

## STRATEGIC COMMISSIONING BOARD

30 September 2020

Comm: 1.00pm

Term: 2.25pm

**Present:**

- Dr Ashwin Ramachandra – NHS Tameside & Glossop CCG (Chair)
- Councillor Brenda Warrington – Tameside MBC
- Councillor Warren Bray – Tameside MBC (part meeting)
- Councillor Gerald Cooney – Tameside MBC
- Councillor Bill Fairfoull – Tameside MBC
- Councillor Leanne Feeley – Tameside MBC
- Councillor Allison Gwynne – Tameside MBC
- Councillor Oliver Ryan – Tameside MBC
- Councillor Eleanor Wills – Tameside MBC
- Steven Pleasant – Tameside MBC Chief Executive and Accountable Officer for NHS Tameside & Glossop CCG
- Dr Asad Ali – NHS Tameside & Glossop CCG
- Dr Kate Hebden – NHS Tameside and Glossop CCG
- Dr Christine Ahmed – NHS Tameside & Glossop CCG
- Dr Vinny Khunger – NHS Tameside & Glossop CCG
- Carol Prowse – NHS Tameside & Glossop CCG

**Apologies for absence:** Councillor Kitchen

**In Attendance:**

Sandra Stewart	Director of Governance & Pensions
Kathy Roe	Director of Finance
Ian Saxon	Director of Operations and Neighbourhoods
Stephanie Butterworth	Director of Adults Services
Richard Hancock	Director of Children's Services
Jayne Traverse	Director of Growth
Jessica Williams	Director of Commissioning
	Director of Population Health
Paul Smith	Assistant Director, Strategic Property
Sarah Threlfall	Assistant Director, Policy, Performance and Communication
Tim Rainey	Assistant Director, Digital Tameside
Emma Varnam	Assistant Director, Operations and Neighbourhoods
James Mallion	Consultant, Public Health

### 34. DECLARATIONS OF INTEREST

There were no declarations of interest submitted by Board members.

### 35. MINUTES OF THE PREVIOUS MEETING

#### RESOLVED

That the minutes of the meeting of the Strategic Commissioning Board held on 26 August 2020 be approved as a correct record.

### 36. MINUTES OF THE COVID RESPONSE BOARD

#### RESOLVED

That the Minutes of the meetings of the Covid Response Board held on 2 September 2020, be noted.

## **7. REVENUE MONITORING STATEMENT AT 31 JULY 2020**

Consideration was given to a report of the Executive Member, Finance and Economic Growth / CCG Chair / Director of Finance, which updated Members on the financial position up to Month 4. It was explained that in the context of the on-going Covid-19 pandemic, the forecasts for the rest of the financial year and future year modelling had been prepared using the best information available but was based on a number of assumptions. Forecasts were subject to change over the course of the year as more information became available, the full nature of the pandemic unfolded and there was greater certainty over assumptions.

The report provided the 2020/21 consolidated financial position statement at 31 July 2020 for the Strategic Commission and ICFT partner organisations. The Council had set a balanced budget for 2020/21 but the budget process in the Council did not produce any meaningful efficiencies from departments and therefore relied on a number of corporate financing initiatives, including budgeting for the full estimated dividend from Manchester Airport Group, an increase in the vacancy factor and targets around increasing fees and charges income.

The budget also drew on £12.4m of reserves to allow services the time to turn around areas of pressures. These areas were broadly, Children's Services placement costs, Children's Services prevention work (which was to be later mainstreamed and funded from reduced placement costs), shortfalls on car parking and markets income. Each of these services required on-going development work to have the impact of allowing demand to be taken out of the systems and additional income generated. There was additional investment around the IT and Growth Directorate Services, to invest in IT equipment, software and capacity and to develop strategically important sites for housing and business development, including key Town Centre masterplans.

A delay in delivering the projects that the reserves were funding was likely to mean more reserves would be required in future years, placing pressure on already depleting resources. The CCG continued to operate under a 'Command and Control' regime, directed by NHS England & Improvement (NHSE&I). NHSE had assumed responsibility for elements of commissioning and procurement and CCGs had been advised to assume a break-even financial position in 2020-21.

