

Cheshire East Council

Cabinet

Date of Meeting: 6th February 2018

Report of: Mark Palethorpe, Acting Executive Director of People

Subject/Title: Early Help Framework

Portfolio Holder: Cllr Janet Clowes (Adults Social Care and Integration)
Cllr Jos Saunders (Children and Families)
Cllr Liz Wardlaw (Health)

1. Report Summary

- 1.1 The purpose of this report is to seek agreement for setting up an Early Help Framework across the People Directorate in order to streamline the procurement of early help services.

2. Recommendation

- 2.1 That Cabinet:
- Endorses the co-production of the Early Help Framework with statutory partners, Voluntary Community Faith Sector organisations, and other providers.
 - Approves the procurement of a Dynamic Purchasing System in order to award contracts for services provided through the Early Help Framework.
 - Delegate authority to award contracts to the Executive Director of People.

3. Reasons for Recommendation

- 3.1 Currently, Adults, Children's, Communities and Public Health all commission early help services. This takes place using either a contract or a grant, with services managed and monitored within individual departments. This can lead to duplication of services and effort. The approach aims to prevent duplication as a whole organisation approach. Similar commissions are also undertaken by the two Clinical Commissioning Groups.
- 3.2 Implementing a framework negates the requirement to undertake a full procurement each time a service needs commissioning, meaning a contract can either be awarded directly (if criteria allows) or awarded via a mini-competition (allowing bids using a questionnaire and service specification).
- 3.3 The framework offers an exciting opportunity to commission services that fit

within the 'triangle of prevention' (see figure 1) and to achieve improved outcomes for local people. This means anticipating and responding to health and wellbeing needs as early as possible to ensure that local people are helped to 'live well and for longer' at scale. Building resilience, so that people are empowered to recognise and address their own health and wellbeing needs and to make the most of assets within communities (such as by connecting people with local groups/ voluntary services), which is a core part of this approach.

- 3.4 The Council therefore aims to work in partnership with both Clinical Commissioning Groups, the Voluntary, Community and Faith Sector, local communities and residents to ensure that we are able to improve outcomes for local people at a community level (universal), with early intervention and prevention services targeted at those who need it (targeted). Working in this way will help to prevent or delay local people from moving up the triangle and needing 'Long Term Care and Support' (specialist).

- 3.5 This will ultimately reduce demand for long-term care and health treatment which will remain available for the smaller number of individuals who need it most as a result of this preventative strategy. This approach is a direct requirement of the Care Act 2014, is a key principle of the Commissioning Strategy "People Live Well, For Longer" and also supports the achievement of Outcome 5 within our Corporate Plan (2017-2020): 'People Live Well and for Longer'.

