consultation and Engagement**

- 7 The council and ICB have consulted and engaged with parents, carers, children, professionals, education establishments and stakeholders to provide the details that shape the future service offer.
- 8 The consultation and engagement highlighted themes from parents/carers, professionals, and education settings. Further details on the consultation and engagement can be found in Appendix B.
- 9 People told us that we need to:
  - Enhance the early help offer e.g., community drop-in sessions.
  - Increase training for schools and parents.
  - Improve and develop **digital solutions** and platforms to aid communication, intervention, training, and progress tracking & reporting. Digital is not a replacement for support but to enhance the offer.
  - Single point of contact & accessible guidance and information.
  - Visibility of the service it needs a 'brand'.

#### 10 The Service Model

11 To ensure the service is fit for the future, the offer will be a **Whole System** graduated approach with an emphasis on early help, communication, embracing digital technology to widen easy access to advice, guidance, information, and early help support. The main elements for the new model that will be included into a newly developed service specification:

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- **Single Point of Access.** The service arrangement will be via a 'hub and spoke' approach with 'spokes' being outreach into in community venues, clinics, special schools with a clustered appointment approach. The hub will provide visible access to advice, guidance & information, website management, training coordination, administration of queries, referrals and assessments appointments.
- Whole System Collaboration coordination of the offer with partners to provide a clear and visible service pathway.
- **Digital Transformation**: Improve the digital offer, with a visible branded website offering interactive information, advice and guidance. Digital resources for schools and parents/carers with an online assessment screening tool, mix of in-person and digital appointments. Three-way digital communication with parents, therapist and school on the child's progress, this will aid appropriate service discharge.
- **Early Help:** Increase number of drop-in groups in Family Hubs, community settings and develop an offer for the over-fives, develop pop up community sessions. Increase training for SENCOs, teaching assistants and parents and awareness communication for schools and other education settings.
- Schools, Further Education & Pre-School Core Offer: Design a core offer for schools that include digital enhancement, training and upskill staff within settings.
- **Specialist/Complex School Offer:** The Provider will co-design the offer with professionals and representative working towards clustered appointments in identified education establishments.
- **Traded Services & Recharging**: The provider will need to develop a traded service offer for schools and other education establishments. Where there are no reciprocal arrangements, the provider will recharge the appropriate Health Trust or Local Authority for children placed by other Authorities placing children in Cheshire East schools requiring speech and language therapy.
- **Out of Borough Children:** The provider will need to seek suitable arrangements with other agencies to cover children who are placed within a school under 20 miles of Cheshire East boundaries.
- **Visibility:** The service will co-design with parents, children and stakeholders a **brand** that is recognisable to citizens in Cheshire East.

#### 12 Joint Commissioning Arrangements

13 The council and ICB have reviewed the practicalities of a jointly procured contract. There are benefits for both organisations in having one service contract, reducing the pressure on internal commissioning resources by streamlining the contract and performance monitoring from

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the current situation of four separate service contracts to one. The main benefit for children will be a streamlined and consistent offer from clinic to community.

14 The council will be leading on the procurement and subsequent contract management. This arrangement will be supported using a Section 256 Agreement, that allows our health partner transfer funds to the council for this service on an annual basis.

### **Reasons for Recommendations**

- 15 The paper dated the 12<sup>th</sup> of February 2024 outlined the statutory obligations to provide SLCN services.
- 16 There are three options available to the council, this report would recommend option 3, to gain the most effective and efficient service offer for children and young people. The outlined option appraisal is set out below.

	Option	Impact	Risk
1.	Do nothing	The council will be at risk of non-compliance with its legal obligations. Future service demand/needs for children may not be met.	Increased costs due to certainty of additional Tribunal cases. Reputational damage at a national level. Increased costs for spot provision of service/s.
2.	The council procure the service without its health partner.	Lacks and opportunity to reduce overheads costs by only having one provider.	Would not realise the saving benefits, more barriers for children accessing the service. Reduced opportunities to ensure the service is fit for the future to meet growing demands and changing needs of the patients.
3.	The council and ICB jointly procure the future service	The council and ICB would meet all legal obligations. There are natural resource and budget savings. The economy of scale will attract more providers to increase competitive tendering. Critically it will provide better access and a	Partnership can have a financial or reputational risk where there could be provider failure. The partnership may have future financial pressures that may require reduction to the service budget.

seamless service for children and young people.	Changes to legislation can impact on changes
	to the service delivery.

