

Children's Commissioning: Early Intervention and Prevention Services

Commissioning and Procurement Plan

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Outline of proposed service change:

The introduction of the Early Intervention and Prevention Framework and re-commissioning of all preventative services allows FSC to:

- Commission services in line with strategic priorities (i.e. to provide more effective and coherent support to high need families and to vulnerable adolescents and to prevent problems escalating)
- Ensure that each part of the County benefits from high quality preventative services, providing coherence and consistency
- Clarify and strengthen the processes for achieving the outcomes expected from early intervention work
- Ensure that preventative services are working effectively with each other and with the schools, social care services, health, youth services and youth justice teams they are working to support
- Contract with high quality providers offering services with proven success rates

This will mean greater consistency in the services available to families, children and young people with additional needs; and a much stronger emphasis on seeing these services as part of a continuum of care. Some services will be delivered Countywide, others within Districts or areas. Whatever the scope of each individual contract, they are interdependent and we will require all providers and agencies to collaborate closely – in itself a key feature of successful preventative services.

Benefit to children, young people, families and carers:

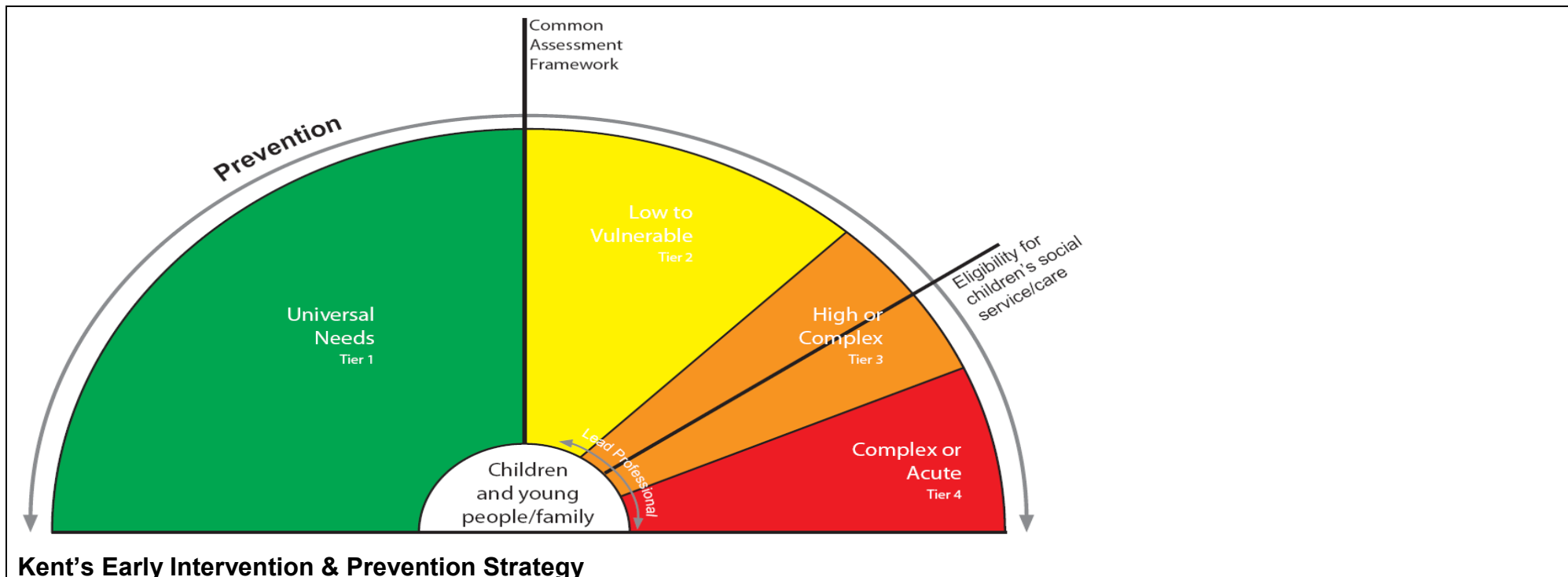
- Earlier diagnosis of problems and dedicated support to resolve them
- Effective interventions that will support families, young people and children through difficulties and help them develop the skills to deal with challenges in the future
- Better integrated support, so that services genuinely work around the child or family and we use the skills of lead professionals to develop resilience
- Services that seek to develop life skills and prevent repetition of harmful experiences and behaviours
- Timely services
- Coherence and consistency wherever they access services
- Greater expertise among practitioners

Estimated number of children, young people and families the services are likely to cover:

Approximately 18% of children and young people in Kent are identified as vulnerable with low needs. These children and young people can be defined as needing some additional support, without which they would be at risk of not meeting their full potential.

