

# Public Document Pack

# Sefton Council

MEETING: CABINET

DATE: Thursday 3rd October, 2024

TIME: 10.00 a.m.

VENUE: Committee Room, Town Hall, Bootle

DECISION MAKER: **CABINET**

Councillor Atkinson (Chair)  
Councillor Dowd  
Councillor Doyle  
Councillor Harvey  
Councillor Howard  
Councillor Lappin  
Councillor Moncur  
Councillor Roscoe  
Councillor Veidman

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The Cabinet is responsible for making what are known as Key Decisions, which will be notified on the Forward Plan. Items marked with an \* on the agenda involve Key Decisions

A key decision, as defined in the Council's Constitution, is: -

- any Executive decision that is not in the Annual Revenue Budget and Capital Programme approved by the Council and which requires a gross budget expenditure, saving or virement of more than £100,000 or more than 2% of a Departmental budget, whichever is the greater
- any Executive decision where the outcome will have a significant impact on a significant number of people living or working in two or more Wards

**If you have any special needs that may require arrangements to facilitate your attendance at this meeting, please contact the Committee Officer named above, who will endeavour to assist.**

We endeavour to provide a reasonable number of full agendas, including reports at the meeting. If you wish to ensure that you have a copy to refer to at the meeting, please can you print off your own copy of the agenda pack prior to the meeting.

# A G E N D A

Items marked with an \* involve key decisions

<u>Item No.</u>	<u>Subject/Author(s)</u>	<u>Wards Affected</u>	
1	<b>Apologies for Absence</b>		
2	<p><b>Declarations of Interest</b></p> <p>Members are requested at a meeting where a disclosable pecuniary interest or personal interest arises, which is not already included in their Register of Members' Interests, to declare any interests that relate to an item on the agenda.</p> <p>Where a Member discloses a Disclosable Pecuniary Interest, he/she must withdraw from the meeting room, including from the public gallery, during the whole consideration of any item of business in which he/she has an interest, except where he/she is permitted to remain as a result of a grant of a dispensation.</p> <p>Where a Member discloses a personal interest he/she must seek advice from the Monitoring Officer or staff member representing the Monitoring Officer to determine whether the Member should withdraw from the meeting room, including from the public gallery, during the whole consideration of any item of business in which he/she has an interest or whether the Member can remain in the meeting or remain in the meeting and vote on the relevant decision.</p>		
3	<b>Minutes of the Previous Meeting</b>		(Pages 5 - 16)
	Minutes of the meeting held on 5 September 2024		
* 4	<b>Advocacy Services Procurement</b>	All Wards	(Pages 17 - 24)
	Report of the Executive Director - Adult Social Care, Health and Wellbeing (Place Director)		
* 5	<b>Sefton's Carer Services Procurement Contract Proposal</b>	All Wards	(Pages 25 - 32)
	Report of the Executive Director - Adult Social Care, Health and Wellbeing (Place Director)		

* 6	<b>Re-procurement of the Kooth Young People's Online Mental Health Support Service.</b> Report of the Director of Public Health	All Wards	(Pages 33 - 66)
7	<b>Procurement of a Temporary Package of Care</b> Report of the Executive Director - Children's Social Care and Education	All Wards	(Pages 67 - 70)
* 8	<b>Maritime Corridor Scheme Phase 1 - Receipt of Capital Funding</b> Report of the Assistant Director - Highways and Public Protection	Litherland; Molyneux; Netherton and Orrell; St. Oswald	(Pages 71 - 78)
* 9	<b>Member Responsible for Housing Landlord Complaints</b> Report of the Assistant Director - Economic Growth and Housing	All Wards	(Pages 79 - 88)
* 10	<b>Financial Management 2024/25 to 2027/28 - Revenue and Capital Budget Update 2024/25 – October Update</b> Report of the Executive Director – Corporate Services and Commercial	All Wards	(Pages 89 - 104)
11	<b>Exclusion of Press and Public</b> To comply with Regulation 5(2) of the Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012, notice has been published regarding the intention to consider the following matter in private for the reasons set out below.  The Cabinet is recommended to pass the following resolution:  That, under the Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012, the press and public be excluded from the meeting for the following item on the grounds that it involves the likely disclosure of exempt information as defined in Paragraph 3 of Part 1 of Schedule 12A to the Local Government Act 1972. The Public Interest Test has been applied and favours exclusion of the information from		

the Press and Public.

- 12     **Procurement of Temporary Accommodation - Exempt Appendix**                     All Wards                     (Pages 105 - 108)

Exempt appendix of the Assistant Director - Communities

- 13     **Re-admittance of the Public**

The Cabinet meeting will now move back into open session to consider the following agenda items

- \* 14     **Procurement of Temporary Accommodation**                     All Wards                     (Pages 109 - 120)

Report of the Assistant Director - Communities

**THE "CALL IN" PERIOD FOR THIS SET OF MINUTES ENDS AT 12 NOON ON THURSDAY 19 SEPTEMBER 2024.**

## **CABINET**

### **MEETING HELD AT THE BIRKDALE ROOM, TOWN HALL, SOUTHPORT ON THURSDAY 5TH SEPTEMBER, 2024**

**PRESENT:** Councillor Atkinson (in the Chair)  
Councillors Dowd, Doyle, Harvey, Howard, Lappin  
and Moncur

**ALSO PRESENT:** Councillor Sir Ron Watson CBE

#### **33. EVENTS IN SOUTHPORT OF 29 JULY 2024**

The Leader of the Council referred to the fact that this was the first meeting of the Cabinet held since the tragic events in Southport of Monday, 29 July 2024, when the lives of Alice da Silva Aguiar, Elsie Dot Stancombe and Bebe King were taken, and others were injured at the dance class in Hart Street. The deepest condolences of the Council were offered to the families of the victims, and thoughts and prayers were with survivors and families affected. The Leader thanked first responders as well as local people who rushed to the scene to help. Sadly, some of those brave individuals found themselves facing anger and violence, in the face of misinformation, a few hours later. This was followed by a show of unity in the joint clear-up and re-build. The Leader thanked local people, businesses, community and faith leaders, Council staff, emergency services and everyone else who responded to events. Since then, the Council's focus had been on the families of those affected and the residents and communities impacted, and that focus would remain in place for as long as it was needed. Everything the Council had undertaken was with the approval of Alice, Bebe and Elsie Dot's families, and the Council would stand by them, the wider community and Southport as a whole, in the long journey of healing ahead. The Council had responded with colleagues in the health and voluntary sectors in dealing with the wider implications and support had been put in place by Family Hubs and the Education Department by working with schools and families to ensure a calm, reassuring return to school for the Autumn term. The Council and other agencies had also reached out to ethnic minority individuals and families who had felt threatened and isolated after events. Local businesses had been engaged with, resulting in the development of the Southport Business Recover Fund, which the Cabinet would approve at the meeting. Despite the terrible and heartbreaking circumstance, the Leader was proud of the way in which the community, Southport and Sefton had pulled together, and considered that despite the efforts of some, the local community remained stronger and united as one. There was unity in heart-felt sorrow and sympathy, unity in commitment to support everyone affected and unity in determination to support Southport together.

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The Cabinet observed a one-minute silence, as a mark of respect, in reflecting on the events in Southport of 29 July 2024.

## **34. APOLOGIES FOR ABSENCE**

Apologies for absence were received from Councillors Roscoe and Veidman.

## **35. DECLARATIONS OF INTEREST**

No declarations of any disclosable pecuniary interests or personal interests were received.

## **36. MINUTES OF THE PREVIOUS MEETING**

### **Decision Made:**

That the Minutes of the meeting held on 25 July 2024 be confirmed as a correct record.

## **37. DAY OPPORTUNITIES CONTRACTS**

The Cabinet considered the report of the Executive Director - Adult Social Care, Health and Wellbeing (Place Director) that sought approval to extend existing Day Opportunities contracts.

A request was made for the contracts extension to be made in consultation with the Cabinet Member – Adult Social Care and Deputy Leader.

