

DECISION REPORT

From: Dan Watkins, Cabinet Member for Adult Social Care and Public Health
Dr Anjan Ghosh, Director of Public Health and

To: Health Reform Public Health Cabinet Committee 11 March 2025

Subject: Start for Life: Parent Infant Mental Health Service (PIMHS)

Decision no: 25/00012

Key Decision: Yes

Classification: Unrestricted

Past Pathway of report: None

Future Pathway of report: Cabinet Member Decision

Electoral Division: All Kent electoral divisions

Is the decision eligible for call-in? Yes

Summary:

Kent County Council has successfully received Family Hub Transformation Authority status and has therefore received designated Family Hub Transformation Funding.

A series of Key Decisions have been taken by the Cabinet Member for Integrated Children's Services to accept the original transformation grant funding and additional years funding.

Key Decision 23/00075 relates to the expenditure of Family Hub funding for perinatal mental health and parent infant relationships (2023-24 and 2024-25) to: improve outcomes for families.

A further key decision was approved in January 2025 to receive DfE Family Hub funding for year 4 (2025-6). This includes approximately £1.3m for perinatal mental health and parent infant relationships. [Executive Decision](#)¹

Two procurements were undertaken for a Parent Infant Mental Health Service under decision 23/00075 in late 2023 and August 2024. These did not successfully result in the award of a provider and contract.

A new key decision is required to extend the remit of decision 23/00075 which expires in 2027. This new key decision would put in place a contract for an initial

¹ [Executive Decision](#)

period of 31 months with a possible 24-month extension (subject to funds from the Public Health Grant).

The team have completed a series of activities to support a positive procurement process including; reviewing the specification, market engagement, allowing more time for providers to respond to the opportunity and providing more time for service mobilisation.

Recommendation(s):

The Cabinet Committee is asked to CONSIDER and ENDORSE or make RECOMMENDATIONS to the Cabinet Member for Adult Social Care and Public Health, who in consultation with the Cabinet Member for Integrated Children's Services, on the proposed decision in appendix 1 to:

- a. **APPROVE** the development of Parent Infant Mental Health Service for a period of 31 months and subject to evaluation and availability of funds from the Public Health Grant an extension for a further 24 months
- b. **APPROVE** the expenditure £2,059,928 via the Family Hub Grant initially (subject to grant acceptance approval) and then the Public Health Grant (subject to availability)
- c. **DELEGATE** authority to the Director of Public Health, in consultation with the Cabinet Member for Adult Social Care and Public Health, to exercise relevant contract extensions and enter into relevant contracts or legal agreements; and
- d. **DELEGATE** authority to the Director of Public Health, to take other necessary actions, including but not limited to allocating resources, expenditure, and entering into contracts and other legal agreements, as required to implement the decision.

1. Introduction

1.1 Three key areas of grant funding to support transformation to Family Hubs relate to Start for Life, these are:

- 1) infant feeding
- 2) perinatal mental health
- 3) parent infant relationships

1.2 Start for Life is a component of the Family Hubs model with a specific focus on the first 1001 days, between conception and the age of two, essential for the healthy development of babies. This focus for support was identified by the Dame Andrea Leadsom Review in 2020 and further articulated in March 2021 in publication of The Best Start for Life: A Vision for the 1,001 critical days. This was followed by the announcement of £300m government funding to support Family Hubs with a focus on parent carer panels, parenting programmes, parent infant relationships, perinatal mental health and infant feeding in April 2022. Kent was one of 75 local authorities provided with the opportunity to benefit from the £300m funding.