Approximately 1.4% of children and young people in Kent have been identified as having high or complex needs (Kent's Early Intervention & Prevention Strategy). These children are likely to require specialist support because they are highly vulnerable or experiencing the greatest level of adversity.

The early intervention and prevention services commissioned need to work across this continuum, with some services working more intensively than others at the higher, more complex end and others at the early intervention end of the spectrum.



Description of services being planned in the first phase:

The Early Intervention and Prevention Multi Supplier Framework Agreement will enable FSC to procure services over the next four years. The services to be procured in the first tranche i.e. in spring 2012 are:

- **Family Support Services**

Where existing services are unable to quickly provide the support a family needs, and whose needs are high; the Team around the Child/CAF coordinator/Lead Professional will ask the Family Support Service to establish a Team around the Family, led by dedicated practitioners with expertise in supporting families.

The service will have a remit to build resilience in high need families through a combination of parenting support and interventions designed to help families develop resilience and build and sustain relationships. It will provide a range of services and workers, who possess a range of skills and expertise able to respond quickly. Where families require longer term ad hoc support, it would also be able to provide this.

Families' needs will vary in nature and complexity. Lead Professionals/Family Workers will put together packages of support that draw in their own skills and abilities and more specialised services, such as:

- parenting programmes
- family group therapy
- mediation
- support to individual family members and family groups through difficult transitions, where families are already experiencing difficulties
- services focussed on relationship repair
- specialist support to families who are struggling to cope with adolescents
- support that builds self esteem and increases aspirations among parents and young people
- practical support and advice to long term ad hoc support to highly dependent families with complex needs, where this will prevent escalation of problems

▪ **Support for Vulnerable Adolescents**

A network of professionals will be established to develop the capacity and capability of young people facing multiple risk factors to develop strong and positive relationships and protective factors in their lives. This Early Intervention service will have close links to the Rapid Response Teams, both in preventing the escalation to crisis and as a 'step down' service.

The service will support and challenge; be a reliable presence for the period of the intervention; and help develop skills in decision making, negotiation and taking risks as well as provide some of the practical support in elements of the family support model, around housing for example.

▪ **Prevention of Teenage Pregnancy**

It is intended to maintain the number of CCard and EHC outlets and increase the take up of CCard and invest in targeted support for particularly vulnerable groups and in areas where rates remain persistently high.

The target groups would be: looked after children, girls excluded from school, those with a conduct disorder and young people whose family background suggests the risk of early conception is high.

▪ **Young Carers**

FSC needs to ensure young carers are receiving the support they require to engage with education and learning, socialise with peers and