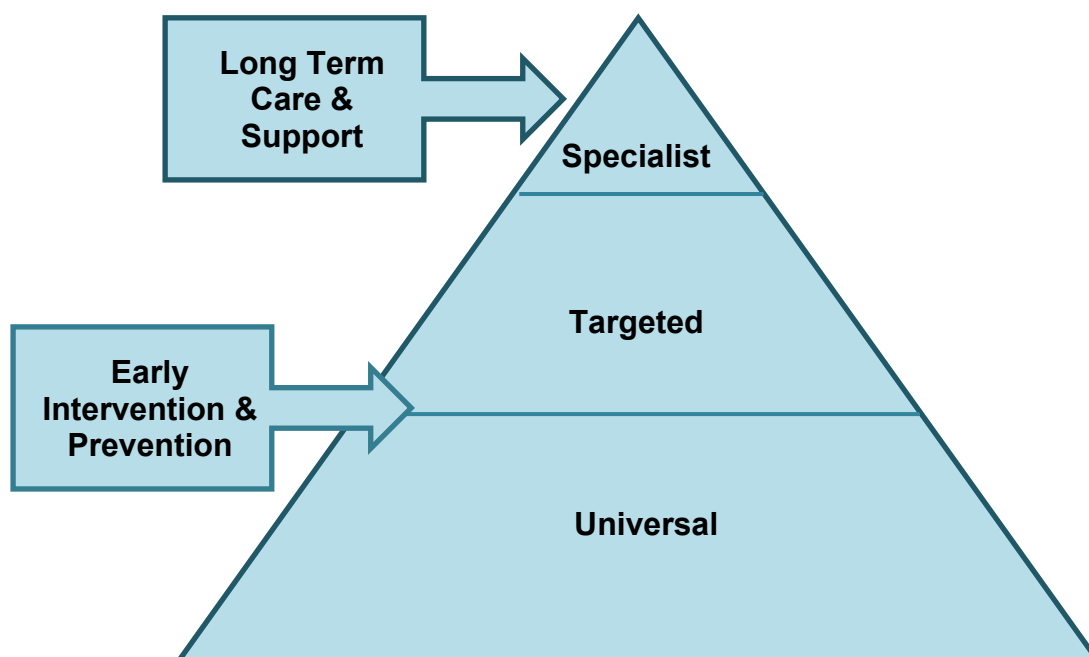


Figure 1: Triangle of Prevention

4. Other Options Considered

- 4.1 Remaining with the current delivery and commissioning model will make it more difficult to implement an integrated preventative approach, targeted at helping our population to live more healthily and independently.

5. Background

- 5.1 The advantage of a Framework is that it negates the requirement to undertake a full procurement each time a service needs commissioning. Instead a contract can either be awarded directly (if criteria allows) or awarded via mini-competition (allowing bids using a questionnaire and service specification).
- 5.2 A Dynamic Purchasing System will be used within the Framework which enables the need for a particular service to be met for a period of time, in order to obviate the need to undertake a wider competitive process in relation to each individual procurement. It complies with EU requirements and the Council's procurement rules. A mini-competition will be held between the suppliers appointed to the Dynamic Purchasing System in order to make contract awards.
- 5.3 This model will allow small organisations (or new start-ups) to bid for lower value/risk commissions more easily, and will allow them to work with a simpler contract and lighter performance management regime. Procurement has developed a risk matrix for grading potential contracts before they are tendered. This will ensure an auditable consistency across commissioning teams whilst also ensuring full compliance with procurement regulations.
- 5.4 Use of this model will also allow existing members to 'upgrade' their status by proving their ability to take on higher risk contracts through supplying further evidence and additional questionnaire responses.
- 5.5 Initial co-production of the framework has taken place via two engagement events with residents and Voluntary Community Faith Sector organisations in order to look at how this might be implemented in practice. Feedback from these informative events has been summarised in Appendix A. Continued dialogue will help communicate the advantages of the new integrated approach and will also assist in mitigating impacts.
- 5.6 Engagement with the Voluntary, Community and Faith sector (see Appendix A) has resulted in a greater understanding of where existing services in Cheshire East are currently supporting local people, aligned to the triangle of prevention in Figure 1. For example, one provider who is delivering friendship drop-in within the community (universal), a provider delivering mental health advocacy (targeted), and another palliative care (specialist).
- 5.7 The Early Help Framework will be implemented as a holistic approach. This will include all Grants across the whole Council.
- 5.8 Discussions have also been held with both NHS Eastern Cheshire Clinical Commissioning Group and NHS South Cheshire Clinical Commissioning Group, with a view to incorporating their contracts into a single Cheshire East Early Help framework.
- 5.9 This will mean alignment with the local transformation programmes which aim to achieve integration between health and social care, remove duplication and promote the wellbeing of all.

- 5.10 The intention is that all current early help contracts or grants will be reviewed once they reach the end of their contract term (or within the next twelve months). This is likely to mean significant change in service delivery, in order to implement the requirements. However, the outcome will be the ability to meet population need more effectively by providing targeted support to individuals and communities at the point in time it is needed most. This will address the strategic outcomes of the Local Authority including:
- Outcome 1 'our local communities are strong and supportive'
 - Outcome 3 'people have the life skills and education they need in order to thrive'
 - Outcome 5 'helping people live well and for longer'

- 5.11 This will ultimately mean a new relationship is built with the Voluntary Community and Faith Sector, and improved outcomes for local people through support for them to lead healthy and fulfilling lives.

It is proposed that the new Early Help Framework will go Live from October 2018.

5.12

6. Wards Affected and Local Ward Members

- 6.1 All wards and all ward members

7. Implications of Recommendation

7.1 Policy Implications

- 7.1.1 A core requirement of the Care Act is that local authorities must take steps to prevent, reduce or delay the need for care and support for all local people

7.2 Legal Implications

- 7.2.1 The Public Contracts Regulations 2015 (PCR 2015) allows local authorities to create a Dynamic Purchasing System with a number of service providers, following a competitive tendering process. Once providers have been included on the Dynamic Purchasing System the Council can select from (call off) those providers to provide particular services as and when required.