Although the CCG delivered its QIPP target of £11m in 2019/20, only 40% of savings were delivered on a recurrent basis. Therefore the CCG was facing a significant challenge in order to meet the 2020/21 target before the COVID pandemic hit. Under command and control there was no requirement or expectation that the CCG would deliver efficiency savings in the first four months of the year. While this report assumed a year end break even position in line with national guidance, it was unclear what would happen with QIPP in future months or how savings would be achieved in the current climate.

It was noted that the Integrated Commissioning Fund (ICF) for the Strategic Commission was bound by the terms within the Section 75 and associated Financial Framework agreements.

As at Period 4, the Council was forecasting an overspend against budget of £3.540m. The £3.540m pressure was non-COVID related and reflected underlying financial issues that the Council would be facing regardless of the current pandemic. This included continuing significant financial pressures in Children's Social Care, Adults Services and income shortfalls in the Growth Directorate. Further detail of the financial position at Month 4 was provided in an appendix to the report.

### **RESOLVED**

**That the forecast outturn position and associated risks for 2020/21, as set out in Appendix 1 to the report, be noted.**

### 38. ENGAGEMENT UPDATE

Consideration was given to a report of the Executive Leader/CCG Co-chairs/CCG Lay Member for Public and Patient Engagement/Director of Governance and Pensions/Assistant Director for Policy, Performance and Communications which provided Members with an update on the delivery of engagement and consultation activity in 2019/20. Members were informed of the following activity:

- Facilitated 50 thematic Tameside and/or Glossop engagement projects
- Received 4,753 engagement contacts (excluding attendance at events / drop-ins) – 2,875 in 2019 and 1,878 in 2020 so far.
- Supported 39 engagement projects at the regional and Greater Manchester level
- Promoted 46 national consultations where the topic was of relevance to and/or could have an impact on Tameside and/or Glossop
- Delivered four Partnership Engagement Network (PEN) conferences attended by over 280 delegates.
- Delivered four virtual Partnership Engagement Network sessions focusing on the impact of COVID-19 and how we can build back better. These were attended by over 50 participants.
- Held a virtual engagement session with young people to understand the impact of the pandemic on them and how they feel things can be done differently in the future.
- Undertook the second joint budget consultation exercise for Tameside Council and NHS Tameside and Glossop Clinical Commissioning Group with planning for the budget conversation 2021/22 underway.
- Delivered two stakeholder 'summits' bringing a range of public service leaders, VCFSE groups and public / patient representatives together to guide future planning on key issues – Neighbourhood Summit (January 2019) and Co-operative Summit (October 2019).

In Tameside & Glossop the Partnership Engagement Network (PEN) delivered the strategic approach to engagement and consultation. In late 2019 it was proposed to review the work of PEN so far and develop ideas to inform its approach. In early 2020 a survey was shared with PEN members seeking views on how they felt PEN was working. The results of the survey were shared with Members. Consideration would now be given to a medium and long term plan to reintroduce PEN conferences and large showpiece events when it was safe to do. Other ideas and opportunities for consideration and possible development were detailed in the report.

To start discussion and take away learning from Covid-19, four virtual engagement sessions took place in July and August. Attended by over 50 PEN members, the sessions were a way for members of the network to learn from one another and to recommence Covid-19 safe PEN activity.

Each of the virtual engagement sessions invited participants to share their experiences, both as individuals or speaking on behalf of their organisation where appropriate. Despite there being a distinct topic for each of the workshops, there were clear themes that arose from each of the sessions. The full report detailing the findings from the virtual PEN engagement sessions was appended to the report.

A survey on the Impact of COVID-19 / Building Back Better was hosted through July and August by the Strategic Commission via the Big Conversation pages on the Council and CCG websites. The survey aimed to understand how the pandemic had impacted the lives of people who live, work or spend time in Tameside & Glossop. Some of the key themes emerging from the survey are drawn out below with the more detailed findings included in **Appendix 2** to the report.

Additional engagement work around the impacts of COVID-19 had also been undertaken via other forums specifically the Children in Care Council and via the Council's two Scrutiny Panels. The engagement work undertaken with the Children in Care Council consisted of two questionnaires circulated via children's social workers. These contained statements about mental wellbeing and how well children felt they had been supported during lockdown.