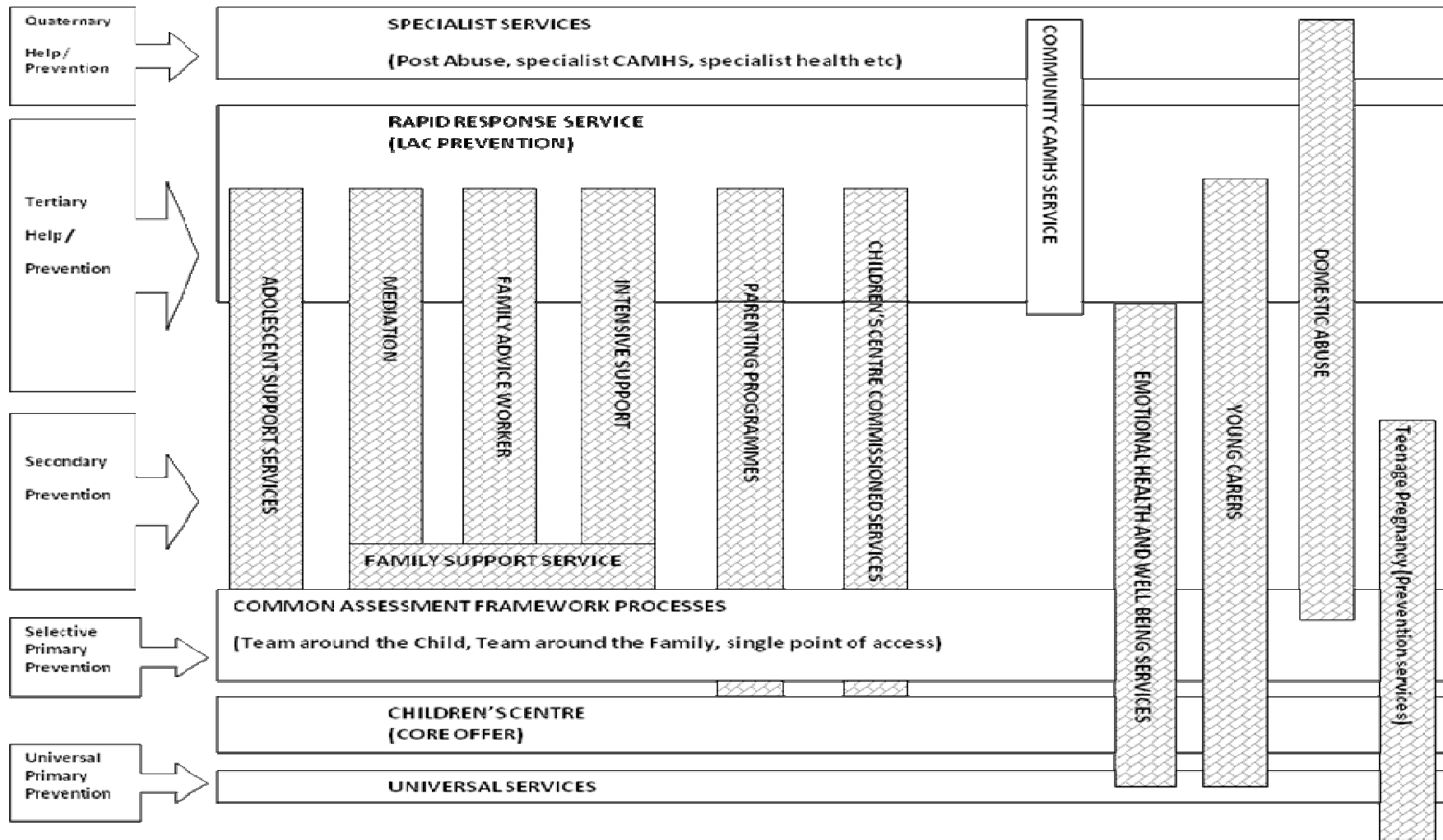
receive the guidance and care they need as children and adolescents. FSC will commission a service that enables young carers to take part in activities and support that builds their life skills and confidence.

- **Domestic Violence**

Single Points of Access have identified domestic abuse as a major factor in the lives of many children. We want to supplement statutory services, and those funded by partner organisations, for victims of domestic abuse with provision that concentrates on supporting children and the parents of children who have lived with abuse to develop positive relationships in the future. This would mean:

- working with parents to help them understand the impact violence will have had on their children and on their parenting
- providing services for children who have witnessed domestic abuse, who need to be able to access therapeutic support to help them move on and prevent them becoming perpetrators themselves

Services Commissioned Through The EIP Framework



Evidence to support the effectiveness of the proposed services:

Early Intervention and Prevention services have been redesigned in line with the priorities of the Early Intervention and Prevention Strategy, which draws on evidence of need from a range of sources. Evidence of what works has also been sought, in part from experience of commissioners, providers, users and professionals in Kent; and also from external validated research into effective preventative measures. The Allen report has informed our work; as well as the work of C4EO.

Additional evidence for the design of individual services:

- **Family Support Services**

Preventing children entering care and building resilience in high need families requires a responsive, flexible, innovative service with the capacity to deliver intensive interventions and provide long term ongoing support to those families with the highest level of needs. There are a range of interventions that have proved successful in helping families in crisis. Many of these are already available in some parts of the County. The intention is to bring coherence to the range of services available to families and, in particular ensure that interventions are well planned and evaluated, so that families are effectively prepared and assessed post activity to maximise the benefit of the intervention.