- 1.3 On 4 October 2022 the Cabinet Member for Integrated Children's Services took an executive decision (Decision number 22/00094) to adopt the principle of Kent becoming a Family Hub Transformation Authority.
- 1.4 On 19 July 2024 a further decision 23/00075 was taken to approve the development and improvement activity to deliver Perinatal Mental Health and Parent Infant Relationships Interventions and approve the required expenditure, via the Family Hub Grant Funding (£3,051,809 – expires 2025) and, subject to evaluation and availability of funds the Public Health Grant (post March 2025), to deliver and sustain this activity for up to two years beyond the Family Hub Grant period – total service period – 2023 – 2025 with the potential for two 1 year extensions.
- 1.5 Two procurements were undertaken for a Parent Infant Mental Health Service under decision 23/00075 in late 2023 and August 2024. These did not successfully result in the award of a provider and contract. Feedback from the market was that providers would be better able to respond to the opportunity with; more time to submit a response, more time to potentially make connections with other providers in the market and with more time to mobilise the service (and recruit staff to deliver the service).
- 1.6 Key Decision 23/00075 approves a contract until March 2027. This new key decision is to request the approval to extend the timescales beyond March 2027 and to approve the development of Parent Infant Mental Health Service for a period of 31 months, and subject to evaluation and availability of funds from the Public Health Grant, an extension for a further 24 months.
- 1.7 A further PSR (Provider Selection Regime) compliant procurement process is proposed and will consider feedback from the market and potential suppliers from the previous market engagement events. Since the previous procurements the service specification has been reviewed, the requirement has been refined and collaborations between providers are being encouraged. More time will be given to providers to respond to the opportunity and to mobilise the service.

2. Parent Infant Mental Health Service (PIMHS)

- 2.1 The PIMHS service is for birthing women, expectant dads and partners, new parents and primary caregivers, (including parents, foster carers, grandparents, or others who may be in this role) with infants up to the age of two, with moderate to severe need with some risk factors for disorganized/ insecure attachment.
- 2.2 Through KCC's perinatal mental and parent infant relationship commissioned strategy work, delivered by Barnardo's, it is estimated that 6,663 parents and carers could benefit from mild-to-moderate perinatal mental health support every year. It is also estimated that 2,937 parent-infant relationships could be strengthened by additional support every year.
- 2.3 The PIMHS service will support:
 - families who have parent-child relationship problems with disorganised attachment and insecure attachment

- families who have additional support needs
- the existing Family Hub workforce in Kent to strengthen knowledge and pathways
- the providers of video interaction [VIG] or other parent infant relationship interventions

2.4 As part of a multilevel approach to support, intervention and services, the overall aims of a multi-disciplinary parent-infant mental health service are to support families who are finding it difficult to develop a positive relationship with their baby or young child to:

- rectify and strengthen parent-infant relationships for families experiencing moderate-severe difficulties.
- support colleagues in a range of universal and targeted services to promote and strengthen parent-infant relationships for families experiencing mild-moderate difficulties
- work with a range of multi-agency colleagues to promote healthy development of parent-infant relationship difficulties.
- provide parent-infant relationship expertise across the system.

2.5 The overall objectives of the service are to:

- Undertake clinical specialist assessment for families with moderate to severe difficulties.
- Deliver specialist therapeutic evidenced based interventions for those assessed which directly address and rectify and strengthen parent and infant relationships.
- Provide group and individual therapeutic interventions to parents/carers and their babies from conception to a child's second birthday.
- Improve the outcomes of parent infant relationships where there are difficulties.
- Provide specialist parent infant mental health case consultation and supervision for the workforce who are offering a programme of sensitive evidence-based parent infant relationship interventions
- Design and deliver relevant workforce development and training to build capacity across the system.

2.6 The PIMHS model outcomes are for:

- Parents/carers feel connected to their baby/Child and experience healthy relationships.
- Parents/carers experiencing less stress and anxiety.
- Less indication of stress in babies and children
- Parents/carers increase their problem solving and practical skills.
- Families/individuals have increased confidence in their relationships with their babies/children.
- Overall improvement in parent-infant relationships for families in Kent
- Increase in knowledge and confidence in the Kent workforce in identifying and supporting PIR.
- Improvement in system working and understanding of PIR.

3. Work with the market and providers

- 3.1 Learnings have been collated from the market. There have been two market engagement events with various suppliers who have expressed interest in an opportunity to respond to a competitive tender. The most recent market engagement workshop took place in November 2024 and highlighted the need for a longer tender period, mobilisation period and the need for potential collaborative approach with providers to deliver the contract.
- 3.2 To make this procurement successful there will be an additional market engagement event with interested suppliers to collaborate along with a pre-market engagement questionnaire for suppliers. Market engagement will help to ensure that the service specification is deliverable within the financial envelope and time constraints. It may also offer providers the opportunity to join forces and / jointly bid for the contract opportunity as part of the competitive procurement, resulting in service solutions that deliver outcomes for the best value, are creative and meet the needs of the population.