Engagement with residents and communities were reported via Elected Members on the council's Scrutiny Panels. Scrutiny Panel members were well placed to report on feedback from residents in their wards, and so it was requested that they take time to note experiences, impacts and the response to Covid-19 in Tameside. These were summarised within the report.

## **RESOLVED**

**The content of the report be noted and the future engagement and consultation activity with the communities of Tameside and Glossop, be supported.**

### **39. TAMESIDE DIGITAL STRATEGY**

Consideration was given to a report of the Assistant Executive Member to the Executive Leader / Assistant Director for Digital Services, which set out a five year vision and plan for the use of digital technologies for Tameside Council and Tameside and Glossop Clinical Commissioning Group.

The Strategy document, set out the five year Digital ambition for Tameside. It was proposed that the strategy was kept under constant review to ensure it remained relevant and appropriate. The strategy detailed how digital technology would be used to improve public services, empower employees and residents, and drive economic growth.

Tameside's Digital, Creative and Tech ambitions continued to be of growing importance. As a city region it was anticipated that the sector would grow by a further half a billion GVA with over 10,000 new jobs created over the next five years.

The strategy also reflected that digital technology would underpin the Councils and CCG's ambitions to improve the lives of all citizens along with the Council and health care services they used. It had strong ties to the Greater Manchester Health & Social Care Partnership's Digital Strategy refresh which was currently underway, and would complement the digital work and ambitions of the Tameside and Glossop ICFT. It had a limited number of digital priorities focused on key priority areas.

It was stated that the strategy aimed to be inclusive and to ensure that everyone in Tameside regardless of their age, location or situation, could benefit from the opportunities digital could bring. The digitally excluded were often those with poor health outcomes. Often these people stand to benefit from technologies in the home that could help keep people safe, well and independent but which required good connectivity and links with patient and care management system. Key priorities would be to develop the Community Response Services use of mobile technology, the digitization of Early Years Health visiting and to promote and encourage the wide spread adoption of the NHS App.

There were six priority categories for the Strategy and these were divided into two parts. Corporate Themes and Digital Foundations. Each category had 6 sub-priorities with actions and outcomes, delivery of which will demonstrate progress.

Corporate theme were outlined to the Members of the Board.

- Digital Public Services - At the forefront of responsive and ubiquitous high quality digital public services.
- Digital Enabled Workforce - Highly skilled and agile workforce confident in using technology
- Digital Economy - Strong and sustainable economy maximising digital opportunities.
- Digital Foundations - Sustainable digital eco system which provides the building blocks for transformation.
- Digital Skills - Opportunities for people and business to fulfil their potential through technology.
- Digital Infrastructure - Fast resilient digital infrastructure connecting all communities'

Alongside the six priority categories there were also two cross cutting enablers Cyber Safe and Secure and Marketing and Communications

## **RESOLVED**

**That the following recommendations to Executive Cabinet be endorsed:**

**That the aims and objectives of the strategy be approved and the priorities and actions be kept under constant review to ensure the strategy keeps pace with the fast moving dynamic nature of the digital world.**

### **40. REFRESH OF EARLY HELP STRATEGY**

A report was submitted by the Deputy Executive Leader and Executive Member, Children and Families / Director of Children's Services / Assistant Director, Population Health summarising the work completed in refreshing the 2017 Early Help Strategy and outlined the content of the refreshed strategy.

The Early Help Strategy had been refreshed in partnership with multiple partner agencies who formed part of the Early Help Strategic Group, as well as informed by a wider partner consultation exercise.

The Strategy provided an understanding to the early help approach and offer in Tameside, in line with the Tameside Children's Safeguarding Thresholds. As well as included updated principles, aligning to the Tameside Corporate Plan and the Cooperative Principles, such as placed based working, and 'nothing about me, without me'.

The strategy continued to emphasise the importance of prevention and early interventions, and acknowledged the need to 'Build Back Better' from COVID-19, by having a flexible and live implementation plan.

The strategy sought to work along existing strategies, such as the Early Years Strategy, the Domestic Abuse Strategy and the Neglect Strategy, rather than duplicate.

Moreover, the strategy outlined headline successes since the launch of the 2017 strategy, including the development of neighbourhood learning circles, the Team Around approach, the Early Help Assessment Point and the roll out of the 'Signs of Safety' Training.