## **Implications and Comments**

#### Monitoring Officer/Legal

- 17 The council have a statutory duty to provide SLCN services for a child/ren where this is required in their EHCP and outlined in Section F. This duty is set out within the Children's and Families Act 2014 Part 3 and the Special Educational Needs and Disability Code of Practice: 0 to 25 years (DfE, 2015a).
- 18 The procurement will be undertaken in accordance with the relevant provisions of the Public Contract Regulations 2015, Health and Care Act, 2022, Health Care Services (The Provider Selection Regime) Regulations 2023 and Cheshire East Council's and the C&M Integrated Care Board's Finance & Contract Procedure Rules.
- 19 The Section 256 Agreement will be agreed and authorised before the contract award to prevent delays to award the contract, mobilisation and subsequent contact start date.
- 20 The contract will be for a 5-year period with an option to extend for a 1 plus 1-year period.

#### Section 151 Officer/Finance

- 21 There is a VEAT/WARN to cover the financial years of 23/24 and 24/25, with a requirement that a recommissioning exercise will have a mobilised service for April 2025. The proposal can be funded from within existing budgets and funded by the High Needs Block of the Dedicated Schools Grant (DSG).
- 22 The current budgets for 2025/26 are as follows:
  - The Council: £850,000 per annum.
  - The ICB: £1,417,062 per annum.
- 23 The budget for the Council contribution for the new contract in 2025/26 is £850k pa, this is in line with the DSG management plan.

# Risk Management

24 The Section 256 Agreement will ensure that the joint arrangements address financial and reputational implications for the council.

Access to Information				
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r:	Martyn.Baggaley@cheshireeast.gov.uk			
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Appe ndice s:	Appendix A – C&F Committee Decision Report 12th February 2024.Appendix B – Consultation and Engagement Update Report 2024.			
Back groun	1. Children and Families Act 2014, Part 3: https://www.legislation.gov.uk/ukpga/2014/6/part/3/enacted			
d Paper s:	<ol> <li>Special Educational Needs and Disability Code of Practice: 0 to 25 years (DfE, 2015a). <u>https://assets.publishing.service.gov.uk/government/uploads/system/ uploads/attachment_data/file/398815/SEND_Code_of_Practice_Janu ary_2015.pdf</u></li> </ol>			
	3. Health and Care Act 2022. <u>Health and Care Act 2022</u> (legislation.gov.uk)			
	<ol> <li>Health Care Services (Provider Selection Regime) Regulations 2023. <u>The Health Care Services (Provider Selection Regime) Regulations</u> <u>2023 (legislation.gov.uk)</u></li> </ol>			
	<ol> <li>Special Educational Needs and Disability (SEND) Strategy 2021 - 2025. <u>SEND Strategy 2021 -2025 (cheshireeast.gov.uk)</u></li> </ol>			
	<ol> <li>SEND Sufficiency Statement for children and young people with an education, health, care plan (EHCP) 2023-2026. <u>SEND Sufficiency</u> <u>Statement for children and young people with an education, health,</u> <u>care plan (EHCP) (cheshireeast.gov.uk)</u></li> </ol>			
	<ol> <li>'Bercow: 10 years on' (2018). published a report on the state of provision for Children's Speech, Language and Communication Needs (SLCN) in England.</li> </ol>			

https://www.bercow10yearson.com/findings/
<ol> <li>Equity for all: Children Speech and Language Therapy Services in Scotland (2022). <u>2022 Equity for All Final for Publication.pdf</u> (bettercommunication.org.uk)</li> </ol>
<ol> <li>The Balanced System; Understand the Need and Measuring the Impact. Northwest Network (2024). <u>Slide 1</u> (<u>bettercommunication.org.uk</u>)</li> </ol>
10. Best start in speech, language and communication: Guidance to support local commissioners and service leads (2020). <u>Best start in</u> <u>speech, language and communication: Guidance to support local</u> <u>commissioners and service leads (publishing.service.gov.uk)</u>