- **Adolescent Support**

There is a need to build an integrated model of youth support and put in place a service that is genuinely preventative and offers the key ingredients of effective support to adolescents, these being: support and challenge; a reliable presence for the period of the intervention; help developing skills in decision making, negotiation and taking risks; and practical support.

- **Emotional Health and Wellbeing Services**

There is a separate Commissioning and Procurement Plan aligned to Health.

- **Prevention of Teenage Pregnancy**

Research shows that areas which have successfully reduced rates of teenage conception have invested in services that provide information and advice about sex and relationships, as well as developing the skills and confidence required to negotiate the pressures and complexities of relationships, especially for those young people who may not have experience of mutually respectful relationships. It is intended to build more of this support into Kent's provision for adolescents, along with maintaining the current rate of provision of contraception and the advice that supports it.

- **Young carers**

It is proposed that befriending is developed to support this group of young people. Where this model of support is well focussed, well managed and well supervised, it is a very powerful intervention and makes an enormous contribution to a young person's confidence and focus.

- **Domestic Abuse**

Interventions will be specified that are proven to be preventative, by ensuring that young people who have witnessed domestic abuse do not themselves become perpetrators; and intervening early, where young people are themselves in abusive relationships.

Evidence of support from children, young people, families and carers, including consultation with children, young people, families and carers

The design principles behind each of these services are based on what works and, therefore, describe interventions that enjoy the support of families and young people locally and nationally.

We know that adolescents facing significant challenges may need to have time away from their families and an empathetic practitioner whom they trust to work with them to understand their behaviour and feelings and develop the protective factors they need in their lives.

Families prefer a planned period of support and intervention, following the Family Intervention Project and Budget Holding Lead Professional models, with a single contact and some brokerage of service provision, so that they are more quickly able to cope without intervention. Holistic, coordinated support helps families feel empowered by services, rather than dependent on them; and also more trusting of professional intervention and, therefore, more likely to access it at an earlier stage in the future.

Evaluations of Children's Centres and parenting programmes echo messages about the value of being able to get a quick response to uncomplicated queries and feeling that services have enabled them to cope on their own.

Consultation with young people in relation to the commissioning of Early Intervention and Prevention Services has been an on-going process. Service specifications currently being developed have been informed by consultation work undertaken across Kent as part of the work to determine the development of Local Children and Young People's Plans. Focusing specifically on the development of the adolescent service specification, Commissioning Officers have met twice with a Young Evaluators group based in West Kent to consult on their views on what makes a good adolescent service. These conversations have built on work already carried out by the group (commissioned by Dartford and Gravesham Preventative Service Managers) on the development of teenage friendly service standards. Areas of a service covered have included: accessibility (can young people get there), environment (is the building young people friendly), communication and publicity (is it young people friendly), and staff (appropriately skilled and experienced).

Discussions are on-going to ensure that children and young people remain fully involved in the commissioning process, in particular how they will contribute to the short listing and tendering elements.

Evidence of stakeholder support, including evidence of consultation with other relevant professionals and where applicable other providers:

A joint 'Meet the Market event' was held with the PCT for the Community CAMHS and Emotional Health and Wellbeing Services. In addition, KCC has also held two events (mainly VCS) for providers have been held with over 150 representatives attending. A number of meetings have been held with PSMs, HOCS and DMs. A presentation about the Early Intervention and Prevention Strategy and Framework has been made to Local Children's Trust Board Chairs. Health colleagues have been involved in the design of Teenage Pregnancy Prevention & Emotional Health and Wellbeing Services. PSMs will be involved in the evaluation of tenders.

Adolescent support has been designed to complement other services offered by schools, the youth service, KDAAT and schools

The County domestic violence coordinator has been engaged in the proposal to work with a group of young people for whom very few services are currently available.

Implications for management of early intervention and prevention services

The effectiveness of interventions with individual families, and of FSC's overall investment, will be heavily reliant on the quality of coordination, brokerage and monitoring at District level. All local practitioners will need to have an understanding of the range of services available and what they are providing. Children, young people and their families need clear pathways to access the support they need.

Local functions include ensuring that children and families as well as KCC get the most from services by ensuring coherence and good links into and out of distinct services e.g. parenting programmes. Specifications will describe the importance of coherence and how FSC will manages that. With the current review of the SPA process, we need to ensure that there is a local mechanism for coordination, demand management and establishing and monitoring individual pathways. The Family CAF will be used for the Family Support Service.