### **Decisions Made:**

That

- (1) the extension of existing Day opportunities contracts for a maximum twelve-month period from 1<sup>st</sup> October 2024, consisting of an initial six-month extension with the option to extend for a further six-month period, be approved and the Executive Director Adult Social Care, Health and Wellbeing, in consultation with the Cabinet Member – Adult Social Care and Deputy Leader, be authorised to approve any extensions beyond the initial six-month extension period; and
- (1) the ongoing work outlined in the report regarding the establishment of longer-term commissioning arrangements for Day Opportunities be noted.

### **Reasons for the Decisions:**

1. Day services were places and opportunities for supporting people with an assessed need during the day. They could be offered within a building-based location or within the community.

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- 2 They helped people to have a fulfilling life: they provided the opportunity to take part in various interests and activities, make friends, develop relationships, gain new skills and enabled people to make a positive contribution to the community. Day opportunities also provided support to carers by means of creating respite so that they could pursue their own interests outside of their caring role.
- 3 Sefton Adult Social Care currently had thirteen contracts in place with Providers and in September 2023 the Cabinet approved the extension of these interim contracts for a further twelve months whilst a procurement exercise was being formulated.

### **Alternative Options Considered and Rejected:**

Not extending contracts – this option was rejected as there was a need to ensure that formal contractual arrangements remained in place, despite the historic nature of these contracts. The Council sought to manage and mitigate this by commencing a procurement exercise for a new commissioning framework. The six-month extension was intended to allow the Council time to run a compliant procurement process.

### **38. CHILD POVERTY STRATEGY**

The Cabinet considered the report of the Executive Director (Operations and Partnerships) providing an update on the progress and next steps of the [Sefton Child Poverty Strategy](#) by reporting on the following:

- A brief overview of the Child Poverty Strategy's Goals, priorities, and suggested actions.
- A review of progress using the accountability framework.
- Overview of findings and recommendations of the LGA Health in All Policy Team (July 2024).
- Discussion on arrangements for implementation, governance, and monitoring.
- A communications plan to raise the profile of the Child Poverty Strategy.

Cabinet Members welcomed the Strategy.

### **Decisions Made:**

That

- (1) the progress made to date and support plans to further progress action on child poverty in Sefton, be recognised; and
- (2) the plans set out in the report to raise the profile of the Sefton Child Poverty Strategy and strengthen governance, be noted.

### **Reasons for the Decisions:**

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The Cabinet had a governance role to provide oversight and support for the delivery and progress of Sefton Council priorities. The report set out information about progress in the year and a half following its launch and plans for its further implementation in 2024 and beyond, including feedback from an independent review by the Local Government Association, and a communications plan.

## **Alternative Options Considered and Rejected:**

An alternative was not considered. The Council's vision and core purpose demonstrated its continued commitment to support the most vulnerable, reduce poverty and its short- and long-term impacts, and to foster prosperity and good prospects for all. Advancing strategic and co-ordinated action on the issue of child poverty was aligned with the Council's responsibilities towards children and had co-benefits across the priorities expressed in the Core Purpose and Council Values.

## **39. GREEN WASTE COMPOSTING CONTRACT EXTENSION 2026/27**

The Cabinet considered the report of the Assistant Director – Operational In-House Services that sought approval to extend the current Green Waste Composting Service Contract with SED Services Ltd for a further two x 1-year periods in accordance with the specification of the contract provision in place. The report indicated that the current contract expired on 31 December 2024 and was a joint contract with the Liverpool City Region, Sefton being the procuring and lead authority on the contracted service provided to all participating Authorities, namely Sefton, St Helens, Knowsley, Wirral, and Liverpool.

## **Decisions Made:**

That

- (1) agreement to the two x 1-year extension periods available under current contractual arrangements with SED Services Ltd be approved; and
- (2) it be noted that this extension provides the best value and security of continuing service provision until 31 Dec 2027.

## **Reasons for the Decisions:**

To ensure that fully compliant green (garden) waste composting facilities were available to all the LCR participating authorities until 31 December 2027.

To allow time for any new joint LCR procurement options beyond that day to be sourced, procured and implemented.



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## **Alternative Options Considered and Rejected:**

None.

## **40. SOUTHPORT BUSINESS RECOVERY FUND**

The Cabinet considered the report of the Assistant Director -Economic Growth and Housing advising, in accordance with the Council's Constitution, of the decision of the Leader of the Council to exercise their powers to make urgent decisions because of the necessity to deliver emergency funding to businesses as part of the Council's response to the incident in Southport on 29 July 2024. The Council would aim to provide long-term support to all affected families, communities and stakeholders, in every respect, following the events of 29 July 2024. The Council's priority was immediate and long-term support for those families, in any and every manner required. However, wider support included financial assistance for businesses affected by the events, via the introduction of a Southport Business Recovery Fund. While business and economic considerations might be wider and longer-term as well, the immediate focus was proposed to be on businesses and organisations located in the Hart Street and St Lukes Road areas of Southport.

Cabinet Members thanked the who were staff involved in the support being offered.

## **Decisions Made:**

That

- (1) the report and the necessity for the Leader of the Council to exercise her powers under the Council's Constitution to make urgent decisions to deliver emergency funding to businesses as part of the council's response to the incident in Southport on 29 July 2024, be approved, including the introduction of a Southport Business Recovery Fund to provide financial assistance, in the first instance, to businesses and organisations located in the Hart Street and St Lukes Road areas of Southport which have incurred losses following the incident in Southport on 29th July 2024;
- (2) the allocation of £0.5m funded via existing Council resources be approved;
- (3) the establishment of the fund, and disbursement of monies be progressed immediately given the urgency with which support is needed by affected businesses, with Cabinet and Council approvals to be secured retrospectively;
- (4) the finalisation of eligibility criteria and associated processes be delegated to the Assistant Director, Economic Growth and Housing, in consultation with the Cabinet Member - Regeneration, Economy and Skills;

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## **Rule 27**

- (5) it be noted that the proposal was a Key Decision but had not been included in the Council's Forward Plan of Key Decisions. Consequently, the Leader of the Council and the Chair of the Overview and Scrutiny Committee (Regeneration and Skills) had been consulted under Rule 27 of the Access to Information Procedure Rules of the Constitution, to the decision being made by the Cabinet as a matter of urgency on the basis that it was impracticable to defer the decision until the commencement of the next Forward Plan because it was necessary to provide emergency funding to businesses in Hart Street, Southport following the incident on 29 July 2024 which forced them to close, causing loss of income for the period of closure of up to four weeks.

### **Reasons for the Decisions:**

Support for the affected families remained the Council's priority, alongside support for all affected communities and stakeholders. This included local businesses, their owners and employees.

The Business Recovery Fund was one of many steps of support required to meet the immediate needs of affected local businesses. This formed part of a developing long-term plan, through a community impact assessment, which also must be based on different groups impacted.

The Council would continue to work with partners (locally and in central government) and with those impacted to understand the long term need through the community impact assessment.

### **Alternative Options Considered and Rejected:**

Do nothing and refer businesses to available loan finance. This was rejected as businesses affected by closures were struggling to meet financial commitments and additional debt burden would compound their current situation, potentially resulting in closure. This would not reflect the Council's unequivocal commitment to short- and long-term support.

## **41. APPOINTMENT OF REPRESENTATIVE ON OUTSIDE BODIES**

The Cabinet considered the report of the Chief Legal and Democratic Officer on the appointment of the Council's representatives to serve on the Outside Bodies named within the report for the remainder of 2024/25.

### **Decision Made:**

That

That the proposed appointments to the Outside Bodies indicated below, for the remainder of 2024/25, be approved:

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## **North Western Inshore Fisheries and Conservation Authority**

Councillor Richards to replace Councillor McGinnity

## **Sefton New Directions Limited Board**

Councillor Neary to be appointed

### **Reasons for the Decision:**

The Cabinet had delegated powers set out in Chapter 5, Paragraph 40 of the Constitution to appoint the Council's representatives to serve on Outside Bodies.

The Cabinet was requested to approve the recommendation in order for the Council to have on-going representation on the Outside Bodies concerned.

### **Alternative Options Considered and Rejected:**

None.