The strategy remained to be clear on its priorities which were:

- The early help approach will be Smarter in the way we do things.
- We will be Stronger because we know we are making the right impact and improving outcomes for children and young people.
- Children, young people and families will get what they need sooner, making sure the right help is available to the right people in the right place at the right time.
- We will ensure children live in strong protective communities and families where they are Safer.

The strategy set out a clear governance structure and illustrated the outcomes it set out to achieve, and how these would be monitored. The Early Help Strategy (2020) aligned and supported the work programme of the Starting Well Partnership, the SEND Improvement Board and Children's Improvement Board. Centrally the Early Help Strategy (2020) aligned to the Tameside and Glossop Corporate Plan with particular reference to the following priorities:

- (1) Very best start in life where children are ready to learn and encouraged to thrive and develop.
- (2) Aspiration and hope through learning and moving with confidence from childhood to adulthood.
- (3) Resilient families and supportive networks to protect and grow our young people.

- (4) Opportunities for people to fulfil their potential through work, skills and enterprise.
- (6) Nurturing our communities and having pride in our people, our place and our shared heritage.
- (7) Longer and healthier lives with good mental health through better choices and reducing inequalities.

Moreover, the Strategy strongly supported Public Reform Principles and delivered:

- A new relationship between public services and citizens, communities and businesses that enables shared decision making, democratic accountability and voice, genuine co-production and joint delivery of services. Do with, not to.
- An asset based approach that recognises and builds on the strengths of individuals, families and our communities rather than focusing on the deficits.
- A stronger prioritisation of wellbeing, prevention and early intervention.
- An evidence led understanding of risk and impact to ensure the right intervention at the right time.

It was reported that running alongside the Early Help Strategy was a refresh of the implementation plan. Some of the key actions that fell out of the strategy included strengthening the partnership with primary care, implementation of the Early Help Module, implementation of the enhanced Family Intervention service and the ambition towards co-location of services within each neighbourhood, but acknowledged the flexibility to include actions to 'build back better', as a result of learning from responding and living with Covid-19.

## **RESOLVED**

**That the following recommendations to Executive Cabinet be endorsed:**

- (i) That the Early Help Strategy 2020-22, as appended to the report, be approved; and**
- (ii) That the Strategy be presented to all Members as part of the Member Development Programme.**

## **41. SEND STRATEGY AND GOVERNANCE**

Consideration was given to a report of the Executive Member, Lifelong Learning, Equalities, Culture and Heritage / Assistant Director, Education informing the Board that in order to ensure effective strategic oversight of Special Education Needs and Disability (SEND) activity in Tameside, a SEND strategy had been developed. The report provided an overview of current SEND strategic activity in relation to this. The strategy enabled partners to work together to achieve the vision and outcomes for SEND in Tameside. The report outlined the proposed governance structure for SEND in Tameside and proposed arrangements for Tameside's parent carer forum.

Consideration was given to a report of the Executive Member for Lifelong Learning & Skills / Assistant Director for Education which provided an overview of current SEND strategic activity. The strategy enabled partners to work together to achieve the vision and outcomes for SEND in Tameside. In order to ensure that this was effective, appropriate governance needed to be in place. The report outlined the proposed governance structure for SEND in Tameside and proposed arrangements for Tameside's parent carer forum.

The vision for SEND in Tameside was ambitious and aspirational, it stretched beyond the boundaries of the Local Authority to all partners and children and young people with SEND, with or without an EHCP.

The implementation of the SEND Strategy would be guided by the following principles:

- Work in a spirit of co-production and partnership with parents and their children and young people with SEND, involving them in all key decisions.
- Work in partnership with partner agencies and schools involving them in all key decisions guided by our Listening framework.

- Have the highest expectations for children and young people with SEND, ensuring that they were fully included in all educational settings and that their needs were met by high performing local schools.
- Maintain a commitment to Tameside's maintained schools and academies, promoting and championing strong leadership and inclusive practice for children and young people with SEND across all phases, mainstream and special.
- Ensure a rigorous focus on the preparation for adulthood outcomes and life after school.
- Ensure that resources are fairly and consistently allocated according to needs

The strategy aimed to achieve 5 key outcomes. For children and young people with SEND to be Safe, Happy, Healthy and Ambitious for their future and to Develop Skills for Life.