Costs of the proposed services, including details of any upfront investment required:

This assumes that the total amount of the 'Early Intervention and Prevention Services' budget will be included but does not factor in any additional 'invest to save' funding.

Budget	£ allocated
Early Intervention & Prevention (currently within district budgets)	5,195,733
Early Intervention & Prevention (currently Teenage Pregnancy budget within Commissioning)	235,000

PCT contribution to Post Abuse Services	289,368
PCT contribution to Early Intervention Emotional Health & Wellbeing services	202,699
Total	5,922,800
2012/13 commitments already in place	47,000
Total Amount Available	5,875,800
Post Abuse Services	678,499
Emotional Health & Wellbeing Services (1)	880,705
Adolescent Service at 28%	1,208,647
High need Family Services at 50%	2,158,298
Teenage Pregnancy Preventative Services at 5%	215,830
Domestic Violence Preventative Services at 8%	345,328
Young Carers at 5%	215,830
Other early intervention & preventative services that may be required to deliver the Early Intervention Strategy / Community Chest	172,664
	5,875,800

(1) This Post Abuse Service funding and approximately £1 million of CAMHS budget in Specialist Children's Services will constitute KCC's contribution of £2.3 million of Integrated Community CAMHS.

It is proposed that once funding is allocated for Post Abuse Services and Emotional Health and Well Being, 50% of the total available budget is allocated to family support; 28% to adolescent support; and the remainder to teenage pregnancy prevention, domestic violence and young carers and the Community Chest.

Likely value of freed up resources and over what timescale:

This investment will reduce costs and increase efficiency in three ways:

- Ensuring that risk factors evident in families and adolescents are acted upon quickly and do not escalate will reduce the need for intervention from Children's Specialist Services and enable them to focus on more complex and urgent cases and reduce caseloads

(see Placement Strategy)

- Focussing preventative services on getting to the root cause of problems and developing the skills, resilience and confidence to self manage among adolescents and families will challenge universal services to adapt their offer to better meet the needs of children, young people and families
- Ending spot purchasing and a situation where there are multiple agreements with the same provider, each incurring contractual costs and failing to achieve the financial benefits of being a bigger purchaser

Links to and impact on local and national priorities:

- **“Putting Children First” – Kent Safeguarding and Looked after Children Improvement Plan** commits us to:

Building an effective commissioning framework and range of preventive services. Specifically, we will

- Put in place a range of preventative services to avoid unnecessary family breakdown
- Reduce the numbers of looked after children
- Reduce the number of children subject to Child Protection Plans
- Kent’s **Early Intervention and Prevention Strategy** sets out a number of priority actions, many of which are dependent on the commissioning of these services. They are:
 - To commission integrated high level family support services which include a rapid response element, use of peripatetic staff and also utilise evidence-based parenting programmes.
 - To develop and implement a Family CAF and Team Around the Family (TAF) approach with adult services and other agencies. In the short term we will pool our resources with partners to identify high cost/high need families and put in place a team around the family with an identified lead professional.
 - To learn from our current work with families with complex needs (Community Budgets) to inform our overall approach to supporting high need families.
 - To ensure that new Early Intervention and Prevention commissioned services focus on support for potential high families.
 - To ensure that the current re-commissioning of early intervention and prevention services includes a focus on vulnerable adolescents.
- **Bold Steps for Kent** has a commitment to make it easier for VCS organisations to deliver public services; and commits us to tackling disadvantage through targeted and early intervention to help vulnerable families and save money over the longer term.
- **“Early intervention: The Next Steps”** – Graham Allen’s report to Parliament earlier this year, provides compelling evidence of the benefit of early intervention to children, young people and families; and propose specific interventions, all of which we have taken into account in the design of the proposed services.