## **42. HR AND PAYROLL SYSTEM PROCUREMENT**

The Cabinet considered the report of the Executive Director Corporate Services and Commercial seeking approval to undertake procurement activity using the Crown Commercial Services (CCS) framework to place a direct award for the SaaS HR and Payroll system, iTrent. The Preferred procurement option would be to place a direct award with the subcontractor Softcat using the CCS Framework under RM6194. This option would provide service continuity, would give continued stability to the service, and would permit existing development work to continue following the corporate plan to increase managers self-sufficiency and drive automation and a self-service model of service delivery.

### **Decision Made:**

That procurement be made by direct award with the subcontractor Softcat using the CCS Framework under RM6194.

### **Reasons for the Decision:**

The HR and Payroll software was used across the whole Council and by all employees. As such a system of this scale and complexity should only be considered for change once in a generation to ensure that the best use and development opportunities were exploited. By utilising a direct award this enabled ongoing development and growth to continue and avoided a lengthy and costly procurement, implementation retraining and redevelopment process. The existing contract was coming to an end in December 2024 and following a review of alternative systems available,

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using the G-Cloud procurement route, the incumbent was still considered to be the most suitable solution to meet Sefton's requirements and was considerably cheaper than comparative suppliers.

## **Alternative Options Considered and Rejected:**

Using the G-Cloud framework, evaluations had been made to consider alternative suppliers who were able to provide a solution with the functionality and scale required by Sefton and these were shown to be substantially more expensive.

A full OJEU compliant procurement exercise was also considered, opening the opportunity up to all potential bidders. This option was rejected as there was insufficient time or available resource to complete a full procurement exercise and would therefore prove extremely costly and open to risk.

## **43. CORPORATE CLOUD TELEPHONY CONTRACT**

The Cabinet considered the report of the Executive Director of Corporate Services and Commercial setting out the background to the Council's Cloud Telephony Service and associated contracts. The contracts supply telephony services to the Council were used by staff to conduct their duties and included the Council's Contact Centre for both inbound and outbound telephone calls. The report detailed the associated procurement route available to the authority to renew the current contracts which were due to expire on 18 February 2025.

## **Decisions Made:**

That

- (1) the use of Crown Commercial Services Framework RM6116 Network Services 3 - Lot 4b Digital Communication Services to award a contract for the provision of the Council's cloud telephony service to 8x8 UK Limited be approved, the proposed term being for an initial period of 2-years, followed by up to two optional 12-month extension periods; and
- (2) the Executive Director of Corporate Services and Commercial, in consultation with the Cabinet Member - Corporate Services, be granted delegated authority to award the Contract under this framework and any subsequent contract extensions.

## **Reasons for the Decisions:**

On acceptance and approval of the recommendation within the report, the next steps will be to complete a direct award under Crown Commercial Services Framework RM6116 Network Services 3 - Lot 4b Digital Communication Services.

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The proposed term would be for an initial period of 2-years, followed by up to two optional 12-month extension periods.

### **Alternative Options Considered and Rejected:**

To explore the market for a new telephony solution: rejected. The current solution provided by 8x8 UK Ltd had been a reliable solution since the Councils conversation away from analogue telephony at the start of this current but expiring contract. It was recognised that a contract of this nature would usually have been awarded for a much longer period, as the cost of change was significant (training, hardware and porting just some examples). However, at the time of contract initiation for cloud telephony there was an urgent need for a solution due to the COVID pandemic and for speed the contract was awarded via G-Cloud, the disadvantage of which was a shorter contract term.

8x8 had established themselves as a market leader in this space for local government with many neighbouring authorities also recently completing procurement exercises, with 8x8 winning on quality and price, including Liverpool and St Helens Councils.

Officers within the within the ICT Client Unit recently conducted a proof of concept looking at further developments in cloud telephony including the potential use of integrated telephony with Microsoft Teams, thereby making better use of existing investments in M365. It was concluded that these alternatives would potentially meet the Councils requirements, but further work was needed to ensure that any business case would be viable in terms of licensing costs and call charges. Consideration would also need to be given to the time needed to switch away from 8x8 for generic telephony and then how Teams would integrate with a contact centre telephony solution as a specialist solution would still be required in this space.

It was therefore recommended to complete a direct award for a period of 2 years with the option of two further 12-month extension periods to allow time for further work to be completed on the Teams proposal.

### **44. FINANCIAL MANAGEMENT 2024/25 TO 2027/28 - REVENUE AND CAPITAL BUDGET UPDATE 2024/25 – SEPTEMBER UPDATE**

The Cabinet considered the report of the Executive Director – Corporate Services and Commercial informing the Cabinet of:

- 1) The current position relating to the 2024/25 revenue budget.
- 2) The current forecast on Council Tax and Business Rates collection for 2024/25.
- 3) The monitoring position of the Council's capital programme to the end of July 2024:
  - The forecast expenditure to year end.

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- Variations against the approved budgets and an explanation of those variations for consideration by Members.
  - Updates to spending profiles and proposed amendments to capital budgets necessary to ensure the efficient delivery of capital projects.
- 4) The measures being taken by the Council to respond to the tragic incident in Southport on 29 July 2024.

Appendix A to the report set out the Capital Programme 2024/25 to 2026/27

## **Decisions Made:**

That

### **Revenue Outturn**

- (1) the current position relating to the 2024/25 revenue budget be noted;
- (2) the actions being taken to refine forecasts and identify mitigating efficiencies to ensure each service achieves a balanced position, be noted;
- (3) the financial risks associated with the delivery of the 2024/25 revenue budget be recognised and it be acknowledged that the forecast outturn position will continue to be reviewed, and remedial actions put in place, to ensure a balanced forecast outturn position and financial sustainability can be achieved;

### **Capital Programme**

- (4) the spending profiles across financial years for the approved capital programme, as set out at paragraph 8.1 of the report, be noted;
- (5) the latest capital expenditure position as at 31 July 2024 of £15.781m, as set out at paragraph 8.08 of the report; and the latest full year forecast is £87.038m, as set out at paragraph 8.09 of the report, be noted;
- (6) a supplementary capital estimate of £0.347m for the Northern Forest Grow Back Greener Programme, funded by grant from The Mersey Forest, as set out at paragraph 8.7 of the report, be approved; and
- (7) it be noted that capital resources will be managed by the Executive Director - Corporate Services and Commercial to ensure the capital programme remains fully funded and that capital funding arrangements secure the maximum financial benefit to the Council, as set out at paragraphs 8.12-8.14 of the report.

**Reasons for the Decisions:**

To ensure the Cabinet was informed of the current position in relation to the 2024/25 revenue budget.

To provide an updated forecast of the outturn position with regard to the collection of Council Tax and Business Rates.

To keep Members informed of the progress of the Capital Programme against the profiled budget for 2024/25 and agreed allocations for future years.

To progress any changes that were required in order to maintain a relevant and accurate budget profile necessary for effective monitoring of the Capital Programme.

To approve any updates to funding resources so that they could be applied to capital schemes in the delivery of the Council's overall capital strategy.

**Alternative Options Considered and Rejected:**

None.

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**Report Title: Here**

**Advocacy Services Procurement**

Date of meeting:	3rd October 2024.		
Report to:	Cabinet		
Report of:	Executive Director - Adult Social Care, Health and Wellbeing / Cheshire & Merseyside ICB Place Director		
Portfolio:	Cabinet Member - Adult Social Care and Health and Deputy Leader		
Wards affected:	All.		
Is this a key decision:	Yes	Included in Forward Plan:	Yes
Exempt/confidential report:	No		

**Summary:**

To seek approval to complete a procurement exercise for Advocacy Services.