Based on advice from JSNA and in partnership with parent-carers, young people and partners across education, care and health, 4 Headline Strategic Priorities had been developed:

- Increasing & improving inclusion
- Increasing confidence
- Involving children & young people
- Improving accuracy & timeliness

It was stated that Strategic leads had been identified to take forward the 4 Headline Priority work streams. Each work stream had an Improvement & Development Action Plan (IDAP) that would be used to monitor and track progress towards achieving the identified outcomes.

The SEND improvement Group had developed an Outcomes Framework that would be used alongside the IDAPs to track and monitor progress. It was important that Tameside had a clear governance structure for all SEND activity. Attached at **Appendix 2** was a proposed Governance Chart for the strategic oversight of SEND in Tameside.

## **RESOLVED**

**That the following recommendations to Executive Cabinet be endorsed:**

- (i) To approve the Special Education Needs and Disability Strategy 2020-2023 at Appendix 1 to the report;**
- (ii) To endorse the proposed Governance structure for Special Education Needs and Disability strategic implementation at Appendix 2;**
- (iii) To note the plan on a page for Special Education Needs and Disability strategic fit at Appendix 3;**
- (iv) To note that Improvement Development & Action Plans and a SEND outcomes framework will be developed to ensure delivery of the SEND strategy;**
- (v) To approve the proposed arrangements for a SEND parent carer forum in Tameside; and**
- (vi) To note the arrangements for the SEND parent carer forum in Tameside and agree that the Director of Children's Services takes forward a Memorandum of Understanding with Tameside's parent carer forum.**

## **42. LOOKED AFTER CHILDREN – 7 SUSTAINABILITY PROJECTS**

The Deputy Executive Leader and Executive Member for children and Families / Assistant Director of Children's Services, submitted a report, which updated the Board on in respect of progress of the Looked After Children - 7 Sustainability Projects.

It was anticipated prior to COVID that the implementation of the 7 projects, would begin to reduce projected rises of the number of children in our care from September 2020. While exact predictions were difficult to make given the number of variables, success would be measured by the cumulative impact of these measures on local authority numbers and placement mix. Therefore the aim was to:

- Reduce the LAC population to 650 by April 2021.

- Reduce the proportion of residential placements from 16% to 13% by October 2020

A short summary of the key risk areas/impact of the current Covid-19 situation was outlined to the Board as follows:

- Project 1: Early Help – Implementation of a co-located early help service could be delayed
- Project 2: Family Intervention Service – The key risk was the impact of school closures and resulting limited contact with children and families
- Project 3: Team Around the School –Risk associated with school closures and limited contact on ability to deliver interventions effectively
- Project 4: Duty/Locality Restructure – Difficulty merging teams during Covid lockdown and the impact on the implementation of the new MASH/Early Help Access Point
- Project 5: Positive Futures – The key risk was the purchase of Greenwood Avenue as the location for the assessment unit
- Project 6: Fostering – The key risk was the services does not recruitment sufficient Foster Carers to meet demand.
- Project 7: Placements Review/Sufficiency Strategy – Capacity of the system during Covid-19, delay in securing standard placements strategy

The new timeline for The Looked After Children’s Sustainability 7 projects was as follows;

1. The Early Help project start date for implementation would move from October 2020 to a start date for implementation of February 2021
2. The Family Support Service project would move the start date for implementation from March 2020 to a start date of June 2020.
3. The Team around the School project started implementation in January 2020 this had partially been achieved however the date for full implementation date would now be July 2020 instead of March 2020.
4. The Duty/Locality project started implementation as scheduled this had partially been achieved however the date for full implementation will move from July 2020 to August 2020.
5. The Positive Futures project start date for implementation would move from June 2020 to January 2021.
6. The Fostering project start date for implementation was October 2020 whilst the project had started and some areas are due to be implemented, the overall start date for implementation would move to February 2021.
7. The Placements project had an implementation start date of December 2019 and whilst implementation had start in a limited way the start date for full implementation would move to May 2020.