Assessment of risks:			
Risk	Likelihood	Impact	Mitigation
Transition to a new provider creates disruption or uncertainty for children, young people and families	M/H	H	The Commissioning Unit is putting in place a transition plan, effective immediately, to ensure that we are, on a contract by contract basis, aware of what existing providers are doing to manage their caseloads during their notice period; and, once the new providers are known, to work with them and existing providers to ensure that individual cases are dealt with appropriately – extending the life of contracts if necessary, to allow for this.
Transition to a new provider means cases get “lost”	M/H	H	The transition plan will ensure we understand caseloads of existing providers and what is happening to them over a 6 month period from November 2011.
Transition to new providers creates uncertainty and disruption for KCC managers and threatens business continuity	H	H	Commissioning Unit and local managers will work with each other and with providers to ensure a smooth transition; draw up new contracts across the County in new services; and close down existing contracts. We propose to stagger the mini competition phase of the procurement process, to ensure that neither FSC nor providers are swamped, when a short delay of a few weeks on some contracts would enable a much smoother transition.
With restructuring taking place at the same time as recontracting, the potential for distraction or even a loss of capacity also exists, with the ultimate risk being that we are unable to effect a smooth transition for children, young people and families	H	M	We are prioritising plans for transition and support for contract management.
Insufficient providers on the Framework to deliver our specifications	L	H	The response to the invitation to tender for the Framework was encouraging and we are confident that there is sufficient expertise to deliver our specifications. We will need to support providers to collaborate and/or subcontract to ensure coverage across the County.
Some established providers who are unsuccessful in getting onto the Framework, or in winning contracts within it, challenge the process	M	L/M	We have put in place extremely robust processes to ensure that evaluation of bids is fair and moderated. Strategic Procurement will investigate any complaints in the first

			instance.
Services specified do not meet needs	L	H	<p>We are very confident that we have identified need and designed services using the best information available about what works. We have ensured early intervention and prevention services link with universal and specialist services. At the very least, these services will be a significant improvement on current provision.</p> <p>Nevertheless, circumstances change and there are, in addition, small groups of children and families whose needs are high but may not be met by these services. We propose therefore to retain some of the budget as unallocated funds, to be used by local coordinators or County level commissioners to meet priority needs that arise. This will be done through budget holding lead professionals or a Community Chest.</p>

Expected outcomes:

Below are the outcomes and KPIs for the first services to go out to mini competitions:

1) Family Support Service – Intensive Lead Professional & Family Advisors

Outcomes:

This service is central to FSC’s priority of supporting families in need so that their problems do not escalate. Success of this service will be measured by the quality of the individual outcomes for families and in particular:

Short-term outcomes (1 year):

- Parents/carers demonstrating improvement in parenting capacity
- Parents and carers reporting improved skills and confidence in meeting the physical, social and emotional needs of children and young people
- Parents and carers supported to resolve/manage environmental factors (including improvements in housing stability)
- Improved emotional well-being of parents / carers
- Improved emotional well-being among children and young people within the family (reported by child / young person and by school)
- Improved relationships between main adults in the family
- Improved relationships between main carers and children in the family

- Improved relationships between children in the family
- Improvement in children and young people's attendance at school
- Schools reporting improved behaviour and engagement of children and young people
- Improved engagement from parents/carers with services (e.g. substance misuse services, probation services, Job Centre Plus etc).

Longer-term population-level outcomes (2-3 years):

- Reduction in referrals to Children's Social Services
- Reduction in referrals to specialist CAMHS services
- Reduced levels of anti-social behaviour and offending

Indicators:

- No increase in number of children coming into care
- Initial assessments suggesting all reasonable steps were taken to prevent child requiring a Tier 3 Service
- Partner agencies reporting more openness to accepting their referrals
- Families and children reporting satisfaction with their Lead Professional
- Percentage of parents/carers demonstrating in Parenting Capacity Assessments
- Percentage of parents/carers reporting improved relationships with their child(ren)
- Percentage of children and young people reporting improved emotional well being
- Percentage of parents/carers reporting improved emotional well being
- Attendance rates of children and young people at school
- Percentage of schools reporting improved engagement and behaviour from children and young people
- Reduced referral into Children's Social Services
- Reduced referral into Tier 3 Community CAMHS

2) Family Support Service - Family Therapy and Mediation Service

Outcomes:

Clear aims should be set with the family at the outset of each intervention, and outcomes will therefore vary depending on the families' needs. However, progress will be expected against the following overarching outcomes:

- Improved emotional well-being of parents / carers
- Improved emotional well-being among children and young people within the family (reported by child / young person and by school)
- Improved relationships between main adults in the family
- Improved relationships between main carers and children in the family
- Improved relationships between children in the family
- Reduction in frequency and severity of conflict incidents