**Recommendation(s):**

Cabinet is recommended to approve and note the following:

- (1) Approval to commence a procurement exercise to establish new contracts from 1<sup>st</sup> April 2025 for the provision of advocacy services.
- (2) Approve delegation of decisions on the inclusion of both Children’s Service and Health advocacy services in the procurement exercise to the Executive Director - Adult Social Care, Health and Wellbeing / Cheshire & Merseyside ICB Place Director, in consultation with the Director of Children’s Services and the Cabinet Members for Children’s and Adult Social Care & Health, either as part of the original procurement exercise or throughout the duration of any new procurement framework established.
- (3) That decisions on the commissioning / procurement framework model, tender evaluation criteria, contracting models, contract terms and conditions, and service specification to be applied to the procurement exercises, be delegated to the Executive Director - Adult Social Care, Health and Wellbeing / Cheshire & Merseyside ICB Place Director, in consultation with the Director of Children’s Services (if the contracts are to include Children’s Services advocacy services) and the Cabinet Members for Children’s and Adult Social Care & Health, throughout the

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duration of the procurement framework, and on the basis that they can be contained within existing and approved budget provision for such services.

- (4) Contracts to be awarded for an initial contract term of three years with the option to further extend for a period of up to two years, (either as a single extension or via two separate twelve-month extensions) subject to satisfactory performance and demonstration of value for money of the successful supplier/s, and the required budget being available, and that decisions on the awarding of the contracts, and any permitted extensions thereof, be delegated to the Executive Director - Adult Social Care, Health and Wellbeing / Cheshire & Merseyside ICB Place Director, in consultation with the Director of Children's Services (if the contracts are to include Children's Services advocacy services) and the Cabinet Members for Children's and Adult Social Care & Health.
- (5) Should it be identified during the contractual period that the contracts need to be increased in value to reflect increases in demand for advocacy services and to ensure that Sefton continues to meet its statutory obligations, then delegated authority be given to the Executive Director - Adult Social Care, Health and Wellbeing / Cheshire & Merseyside ICB Place Director, in consultation with the Director of Children's Services (if the contracts are to include Children's Services advocacy services) and the Cabinet Members for Children's and Adult Social Care & Health to approve any such increases, under the proviso that the additional expenditure can be met with existing budget provision, falls within the associated delegated authority to approve such an increase, and is in line with the applicable procurement regulations.
- (6) Authorise the Executive Director - Adult Social Care, Health and Wellbeing / Cheshire & Merseyside ICB Place Director, in consultation with Cabinet Member for Adult Social Care & Health to authorise and implement a maximum 12-month extension to current Adult Social Care commissioned advocacy services contracts, should there be any delay to the procurement exercise and any new contractual arrangements commencing on 1<sup>st</sup> April 2025.

## 1. The Rationale and Evidence for the Recommendations

- 1.1. Advocacy services support individuals to allow their voice and opinions to be heard and support them to express these in situations where they may not be able to do this fully by themselves.
- 1.2. Advocates and Advocacy providers work in partnership with the people they support and promote social inclusion and equality.
- 1.3. Advocacy is essential for people who, due to a disability, cultural difference, health condition, communication difficulty, financial circumstances or social attitudes, find themselves in a position where their ability to exercise choice or represent their own interests is limited, or where processes are particularly complex to navigate, such as social care and health pathways or where there is a safeguarding issue. Advocates play an important role in feeding back how to improve services to make them accessible to people.

## Current Advocacy Provision and Associated Contracts

- 1.4. The Care Act 2014 places a statutory duty on Local Authorities to involve people in decisions made about them and their care and support. No matter how complex a person's needs, Local Authorities are required to help people express their wishes and feelings, support them in weighing up their options, and assist them in making their own decisions.
- 1.5. Sefton Council has a statutory obligation to provide the following advocacy services:
  - Independent Mental Capacity Advocates (IMCA) under the Mental Capacity Act 2005
  - Relevant Person's Representative (RPR)
  - Independent Mental Health Advocates (IMHA) under the Mental Health Act 2007
  - Independent Health Complaints Advocacy (IHCA) under the Health & Social Care Act 2012
  - Independent Care Act Advocacy (ICAA) under the Care Act 2014
  - Parent Carers Advocacy.
- 1.6. Independent Mental Capacity Advocacy (IMCA) is a statutory service for those over the age of 16, who have no close family or friends or any other person to help protect their interests under specific circumstances. Local Authorities have an obligation to instruct and consult an IMCA when certain decisions are being made on behalf of people who lack capacity and who do not have any family or friends to represent them.
- 1.7. The Local Authority has the additional discretion to instruct an IMCA during a Care Act assessment or review. Decisions in which an IMCA must be involved (where a person is deemed to lack capacity to make the following decisions and has no close family or friends or any other person to help protect their interests) include changes of accommodation.
- 1.8. For Care Act advocacy the Care Act 2014 states that Local Authorities must involve people in decisions made about them and their care and support, no matter how complex a person's needs, to help people to express their wishes and feelings, support them in weighing up their options, and assist them in making their own decisions. An independent advocate can be appointed as required to support and represent the person.
- 1.9. Independent Mental Health Act (IMHA) Advocacy service is a statutory service that was introduced in the 2007 amendments to the Mental Health Act 1983. The Health and Social Care Act 2012 updated this and placed a statutory duty on Local Authorities to commission the service. IMHAs support inpatients to understand their rights, provisions of the legislation under which they qualify (and any restrictions imposed), understand treatment being given or proposed under the Act and to gain and understanding of rights under the Act and how to exercise those rights.
- 1.10 The Relevant Person's Representative (RPR) is appointed to a person subject to a Deprivation of Liberty Safeguards (DoLS), where they do not have family or friends, or there is potential conflict of interest in a friend or family member undertaking this role.
- 1.11 For Independent Health Complaints Advocacy (IHCA) – this is an advocate specially trained to help people through the NHS compPage 19ess. It is a statutory service which means

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that anyone making a complaint about the NHS has a right to advocacy support. People can have help from an advocate at any point in the complaints process.

1.12 In addition to the above statutory services, Sefton Council and Cheshire & Merseyside ICB - Sefton Place also commission Community Advocacy as it has an important role in supporting individuals, the health and care system and communities. This encompasses:

- **General Advocacy** - short-term, issue-based advocacy and, when required, longer term advocacy support in specifically identified circumstances. An advocate will support a person to have a strong voice when they need to make an important decision or if they are facing issues they need help with. An advocate will make sure the person's voice is heard, help them to have more choice and speak on the person's behalf.
- **Self Advocacy** – when the advocate and the advocacy partner share similar experiences or environments. It sometimes means that people who have experienced the same things feel they have a better understanding and can be more supportive.

1.13. Sefton Children's Services also commission Parent Carer Advocacy, which has seen a growth in demand. There is also a need to ensure that advocacy provision for Parents and Children who are both seeking advocacy are delivered by separate Advocacy Providers to take into account any potential conflicts.

1.14. For statutory provision current contracts are in place until 31<sup>st</sup> March 2025 and do not include any further options to extend, therefore resulting in the requirement to conduct a procurement exercise to establish new contracts from 1<sup>st</sup> April 2025. Due to further work required with Children's Services and Cheshire & Merseyside ICB - Sefton Place, it is also recommended that approval is given to implement any required direct award to extend existing contracts up to a period of twelve months, based on current annual contract values which total £273,850. This is to allow the partnership arrangements and the procurement model to be developed and finalised, and to take into account any delays to this work.

1.15. For non-statutory provision, current agreements have been extended up to 31<sup>st</sup> March 2025 in order to align contract end dates and to support potential future procurement approaches.

1.16. It is important to highlight that demand for advocacy services is increasing. Work is taking place to assess increased levels of demand and will be included in the procurement information published for bidders, including ensuring that successful bidders can support with meeting future growth in demand, which could increase by a minimum of 10%, but could be as high as 25% year-on-year over the lifetime of future contracts. Therefore, future annual expenditure may need to increase to reflect this. Annual inflationary uplifts will also be applied to the contract. Any additional expenditure will need to be met from existing Adult Social Care, Children's Social Care and Cheshire & Merseyside ICB - Sefton Place budgets.

## **Future Procurement Exercise**

1.17. As a result of the above, there is a need to seek approval to commence a procurement exercise to establish new contracts from 1<sup>st</sup> April 2025 for the provision of advocacy services.

1.18. However, there is also scope to include within the procurement exercise further advocacy provision in order to support ongoing integrated joint working and delivery of services

# Agenda Item 4

between Adult Social Care, Cheshire & Merseyside ICB - Sefton Place and Children's services.