The financial implication in relation to the issues detailed was difficult to quantify however what was certain was that the current projection of a reduction in the numbers of children looked after to 650 by April 2021 and the subsequent savings attached to this reduction would not be realised.

The change in forecast costs of each scenario when comparing between periods 3 and 4 was predominately due to an increase in the number of external residential placements which had increased the costs for all of the scenarios.

Additional analysis of forecast total expenditure by placement type and age banding, together with related volumes will be included in future monitoring reports to provide further context on where the related forecast cost increases or reductions were arising between reporting periods. It was envisaged that this additional analysis would be included by the period 6 revenue budget monitoring report.

## **RESOLVED**

**That the following recommendations to Executive Cabinet be endorsed:**

- (i) To note the financial impact as a result of the agreed revised timescales for delivery of the projects as a result of the COVID 19 pandemic together with the outcome of the estimated financial modelling on placements as detailed in section 3 and Appendix 2 to the report; and**



- (ii) To receive a further report in December 2020 given the on-going uncertainty caused by the Covid 19 pandemic.

#### **43. SEXUAL AND REPRODUCTIVE HEALTH SERVICES**

Consideration was given to a report of the Executive Member for Adult Social Care and Population Health / Clinical Lead / Director of Population Health, which proposed to extend the existing contract for 12 months beyond the current end date, at the same contract value, to ensure service continuity; allow for service recovery in light of the COVID situation; and to allow appropriate time for providers to prepare for and take part in a competitive tender exercise.

It was explained that the current specialist integrated Sexual and Reproductive Health and HIV service in Tameside was provided by Manchester NHS Foundation Trust (MFT), delivered under the MFT branding of "The Northern", and aimed to meet the sexual and reproductive health needs of residents through the provision proactive prevention across the cluster area, HIV/STI testing services, STI treatment services (excluding treatment for HIV), and contraception and reproductive health services.

It was stated that Local authorities were responsible for commissioning HIV/STI testing services, STI treatment services (excluding HIV treatment) and contraception services on an open-access basis for the benefit of all persons present in their area. NHS England was responsible for commissioning and funding HIV treatment and care services as well as the provision of routine contraception and opportunistic screening and treatment within general practice. Clinical Commissioning Groups were responsible for funding abortion services as well as vasectomies and sterilisation procedures.

The Local Authority was mandated to provide appropriate access to sexual health services (Health & Social Care Act 2012) to commission confidential, open access services for Sexually Transmitted Infections and Contraception, as well as ensuring that the local population has reasonable access to all methods of contraception.

The current Sexual and Reproductive Health Service contributed to the two high level outcomes in the 'Public Health Outcomes Framework (PHOF)' 2019/20: Increased healthy life expectancy; and reduced differences in life expectancy and health life expectancy between communities. These outcomes were also relevant across each life course and are a significant contributing factor to a range of the specific outcomes and objectives with in the Tameside & Glossop Corporate Plan.

The current contract was due to come to an end on the 31 March 2021. With regards to the justification for extension the need for modification had been brought about by circumstances which a diligent contracting authority could not have foreseen. The need for this modification had been brought about by Covid 19. This cluster was due to go out to tender for sexual and reproductive health services in June 2020, with a new service due to commence 1 April 2021. However, as Providers and Commissioners alike had been directed to prioritise other work related to Covid 19, there was a risk in delivering an effective tender process due to shortage of providers bidding for the contract, a failure of the tender and for TUPE processes to be fair, open and transparent.

In order to inform the model there was a need to consult widely with stakeholders and service users. The current restrictions arising from Covid 19, made this difficult to do in a meaningful way. Communication activity was focussed on other key messaging and service users/stakeholders had other priorities focused on patient care and service recovery.

The modification did not alter the overall nature of the contract. There were no proposed changes to the current provision as detailed in the current service specification and contract other than further work with the provider to enhance and improve the current service performance and offer.

The current specification was still appropriate and the provider had been delivering the service to the required standard.

The requested extension was based on maintaining a local sexual and reproductive health service provision in 2021/22. The intention was to delay re-tendering for a minimum reasonable amount of time until services have sufficient capacity to engage in a full scale retendering exercise. The provider had indicated that it would accept a 12 month extension. The intention is for all boroughs to conduct a joint procurement exercise and share a common specification. If this extension was approved, the expectation was that we will be in a position to go out to tender for a new service in June 2021 and have the new service in place from 1 April 2022.