- 7.2.2 A Dynamic Purchasing System under the PCR 2015 only relates to the award of contracts. The Early Help Framework proposed

will also include the award of grants. The process for awarding grants is not the same as for contracts but will involve the allocation of funding following a competitive process. There are limited conditions that can be applied to any grant funding but a grant agreement should be entered into to enable use of funding and outcomes to be monitored. Any proposed grants will need to be made in accordance with the Council's Constitution.

7.2.3 Development of the Early Help Framework has included engagement with stakeholders organisations (such as from the voluntary sector) The framework will replace current service provision and the current early help contracts form part of the budget consultation process for 2018/19.

7.2.4 The Council must have due regard to the Public Sector Equality Duty. The Public Sector Equality Duty as set out at S149 of the Equality Act 2010, states:

“(1) A public authority must, in the exercise of its functions , have due regard to the need to—

(a) eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;

(b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;

(c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

7.2.5 An Equality Impact Assessment (EIA) has been completed to assist in meeting the Council's equality duties and to inform Cabinet's decision.

7.2.6 It has been made clear that the proposed changes will not impact upon the exercise of statutory functions but upon functions that are discretionary. Nevertheless, when proposing to make changes that reduce service delivery it is important to consult with providers and service users to ensure that this process fully engages them directly.

7.3 Financial Implications

7.3.1 Pending decisions following the Cheshire East Council budget consultation, it is proposed that circa £651K (Adults, Childrens, Public Health and Communities) will be allocated within the Early Help Framework for 18/19. This does not currently include the Clinical Commissioning Groups budget contribution at this stage.

7.3.2 The budget consultation includes a proposal to make £2m of New Homes Bonus funding available over the next two years (£1m in 2018/19 and a further £1m in 2019/20) for community priorities. Subject to the outcome of budget consultation and recommendations from Corporate Overview and Scrutiny for a detailed process for allocating the funding, this could provide a

further opportunity for approval of community bids that support the Early Help Framework.

- 7.3.3 The overall proposals aim to achieve greater value for money (including through integration) whilst seeking to maximise the opportunities that the framework offers. This will include ensuring that expenditure will not exceed allocated budgets for these services. Note: the precise value of the framework going forward is subject to the budget consultation process.

Relevant organisations have been informed of the budget consultation proposals via a letter/ face to face contact.

7.3.4

7.4 **Equality Implications**

- 7.4.1 Equality Impact Assessments have been completed and will be updated as a result of engagement processes (see appendix A for initial comments received).

7.5 **Rural Community Implications**

- 7.5.1 Access by rural communities to services will be an underlying principle of development of the Early Help Framework and relevant procurement processes.

7.6 **Human Resource Implications**

- 7.6.1 Introduction of the framework will be managed through existing resources within Commissioning.

7.7 **Health and Wellbeing Implications**

- 7.7.1 Public Health principles of reducing premature death and improving disability free life expectancy are fundamental to the preventative approach of this initiative.

7.8 **Implications for Children and Young People**

- 7.8.1 The initiative offers strong opportunities to embed prevention across the life-course including for young people and children. This will maximise the effectiveness of available resources targeted at young people.

7.9 **Overview and Scrutiny Committee Implications**

- 7.9.1 The committee will be updated on progress with the framework as required.

7.10 **Other Implications (Please Specify)**

- 7.10.1 None

8. Risk Management

- 8.1 Transfer to the new Early Help framework will be managed according to standard contract management processes.

9. Access to Information

- 9.1 Background papers to this report include:
- The Joint Strategic Needs Assessment,
 - The Commissioning Strategy – ‘People Live Well, For Longer’
 - Cheshire East Corporate Plan (2017-2020),
 - Clinical Commissioning Group Operational Plans: Connecting Care and Caring Together.

To inspect these reports, please contact the report writers: Shelley Brough, Head of Integrated Commissioning and Nik Darwin, Senior Commissioning Manager.

10. Contact Information

- 10.1 Contact details for this report are as follows:

Name: Nicola Glover-Edge
Designation: Director of Commissioning
Tel No: 01270 371404
Email: nicola.glover-edge@cheshireeast.gov.uk