- 1.19. This could encompass the development of an 'Advocacy Hub' which would include all advocacy provision and operate with a lead provider model to provide a single point of access that takes all referrals, triages, provides support and signposts where necessary. This could then provide people who need advocacy services with a more effective and efficient service, reducing hand offs between advocacy organisations whilst improving outcomes. Under such a potential Hub model any such lead provider could deliver all statutory provision and either deliver the non-statutory provision or enter into a partnership arrangement with other organisations to deliver it.
- 1.20. It may also be the case though that the current advocacy services outlined in sections 1.5 and 1.12 of this report are commissioned as separate 'lots' or as grouped 'lots' for statutory and non-statutory provision.
- 1.21. Currently decisions on any procurement exercise including Health and/or Children's services have not been finalised. Discussions with Cheshire & Merseyside ICB - Sefton Place and Children's partners are ongoing, and should they be included as part of the initial procurement exercise, then it is recommended that decisions on their inclusion in the procurement exercise are delegated to the Executive Director - Adult Social Care, Health and Wellbeing / Cheshire & Merseyside ICB Place Director, in consultation with the Director of Children's Services and the Cabinet Members for Children's and Adult Social Care & Health.
- 1.22. If it is the case that either Children's Services and/or Cheshire & Merseyside ICB - Sefton Place advocacy services are not included in the initial procurement exercise, then it is proposed that, when formulating the procurement, it is shaped in a way that affords both Children's Services and Cheshire & Merseyside ICB - Sefton Place to be part of the procurement arrangements in the future, for example through the implementation of a new framework that could include these future 'lots'.
- 1.23. For any procurement exercise it will be a Light Touch regime open exercise led by Adult Social Care, and it is proposed that decisions on the commissioning / procurement framework model, tender evaluation criteria, contracting models, contract terms and conditions, and service specification to be applied to the procurement exercises, be delegated to the Executive Director - Adult Social Care, Health and Wellbeing / Cheshire & Merseyside ICB Place Director, in consultation with the Director of Children's Services (if the contracts are to include Children's Services advocacy services) and the Cabinet Member – Adult Social Care & Health, throughout the duration of the procurement framework and on the basis that they can be contained within existing and approved budget provision for such services. The final procurement approach will be developed with, and approved by the Council's Procurement and Legal Teams
- 1.24. Any new service specification will be developed in partnership, including taking into account the views and experiences of people that have used Advocacy services. The specification will also include targets for acceptance of referrals and the delivery of direct advocacy provision to people.
- 1.25. For any contracts awarded it is proposed that they are entered into for an initial contract term of three years with the option to further extend for a period of up to two years, (either as a single extension or via two separate twelve-month extensions) subject to satisfactory performance and demonstration of value for money of the successful supplier/s and the

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required budget being available, and that decisions on the awarding of the contracts, and any permitted extensions thereof, are delegated to the Executive Director - Adult Social Care, Health and Wellbeing / Cheshire & Merseyside ICB Place Director, in consultation with the Director of Children's Services (if the contracts are to include Children's Services advocacy services) and the Cabinet Members for Children's and Adult Social Care & Health.

1.26. It is also proposed that, should it be identified during the period that new contracts are in place, any such contracts need to be increased in value to reflect increases in demand for advocacy services (for example Relevant Person's Representative advocacy) to ensure that Sefton continues to meet its statutory obligations, then delegated authority is given to the Executive Director - Adult Social Care, Health and Wellbeing / Cheshire & Merseyside ICB Place Director, in consultation with the Director of Children's Services (if the contracts are to include Children's Services advocacy services) and the Cabinet Members for Children's and Adult Social Care & Health to approve any such increases, under the proviso that the additional expenditure can be met with existing budget provision, falls within the associated delegated authority to approve such an increase, and is in line with the applicable procurement regulations.

## 2. Financial Implications

Revenue costs will be met from the existing Adult Social Care, Children's Social Care & Cheshire & Merseyside ICB - Sefton Place budgets, should the procurement encompass joint commissioning with Cheshire & Merseyside ICB - Sefton Place and Children's services. Both statutory and non-statutory advocacy provision are in scope for the procurement with a combined current annual contract value of £604,026, of which £336,129 is within the Adult Social Care Budget. However, there is a potential that due to growth in demand for advocacy services, contract values may need to be increased. Any increase to expenditure will need to be met from existing associated budgets.

## 3. Legal Implications:

- Care Act 2014
- Care and Support Statutory Guidance

## 4. Corporate Risk Implications:

There is a risk that not commencing a procurement exercise could result in statutory advocacy services not being delivered.

There is a further risk that should recommendation 6 of this report be enacted to further extend existing contracts for up to twelve months as these are historic contracts. The Council seeks to manage and mitigate any risks by commencing the procurement exercise. Any such extension would be intended to allow the Council time to run a compliant procurement process.

## 5. Staffing HR Implications:

It is envisaged that any procurement exercise may encompass TUPE transfer of staff from existing Providers.

## 6. Conclusion:

6.1 The rationale for the recommendations in this report have been formulated to ensure that a procurement exercise takes place to secure ongoing delivery of Advocacy Services from 1<sup>st</sup> April 2025.

## Alternative Options Considered and Rejected:

None.

<b>Equality Implications:</b>
There are no equality implications.
<b>Impact on Children and Young People:</b>
Advocacy services will continue to be provided to people, including younger adults aged 18 and above. Should the procurement exercise include Children's advocacy provision, this would ensure that Children & Young People continue to be able to access Advocacy services.
<b>Climate Emergency Implications:</b>
The recommendations within this report will have a Neutral impact.

## What consultations have taken place on the proposals and when?

### (A) Internal Consultations

The Executive Director of Corporate Services and Commercial (FD.7773/24) and the Chief Legal and Democratic Officer (LD.5873/24) have been consulted and any comments have been incorporated into the report.

### (B) External Consultations

Engagement has taken place with current providers regarding extension of existing contracts and ongoing engagement will take place with key stakeholders, including Health and Children's services as part of the formulation of final proposals on specifics of the procurement exercise.

Implementation Date for the Decision:

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Following the expiry of the “call-in” period for the Committee decision.

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## **Appendices:**

There are no appendices to this report

## **Background Papers:**

None.



## Sefton Carer Service Procurement Contract Proposal

Date of meeting:	03/10/2024		
Report to:	Cabinet Member - Adult Social Care and Health Cabinet Member – Children’s Services		
Report of:	Executive Director of Adult Social Care, Health and Wellbeing		
Portfolio:	Adult Social Care and Health Children, Schools’ and Families		
Wards affected:	All		
Is this a key decision:	Yes	Included in Forward Plan:	Yes
Exempt/confidential report:	No		

### Summary:

This Cabinet report outlines the recommended approach to the future commissioning arrangements for all age carers support and advice, currently provided by Sefton Carers Centre. The existing contract expires in March 2025 and so a new arrangement will need to be put in place.

There are approximately 35,000 informal carers in Sefton. A “carer” is defined as an adult who provides or intends to provide care for another adult who has got a long-term care needs or terminal illness. Sefton Carers Centre supports 12,186 adult carers over 18 in Sefton.

In the last School Census Return there were 40,447 pupils recorded in Sefton. The Carers Trust (the largest network of organisations across the UK) identifies that 8% of those children will be young carers. This equates to 3,236 children. Sefton Carers Centre is supporting and providing activities to approximately 500 young carers in Sefton at any one time.

Carers support and advice provided by a good organisation will enable a carer to receive individual support, advice and services at the right time for them by professionals, that meet with their individual needs. These include Carers Assessments, Parent Carer Needs Assessments, Young Carers Assessments and Young Carers Transitions Assessments. Sefton Carers Centre also provides a wide range of the services which meet the outcomes of these assessments as required by the legislation.

The Council has historically funded carers support and advisory services through a

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contract arrangement with Sefton Carers Service which is due to expire on 31/03/2025. This report recommends that there is a procurement exercise to award a 3-year contract award with opportunity to extend the contract subject to a formal review. This will allow support and advice for carers to be aligned to the Carers Strategy for Sefton and will enable the new service to provide longer term continuity to carers and respond to the needs of all carers both children and adults in our borough.