Members were advised of the options appraisal

- Do nothing and not extend the existing contract and go out to tender for this service during the summer of 2020 for a new service to commence 01 April 2021
- Extend the contract for 12 months retaining current contract value
- Extend the contract for 12 months reducing the current contract value

#### **RESOLVED**

**That the 12 month extension to the existing Sexual and Reproductive Health Service provided by MFT, retaining the current contract value, which was due to end on 31 March 2021, be approved.**

#### **44. TAMESIDE AND GLOSSOP CHILDREN AND YOUNG PEOPLE'S EMOTIONAL AND MENTAL WELLBEING COMMUNITY OFFER – COMMISSIONING INTENTIONS**

Consideration was given to a report of the Executive Member, Adult Social Care and Health / Clinical Lead, Starting Well / Director of Commissioning / Assistant Director, Population Health, which explained that, following the agreement at SCB in April 2020 to the principle of pooling Population Health and Clinical Commissioning Group funding, authorisation was required to tender for a Tameside and Glossop Children and Young People's Emotional and Mental Wellbeing Community Offer.

The NHS Long Term Plan, the Future in Mind report and the Tameside and Glossop Children and Young People's Emotional Wellbeing and Mental Health Transformation Plan outlined ambitious service transformation and commissioning to increase access and range of support for children and young people's emotional wellbeing and mental health. The tender of a Tameside and Glossop Children and Young People's Emotional and Mental Wellbeing Community Offer would support this ambitious transformation by co-producing the offer with children, young people and local partners, as well as seeking all opportunities to reducing inequalities and improving and increasing ease of access to support.

Members were informed that the counselling contract and grants come to an end on the 30 June 2021, opening an opportunity to pool resources to co-produce an effective and efficient Community Offer with children, young people and local partners, which can be live from the 1 July 2021. Whilst authorisation was sought for the procurement method described in section 4 of the report, it was important to recognise that the specification for the Tameside and Glossop Children and Young People's Emotional and Mental Wellbeing Community Offer, would not be written based on what purely adults believed what children and young people needed, but would be co-produced over Autumn 2020 with children and young people, as well as local partners and experts.

Joint work with STAR had been ongoing with this tender project, including the completion of a Project Initiation Document (PID) and STAR would be providing procurement support to the Commissioners. It was the intention to run this exercise as a light touch regime under the 'health' CPV codes. The intention was to undertake a Competitive Dialogue process, which included further stages within an open tender to allow negotiation and discussions to take place with the bidders in order to achieve the most economically advantageous tenderer. With the history of this

procurement and the relationship with the incumbent provider, it was recognised that a Competitive Dialogue process would allow bidders to develop alternative proposals in response to the Strategic Commission's outline requirements. Only when the Strategic Commission was satisfied that bidders proposals were developed to sufficient detail would tenderers be invited to submit competitive bids. The aims were to increase value by encouraging innovation and to maintain competitive pressure in bidding for specific contracts.

The annual contract value for the Tameside and Glossop Children and Young People's Emotional and Mental Wellbeing Community Offer would be £250,000. Moreover subject to approval for a 3+2 year contract, the total contract value £1,250,000. This could be broken down to understand the different funding streams for total contract value, which equates to £540,000 from Population Health and £710,000 from the CCG.

#### **RESOLVED**

- (i) That approval be given to tender for the Tameside and Glossop Children and Young People's Emotional and Mental Wellbeing Community Offer, with a 3+2 year contract, with an annual value of £250,000, totalling to £1,250,000 over 5 years; and**
- (ii) That a report be received at a future meeting, with recommendations on the agreed design of the contract to be procured and how Children's voice has been heard together with the clear deliverables to be achieved, how it meets priorities together with how it will be monitored and consequences for non-achievement outcome from the tender panel and any TUPE issues.**

#### **45. GRANT NO. 31/5110: LOCAL AUTHORITY EMERGENCY ASSISTANCE GRANT FOR FOOD AND ESSENTIAL SUPPLIES**

Consideration was given to a report of the Assistant Director Policy, Performance and Communications / Assistant Director Operations and Neighbourhoods / Assistant Director Exchequer Services / Assistant Director Children's Services / Assistant Director Population Health.