4. Financial Implications

- 4.1 To support the delivery of the Family Hub and Start for Life Programme, KCC has received a grant from the Department for Education (DfE) to support system transformation through work-force development and supporting development of new services.²
- 4.2 Family Hub and Start for Life Programme funding (for year four 2025/26) - £4,099,400 has been confirmed and accepted by KCC (decision 24/00124). Part of this allocation is for perinatal mental health and parent infant relationships.
- 4.3 The maximum financial envelope for PIMHS for a period of 31 months and an extension of 24 months is £2,059,928. This will be funded through a mix of DfE Family Hub funding (subject to grant acceptance approval) and the Public Health Grant (subject to evaluation and availability).

5. Legal implications

- 5.1 The Council entered into a Memorandum of Understanding (MoU) with the DfE which creates obligations to meet specific deadlines and timescales set by the DfE or risk losing further funding or funding claw back.
- 5.2 Access to the associated funding, depending on the type and level of transformation activity progressed, is conditional on compliance with the terms of the MoU and demonstration of progress toward an effective Family Hub Model.
- 5.3 The services to be procured have been determined to be health services for the purposes of the Provider Selection Regime which came into force on 1st January 2024. Officers have determined to follow the Competitive Process and will run an open tender procedure.

² [Decisions for issue 22/00094 - Family Hubs Transformation](#)

- 5.4 The Kent County Council standard terms and conditions have been selected for use with this service and tender procedure, and these have been updated to ensure legislative references are up to date. Officers in the commissioning and commercial teams will ensure that a clear and unequivocal option to extend is included in the contract terms and the procurement documentation, but making clear that the use of such extension is subject to both budget availability and to further governance.

6. Governance

- 6.1 The previous Cabinet Member Key decision 22/00094 and decision 23/00092 provide the required authority to allocate and spend Family Hub Grant funding on specific workstreams within the mandated Family Hub plan set out by DfE. The decision builds upon the previous 'in principle agreement' to Family Hub development decision-making and allows for the implementation of service improvement in the relevant area.
- 6.2 Key Decision 23/00075 – Family Hubs – Start For Life – Perinatal Mental Health and Parent Infant Relationship Interventions was a Key decision to fund perinatal Mental Health and Infant Relationship Interventions (until 2027).
- 6.3 The most recent Cabinet Member Key decision 24/00124 outlines the decision accepting the DfE Family Hub Year 4 grant.

7. Equalities implications

- 7.1 Equality impacts have been assessed as part of the Perinatal Mental Health and Parent Infant Relationships Strategy and Family Hub model. A separate Equality Impact Assessment on the new Parent Infant Mental Health Service has also been completed (see appendix 2). It is expected that the new service will have many positive impacts including: strengthening relationships between babies and their caregivers, improving the mental health of caregivers and supporting babies' early development and future well-being (including for those most at risk).
- 7.2 This service will improve awareness of parent infant relationships difficulties within the family hub workforce, upskill family hub workforce to deliver parent infant interventions and increase capacity for reflective practice, collaboration and team working. A major benefit to society will be the reduction in the numbers of infants going into care and a de-escalation of child protection status following treatment.
- 7.3 There are certain specific considerations for how a range of people with particular protected characteristics may engage with the service and these are factored in part of service design and delivery arrangements. The overall benefit of having the service in place applies to all groups or individuals in the context of protected characteristics and no characteristic groups are discriminated against by the service.

8. Conclusions

- 8.1 The PIMHS service is for birthing women, expectant dads and partners, new parents and primary caregivers, (including parents, foster carers, grandparents, or others who may be in this role) with infants up to the age of two, with moderate to severe need with some risk factors for disorganised/insecure attachment.
- 8.2 This new Key Decision will allow the previously approved work to be re-procured and delivered within the new timescales.

9. Recommendations:

- 9.1 The Cabinet Committee is asked to CONSIDER and ENDORSE or make RECOMMENDATIONS to the Cabinet Member for Adult Social Care and Public Health, who in consultation with the Cabinet Member for Integrated Children's Services, on the proposed decision in appendix 1 to:
- a. **APPROVE** the development of Parent Infant Mental Health Service for a period of 31 months and subject to evaluation and availability of funds from the Public Health Grant an extension for a further 24 months
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10. Background documents

The Best Start for Life: Early Year Healthy Development Review Report
[The Best Start for Life - The Early Years Healthy Development Review Report](#)

Family and Start For Life Programme
[Family Hubs and Start for Life programme - GOV.UK](#)

11. Contact details

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