This report seeks approval to procure and award the contract for carers support and advice through an open and competitive process with the decision to award the contract delegated to the Director of Adult Social Care and Health and Wellbeing, alongside the Director for Children's Services, in consultation with the Cabinet Members for Children's Services and Adult Social Care and Health.

## **Recommendation(s):**

Cabinet is recommended to approve:

- (1) The commencement of a procurement exercise to extend and develop Sefton's Carer Service provision in Sefton that will be established for up to, and not more than, a five-year period, commencing in April 2025 (3 years +1 year+1 year). The total Local Authority budget for the contract from April 2025 will be £990,930 (See table below) and additional Integrated Care Board (ICB) funding for 25/26 is anticipated to be £132,000.
- (2) That decisions on the model for the new Carers Service provision, including the workforce strategy, service specification (including young carers service support and provision), quality and cost threshold, initial procurement and tender evaluation process, and any contract variations throughout the life of the new Carers Service provision to deal with any specific additional service delivery requirements are delegated to the Executive Director of Adult Social Care and Health and Wellbeing, the Director of Children's Services, in consultation with the Cabinet Members for Children's Services and Adult Social Care & Health.
- (3) Contracts to be awarded for an initial contract term of three years with the option to further extend for a period of up to two years, (either as a single extension or via two separate twelve-month extensions) subject to satisfactory performance and being able to demonstrate the achievement of value for money of the successful supplier/s and the required budget being available, and that decisions on the awarding of the contracts, and any permitted extensions thereof, be delegated to the Executive Director of Adult Social Care, Health and Wellbeing, the Director of Children's Services and the Cabinet Members for Children's Services and Adult Social Care & Health.
- (4) Should it be identified during the contractual period that the contracts need to be increased in value to reflect increases in demand for carer services and to ensure that Sefton continues to meet its statutory obligations, then delegated authority be given to the Executive Director of Adult Social Care, Health and Wellbeing, in consultation with the Director of Children's Services, and the Cabinet Members for Children Services and Adult Social Care & Health, to approve any such increases, under the proviso that the additional expenditure can be met with existing budget provision, falls within the associated delegated authority to approve such an increase, and is in line with the applicable procurement regulations.

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- (5) That throughout the life of the commissioned Carer Support Service provision, delegated authority is given the Executive Director of Adult Social Care Health and Wellbeing, alongside the Director for Children's Services and in consultation with the Cabinet Members for Childrens Services and Adult Social Care & Health, to make decisions on any amendments to its operation, so as to ensure that such decisions can be implemented in a timely manner and so that the provider is able to operate in a flexible way which addresses any emerging issues and supports wider work such as the further integration of Health and Children Social Care services with Adult Social Care.
- (6) Decisions regarding the pooling of any other funding between Children's Social Care, Adult Social Care and the Cheshire and Merseyside Integrated Care Board for Sefton, will be delegated to the Executive Director of Adult Social Care, Health and Wellbeing who is also the ICB Place Director for Sefton in consultation with the Director for Children's Services and Cabinet Members for Childrens Services and Adult Social Care & Health.

## 1. The Rationale and Evidence for the Recommendations

Follow Sefton Council's procurement cycle to ensure that commissioning arrangements for the provision of a Carer Support and Advisory Service within Sefton are directed by Sefton, to meet its demographic requirements, are in place to meet the assessed needs of Sefton's residents, so that future decisions on commissioning and market management can be made in a timely manner and to put in place new contractual and service delivery arrangements which both seek to ensure market sustainability and reduced disruption to Service Users.

## 2. Introduction / Background

- 2.1 In 2022/23 Cabinet approved an interim 2-year contract for Sefton Carers Service while a service specification was developed to go out for procurement and commissioning in 2025. Cabinet was advised that a further report would be submitted providing details on the future Carer's Strategy for Sefton Carers service provision and support for this cohort.
- 2.2 Since approval of that Cabinet report, Sefton Carer's Strategy and its delivery plan have been written. All strategic priorities identified within the strategy will be considered in the procurement of the new Sefton's Carer Service including an all-age offer to carers in Sefton. [Sefton All Age Carers' Strategy](#)
- 2.3 At present all age Carers Support and Advisory Services in Sefton are provided by the Sefton Carers Trust, Carers Centre. Carers report that they need support for their physical health, mental health and wellbeing needs whilst they are meeting the needs of the person that they care for and Sefton Carer services and resources ensure that Carers own life choices and ambitions are supported and recognised. The service provides integrated services to ensure that those being cared for and their unpaid carers can get help and support in the appropriate place at the right time. Sefton Carers Trust have a proven track record of a proven track record of providing free advice and guidance, emotional and practical support, training and a range of holistic therapies for unpaid carers living in Sefton.
- 2.4 Support to carers is a key duty, set out in the Care Act 2014 and the Children and Families Act 2014, for Councils with responsibility for Adult Social Care, and so we

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need to respond accordingly to ensure that the needs of carers and those they care for are met in a timely and appropriate way, in adherence to the Acts.

2.5 This Report seeks approval for the implementation of the future commissioning approach, associated future delegated authority permissions and outlines the future strategic direction for the sector, linked to the wider Department of Health and Social Care directed work, which has impacted on the implementation and direction of previous decisions approved by Cabinet.

2.6 The new contract will allow Sefton Council to:

- Secure provision which can be evaluated based upon Sefton's local demographic and carer's needs:
- Enhance the service provision for carers, recognising how caring affect physical or mental health, supporting unpaid carers at all stages of caring, ensuring the right information and planning is effective to avoid crises by providing early assistance and preparation and increasing leisure and cultural opportunities for all carers and improving access to training.
- Support sustainability and quality of carer support and advisory service provision and associated funding requirements
- Support the delivery of strategic local and national carer support objectives:

2.7 The commissioned carer service will commence on 1<sup>st</sup> April 2025 and will be in operation for a maximum 5-year period (3 + 1 + 1 years).

2.8 A dedicated project group will be established consisting of officers from Strategic Commissioning, Procurement, Legal, Adult Social Care Social Operations and Commissioning Partners. This group will have oversight of the delivery of the contract and any additional budget requirements will be pooled where possible and in accordance to demand and improved service delivery and opportunities.

2.9 An engagement and co-production ethos will be adopted, bringing in partners such as Healthwatch Sefton, Service Users and their Families/Advocates and Providers, to ensure that the new arrangements deliver services to best meet people's needs and desired outcomes for people who use services.

2.10 It is proposed that delegated authority is given to the Executive Director of Adult Social Care and Health, alongside the Director of Children's Services, and in consultation with the Cabinet Member – Adult Social Care to make decisions on the future contracting / Provider model for the new Carer Service contract.

## **3. Operational Approach**

3.1 It is anticipated that the Contract will be annually reviewed with a more detailed review at the end of Year 3, to ensure sufficient service provision and a Provider that supports Service User choice.

3.2 It is recommended that, throughout the lifecycle of the new Carers Service Contract, delegated authority is given the Executive Director of Adult Social Care, Health and Wellbeing alongside the Director for Childrens Services, and, in consultation with the Cabinet Members for Childrens Services and Adult Social Care & Health to make decisions on periodic refreshing of the contract content as required.

## 4. Financial Implications

### (A) Revenue Costs

Revenue costs with respect to the new contract will need to be met from existing Carer Support and Advisory Service ASC and CSC budgets.

The Table below includes the areas of funding. This is the for the current service provider to provide the service and does not include the annual uplift.

<b>Contributing portfolios</b>	<b>Contribution 24/25</b>	<b>Assumed Contribution</b>
Adult Social Care	£731,236	£731,236
Children's Social Care	£259,694	£259,694
<b>TOTAL</b>	£990,930	£990,930
Cheshire and Merseyside Integrated Care Board Sefton Place	£132,000	£132,000
<b>GRAND TOTAL (Excluding ICB contribution and uplift)</b>	<b>£990, 930</b>	<b>£990,930</b>

### (B) Capital Costs

There are no capital costs associated with the implementation of the recommendations within this report.