- Family reporting improved confidence in their ability to resolve difficulties amicably
- Parents/carers reporting improved confidence in their ability to meet the needs of children and/or young people and to manage discipline and boundaries appropriately.
- Improved engagement with other statutory agencies

Indicators:

- Percentage of parents/carers reporting improved relationships with their child(ren).
- Percentage of parents/carers reporting reduced incidence and severity of conflict within children and young people within family.
- Percentage of parents/carers reporting reduced incidence and severity of conflict within adult relationships (both within the immediate and wider family network)
- Percentage of children and young people reporting improved emotional well-being
- Percentage of parents/carers reporting improved emotional well-being
- Improved ability of parents/carers to meet children's needs (including emotional needs)
- Reduced referral into Children's Social Services
- Reduced referral into Tier 3 Community CAMHS
- Improved attendance rates of children and young people at school
- Percentage of schools reporting improved engagement and behaviour from children and young people

3) Child and Adolescent Emotional Health & Well-being Service:

Outcomes:

The provider must work towards the following key outcomes:

- Children and young people are able to access emotional well-being services in a range of appropriate universal settings
- Young people (aged 10 -18) are able to access emotional well-being settings in venues meeting 'You're Welcome' criteria for accessibility.
- Children and young people demonstrate improved emotional well-being
- Children and young people demonstrate improved communication and social interaction skills
- Children and young people report improved relationships with parents/carers
- Increased attendance and engagement of children and young people in education
- Parents/carers report improved confidence and skills in supporting children and young people
- Parents/carers report improved relationships with children and young people
- Schools are supported to maintain children and young people displaying emotional well-being difficulties
- Reduction in referrals to specialist Community CAMHS services

Indicators:

- Percentage of interventions delivered in universal settings / settings which meet 'You're Welcome' criteria (for those aged 10-18)
- SDQ or other competence-based assessment to track personal, social and emotional skills of children and young people
- Percentage of children / young people reporting improved relationship with parents/carers
- Percentage of parents/ carers reporting improvements in child or young person's behaviour / improved relationship with child / young person
- Percentage of parents/carers reporting improved confidence in supporting their child / young person
- Feedback from children, young people and their families
- Number and percentage of young people making a planned transition into universal settings
- Percentage improvement in school attendance
- Feedback from educational settings working with the young person
- Number and percentage of those aged 16+ in education, employment (and employment with training) and training (including number and percentage of fixed term exclusions)
- Reduced referral into Children's Social Services
- Reduced referral into criminal justice system
- Reduced referral into tier 3 CAMHS

4) **Vulnerable Adolescent Service**

Outcomes

In keeping with a strengths-based approach, FSC would expect to see the following **interim outcomes**, supported by clear evidence, in first year:

- Improvements in the personal, social and emotional skills of young people
- Young people reporting improved relationships within their educational setting
- Young people reporting improved familial relationships
- Improved engagement of young people with other specialist / statutory services, including attendance and engagement in education, training and/or employment.
- Improvements in housing stability
- Young people engaging in safer decision-making in relation to areas of risk (e.g. substance misuse, sexual relationships etc).
- Young people reporting positive outputs and outcomes

Indicators

For young people accessing this service:

- Number and percentage becoming looked after
- Percentage of parents/ guardians reporting improvements in young person's behaviour / improved relationship with young person

- Young people's and their families feedback
- Number and percentage of young people making a planned transition into tier 2 and universal settings
- Number and percentage in education, employment (and employment with training) and training (Including number and percentage of fixed term exclusions)
- Destination of young people 6 months following interventions
- Reduced referral into Children's Social Services
- Reduced referral into criminal justice system
- Reduced referral into Tier 3 CAMHS

Providers are expected to use a **validated** impact/ evaluation tool for example:

- Strengths and difficulties questionnaire
- Outcomes star
- Adolescent Risk Behaviour Screening Tool

Procurement:

These services will be procured via mini competition against the Early Intervention and Prevention Multi Supplier Framework. Call-off contracts will be for three years from Spring 2012.

We expect to launch mini competitions in December 2011 and begin awarding contracts in February 2012, with start dates from April 2012 to July 2012.

Some contracts will be Countywide, some Area based and others will be District level contracts. However, the specification will be the same, even where there are different providers delivering in different Districts. Sub contracting is permitted, although it seems likely that providers will need support in doing that.

Timetable for Procurement