The report outlined a proposal to spend the £331,533.64 provided to Tameside Council as part of the government's *'Local Authority Emergency Assistance Grant for Food and Essential Supplies'* fund. The proposals were one off schemes due to the non-recurrent nature of the grant from government. The report also suggested consideration was given to the establishment of a Tameside Welfare Assistance Scheme to build an ongoing model of emergency support to those in financial crisis to avoid escalation in outcomes and costs for both individuals and public bodies supporting them.

In acknowledgement of the wider impacts beyond shielding, the government was providing local authorities with an emergency assistance grant for food and essential supplies.

The government announced an emergency fund of £63 million to be distributed to local authorities in England to help those who were struggling to afford food and other essentials due to Covid-19. *Grant No. 31/5110: Local Authority Emergency Assistance Grant for Food and Essential Supplies* was a one-off contribution for the 2020/21 financial year and was made under Section 31 of the Local Government Act 2003.

The grant letter defined the purpose of the funding as – *'to help local authorities to continue to support those struggling to afford food and other essentials over the coming months due to COVID-19'*. The grant guidance was relatively short and provides some flexibility for local discretion. The allocation for Tameside Metropolitan Borough Council was £331,533.64.

Each investment sought to achieve one or more of the following aims – alleviate extreme hardship; ensure access to the most basic essentials such as food and fuel; sustain tenancies and prevent homelessness; help families stay together; provide relief from immediate financial crisis; identify the cause of issues and work with people to find long-term sustainability and resilience.

The report summarised the spending proposals as follows:

<b>PROVISION</b>	<b>£</b>
The Bread and Butter Thing	£100,000
Food support (investment in existing and new groups providing access to affordable food)	£30,000
Action Together coordination and support to voluntary, community, faith and social enterprise groups working with vulnerable people affected by Covid-19 in terms of access to basic supplies and essentials – food, fuel, clothing etc.	£85,000
Family support (provision of basic essentials like nappies, formula milk, school uniform, cots to families with babies and young children)	£15,000
Groundwork energy advice and support (top up to the existing Energy Redress funding secured by Groundwork)	£20,000
Financial and debt advice (additional capacity for the Welfare Rights team either employed or commissioned)	£40,000
Development and Sustainability Officer (fixed term post to oversee the delivery of the schemes, identify future opportunities , plan for sustainability and develop a Welfare Assistance Scheme)	£40,000
<b>TOTAL</b>	<b>£330,000</b>

It was stated that the discretionary element of the Social Fund was abolished as part of the Welfare Reform Act 2012. Tameside Council working with partners established the Tameside Independent Living Scheme. The scheme was part of a wider support network that provided support for people in a crisis and those in need of support to live independently. It aimed to provide a safety net in an emergency or when there was an immediate and serious risk to the health or safety of the applicant and their family and enable people to stay living at home or resettle into a new home following a period in institutional care, prison, temporary accommodation of living an unsettled way of life. In broad terms eligibility criteria were based on having a low income, no savings and experiencing a situation that warrants support in order to meet the aims as outlined.

Members were advised that the scheme ceased a few years ago. Although some aspects of the support provided were picked up within other areas such as the work of the Homelessness Team in helping people secure tenancies etc.

It was proposed that consideration was given to the establishment of a new scheme on similar terms. The purpose being to draw together some of the elements outlined in the plan to spend Covid-19 support grant (Grant No. 31/5110) with a view to providing a model that was available beyond that limited funding in recognition of the impact of Covid-19 being substantial over the next few years.

The overarching aim of any Welfare Assistance Scheme would be to provide some form of stability in a financial crisis tied to advice and support to build resilience. Alongside this, a scheme would prevent escalation of problems and the associated knock on costs for public bodies.

#### **RESOLVED**

- (i) That the spending proposals, as detailed in the report, for Grant No. 31/5110 be approved; and**
- (ii) That the Development of a Tameside Welfare Assistance Scheme be approved.**

**46. URGENT ITEMS**

**RESOLVED**

The Chair reported that there were no urgent items for consideration at this meeting.

**CHAIR**