## 5. Legal Implications

- Children and Families Act 2014 and the Care Act 2014 place specific statutory duties on the local authority to meet the needs of carers and young carers.
- Care and Support Statutory Guidance
- Procurement Act 2023 associated Regulations
- Data Protection Act 2018

## 6. Risk Implications

Increased financial costs for commissioning a Care Support and Advisory Service provision in line with increasing demand for this service year on year (circa 30% increase per annum).

There is a potential that due to growth in demand for advocacy services, contract values may need to be increased year on year. Any increase to expenditure will need to be met from existing associated budgets and within the financial regulations set by the Council.

## 7. Staffing HR Implications

N/A

## 8. Conclusion

The above recommendations have been submitted to seek to establish a new service to meet the needs of carers in Sefton and in addition ensure that the offer to carers of all ages is sustainable and offers sufficiency to meet emerging demands.

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## Alternative Options Considered and Rejected

- 1. Maintaining the status quo** – The current provider arrangement is an extension of an Agreement, and a new contract is required that is robust and up to date in terms and conditions with defined and agreed contractual lifespan

### Equality Implications:

Equality Implications could include the identification of unpaid carer and carers that do not identify as carers despite being in a caring role and requiring support, young carers, carers from ethnic backgrounds and carers that are digitally isolated or excluded.

The annual Carers Survey also helps to identify carers and their needs and this information also supports areas for service development to ensure that all carers' needs are met and identified services can be easily accessed as appropriate.

Carer Support and Advisory services supports the maintenance of independence, including ensuring that carers and the people that they care for remain a part of their local communities and associated activities and service provision.

The adoption of the recommendations will ensure that statutory services will continue to be delivered to people with additional care and support needs and the new arrangements will better support the provider market and its sustainability.

### Impact on Children and Young People:

Continued support for Sefton Young Carers, Parent Carers and Unpaid carers will end if no extended contract / commissioned service provider is agreed and commissioned.

The establishment of a newly commissioned Carers Support and Advisory service provision, with an extended contract lifespan, will help to ensure that there is continuity and certainty of a continued service that is uninterrupted. Sefton Carers service provision will be better positioned to respond to changes in the marketplace and to deliver long term projects that will effectively support all Sefton Carers.

### Climate Emergency Implications:

N/A

## What consultations have taken place on the proposals and when?

### (A) Internal Consultations

The Executive Director of Corporate Services and Commercial (FD.7750/24) and the Chief Legal and Democratic Officer (LD.5850/24) have been consulted and any comments have been incorporated into the report.

### (B) External Consultations

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The carers strategy has been through consultation and the specification which will be developed will reflect feedback from carers in Sefton. The development of the new Sefton Carers Service Contract will be co-designed to ensure that any gaps in services are met.

## Implementation Date for the Decision:

Following the expiry of the “call-in” period for the Cabinet decision.

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## Appendices:

There are no appendices to this report

## Background Papers:

N/A

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**Report Title: Re-procurement of the Kooth Young People's Online Mental Health Support Service**

Date of meeting:	3 October 2024
Report to:	Cabinet
Report of:	Director of Public Health
Portfolio:	Cabinet Member - Public Health and Wellbeing
Wards affected:	All Wards
Included in Forward Plan:	Yes
Is this a key decision:	Yes
Exempt/confidential report:	No

**Summary:**

This paper seeks Cabinet approval for the following:

1. To undertake a Direct Award under Process C of the Health Care Services Provider Selection Regime (PSR) 2023\*, including publication of a notice to make an award to the existing provider (as set out in schedule 3 PSR 2023) to Kooth PLC from the 1st January 2025 for a core period of 3.25 years with the option to extend for a further 2x 1-year periods, subject to satisfactory on-going performance and value for money being evidenced.
2. To give delegated authority for the Director of Public Health in consultation with the Cabinet Member for Public Health and Wellbeing to authorise and execute extensions to the contract within the terms of the Direct Award.

\*Direct Award Process C is a method under the Health Care Services (Provider Selection Regime) Regulations 2023 that allows a relevant authority to award a new contract to an existing provider when an existing contract is due to expire, and the existing provider is satisfying the existing contract and likely to satisfy the new contract.

**Recommendation(s):**

This paper provides the recommendation for Cabinet to:

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1. Authorise the Director of Public Health in conjunction with the Cabinet Member for Public Health and Wellbeing to make a Direct Award to Kooth PLC from 1st January 2025 for the provision of low-level online mental health support under Process C of the Provider Selection Regime. Advice has been taken from Procurement colleagues and a procurement evaluation exercise has been carried out and concluded to ensure Kooth is demonstrating satisfactory on-going performance and value for money.
2. Authorise the Director of Public Health in conjunction with the Cabinet Member for Public Health and Wellbeing to exercise any extension options within the terms of the Direct Award.

## 1. The Rationale and Evidence for the Recommendations

### Background

The impacts of COVID-19 on children, young people and families were significant and long lasting. Following the pandemic, themes emerged, which included a decline in emotional health and wellbeing, widening inequalities and increased demand on specialist services, which have since been further exacerbated by the impact of the cost-of-living crisis.

Kooth is an online chat-based mental health support service for young people ages 10-25. They offer free and anonymous support through 1 to 1 chats with mental health professionals and via forums which are monitored by an admin from the Kooth service. The Kooth service is accredited by the British Association for Counselling and Psychology (BACP). Kooth is accessible 24 hours a day, 365 days of the year and provides access to chat sessions with counsellors and qualified emotional wellbeing practitioners. All chat sessions are text-based conversations that take place on the Kooth website, and last up to an hour. Chat is available from 12pm – 10pm Monday through Friday, and 6pm – 10pm Saturday and Sunday, providing an 'out of hours' service. Kooth is accessible from any device that connects to Wi-Fi, allowing young people to seek support at a time and location that is suitable for them.

It is important to have a universal offer in Sefton for our young people to access low level support to help keep them well. Young people have helped shape how they access services and support, with more preferring less direct methods of communication, preferring text-based communication. This has never been more pertinent than in the most recent few weeks in the wake of the tragedy in Southport.

Providing our young people with the means to help better manage their own wellbeing will likely prevent them from having mental ill health. Not having a service in place that can offer this would cause harm to our young people and would create a gap in the continuity of care we currently offer our children and young people.

### Reasons for the Recommendation(s):

1. The current contracts will expire on 31st December 2024.
2. The existing provider, Kooth PLC, is satisfying the original contract and is likely to satisfy the proposed new contract meeting **Page 34**<sup>n</sup> criteria for Direct Award Process C.

3. Assurance of satisfactory performance is evidenced against the five key criteria for assessing provider eligibility under Direct Award Process C:

- Quality and innovation
- Value
- Integration, collaboration, and service sustainability.
- Improving Access, reducing health inequalities, and facilitating choice.
- Social Value

Having determined through written confirmation that Kooth PLC wishes to continue to provide services under the conditions outlined in the current service specification, officers assessed and evaluated the above key criteria using an agreed set of service specific quality and performance questions and Sefton Council's outline for meeting social value as set out in the PSR Process C guidance. We are now seeking authorisation for the Director of Public Health in conjunction with the Cabinet Member for Public Health and Wellbeing to make a Direct Award to Kooth PLC.

Scores were compared and moderated by Procurement colleagues. All scores reached satisfactory or above outcomes with all five assessed areas achieving a pass score of 3 or above.

## **2. Financial Implications**

The total annual budget for the Kooth service is £130,000 exclusive of VAT per annum. The cost per annum is fixed for three years and is inclusive of inflationary uplifts for this period. The price at point of extension to be negotiated with uplift considered by commissioners.

The service is funded through comprised of contributions from Sefton Council Public Health and Children's Services, and Cheshire and Merseyside ICB Sefton Place, with each partner contributing:

- £38,613.86 – Public Health contribution
- £48,910.89 – Children's Services contribution
- £42,475.25 – Cheshire and Merseyside ICB Sefton Place contribution

## **3. Legal Implications**

The existing providers performance has been assessed against the five key criteria set out in the criteria for Direct Award Process C using performance reporting against annual work plans and a submitted social value statement.

Assessments have been individually scored and moderated as per Sefton Council Contract Procedure Rules and will be recorded on the PSR decision making record for publication and or audit purposes. This will enable the Council to decide whether it is satisfied that the existing provider is meeting the existing contract requirements and will likely satisfy the proposed new contract, as required by Regulation 9 of the Health Care Services (Provider Selection Regime) Regulations 2023.

## **4. Corporate Risk Implications**

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There are no corporate risks associated with the recommendations within the report.

A decision to reject the recommendations within the report opens the Council to reputational risk as this would create a gap in the continuity of care that we currently offer our children and young people in the wake of the tragic incident in Southport.

## 5 Staffing HR Implications

The cost of this service will be met within the core public health budget. There are no risks associated to Financial, IT, Staffing and Assets

## 6 Conclusion

### Alternative Options Considered and Rejected

1. Direct Award Process A – while the service requires highly specialist trained staff and digital infrastructure which limits the number of providers able to provide the required services, we do not consider the existing provider to be the only capable provider and the Council is not concluding a framework agreement. Therefore, Direct Award Process A is not appropriate.
2. Direct Award Process B – it is not a contracting arrangement where people have a choice of providers nor where the number of providers are restricted by the authority. Therefore, Direct Award Process B is not appropriate.
3. Most suitable provider process – where the relevant authority is able to identify the most suitable provider this option may be considered without running a complete process. This process is not required as the existing provider meets the criteria for Direct award process C. Therefore, most suitable provider process is not appropriate.
4. Competitive Process – The local authority is satisfied with the service that Kooth PLC provides and does not wish to undertake a competitive tender commissioning exercise when this will likely result in very little interest and potentially result in service instability.
5. To not re-commission the Kooth service – this option was rejected as it opens the Council to reputational risk and would create a gap in the continuity of care that we currently offer our children and young people.

In line with the PSR criteria for Direct Award Process C, services are not changing considerably. Any changes to the financial value of the contract will reflect annual inflationary uplifts and will remain within 25% of the overall contract value.

We therefore conclude that the most appropriate option is to pursue Direct Award Process C. There is an existing provider for the service and that existing provider is satisfying the original contract and will likely satisfy the proposed new contract, and the services do not meet the considerable change threshold as defined in the Health Care Services (Provider Selection Regime) Regulations 2023.

<b>Equality Implications:</b>
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The equality Implications have been identified and mitigated.

(Please note that Council have agreed care experience should be treated like a protected characteristic.)

## **Impact on Children and Young People:**

Kooth PLC will ensure the provision of Kooth in Sefton - an online mental health support service for children and young people that offers a range of online support including confidential and anonymous 1 to 1 text-based counselling, moderated message boards and forums, and articles.

Kooth provides preventative emotional health and wellbeing support designed to address low level mental health needs of young people. Young people requiring more complex support will be signposted and/or referred to the most appropriate local services. The service has a positive satisfaction rating with 93% of users reporting they would recommend counselling to a friend.

Kooth PLC will provide a universal offer with the aim to engage specific priority groups which have been identified based on clinical and population risk/need, these include:

- Those living in the 20% most deprived areas of Sefton.
- Children with experience of care.
- LGBTQ+ young people.
- Ethnic minority groups.

Individuals with disabilities including SEND.

## **Climate Emergency Implications:**

The recommendations within this report will have a Neutral impact.

It is a re-procurement of existing Public Health commissioned service which does not generate additional impacts on the climate emergency.

## **What consultations have taken place on the proposals and when?**

### **(A) Internal Consultations**

The Executive Director of Corporate Services & Commercial (FD.7774/24) and the Chief Legal and Democratic Officer (LD.5874/24) have been consulted and any comments have been incorporated into the report.

### **(B) External Consultations**

Council officers have consulted and engaged a number of partners and stakeholders as part of the re-commissioning process, including children and young people, to inform how Kooth can better promote the service and engage with children and young people. These include:

- Children's Services
- Early Help

# Agenda Item 6

- Sefton CVS, including partners at the Every Child Matters Forum.
- Mersey Care (0-19 Service)

A survey is currently running on Your Sefton, Your Say and is due to complete on the 22<sup>nd</sup> September 2024.

## Implementation Date for the Decision :

Following the expiry of the “call-in” period for the Cabinet decision.

Contact Officer:	George Lock
Telephone Number:	
Email Address:	George.Lock@sefton.gov.uk

## Appendices:

The following appendices are attached to this report: Health Equity Assessment Tool

# Appendix B



Public Health  
England

Protecting and improving the nation's health

## Health Equity Assessment Tool (HEAT):

Full version

# Agenda Item 6

PHE Health Equity Assessment Tool (HEAT)

## About Public Health England

Public Health England exists to protect and improve the nation's health and wellbeing, and reduce health inequalities. We do this through world-leading science, research, knowledge and intelligence, advocacy, partnerships and the delivery of specialist public health services. We are an executive agency of the Department of Health and Social Care, and a distinct delivery organisation with operational autonomy. We provide government, local government, the NHS, Parliament, industry and the public with evidence-based professional, scientific and delivery expertise and support.

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Wellington House  
133-155 Waterloo Road  
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[www.gov.uk/phe](http://www.gov.uk/phe)

Twitter: [@PHE\\_uk](https://twitter.com/PHE_uk)

Facebook: [www.facebook.com/PublicHealthEngland](https://www.facebook.com/PublicHealthEngland)

Prepared by: Lina Toleikyte, Public Health Manager, National Health Inequalities Team  
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gateway number: GW-1167

Sustainable Development Goals



## What is HEAT?

HEAT is a tool consisting of a series of questions and prompts, which are designed to help you systematically assess health inequalities related to your work programme and identify what you can do to help reduce inequalities. It will also help you to consider the requirements of the Equality Act 2010.

## When and why should I use it?

HEAT has similarities to other health equity assessment tools, but is unique in providing a lightweight yet still systematic framework for assessing and driving action on health inequalities.

It provides an easy-to-follow template which can be applied flexibly to suit your work programme. Its specific prompts ensure consideration of multiple dimensions of health inequalities.

## How is it structured?

The tool has 4 stages:

1. Prepare
2. Assess
3. Refine and Apply
4. Review.

It is designed to be completed at the start of a work plan to help you consider its potential effects, but it can be used retrospectively. In practice, your assessment is likely to be iterative and will help you continuously improve the contribution of your work to reducing health inequalities.

Because tackling health inequalities at scale is likely to require 'buy-in' from senior leaders in your organisation or the system you work in, we recommend that the use of the HEAT process is sponsored by a senior leader.

## What should be considered when completing it?

There are a number of different dimensions or characteristics to consider when completing HEAT.

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PHE Health Equity Assessment Tool (HEAT)

1. The protected characteristics outlined in the Equality Act 2010 are as follows:
  - age
  - sex
  - race
  - religion or belief
  - disability
  - sexual orientation
  - gender reassignment
  - pregnancy and maternity
  - marriage and civil partnership
2. Socio-economic differences by individual socio-economic position. For example, National Statistics Socio-economic Classification, employment status, income, area deprivation.
3. Area variations by deprivation level (Index of Multiple Deprivation), service provision, urban/rural or in general.
4. Vulnerable and Inclusion Health groups, for example people experiencing homelessness, people in prison, or young people leaving care.

## What should be considered when completing it?

Health inequalities are unjust differences in health and wellbeing between different groups of people (communities) which are systematic and avoidable. Health inequalities in England exist across a range of dimensions or characteristics, including the nine protected characteristics of the Equality Act 2010, socio-economic status, geographic deprivation, or being part of a vulnerable or Inclusion Health group.

Health inequalities may be driven by:

- 1 Different experiences and distribution of the wider determinants of health or structural factors. For example, the environment, community life, income or housing. In other words, the social economic and environmental conditions in which people live, work and play.
- 2 Different exposure to social, economic and environmental stressors and adversities. These affect states of mind from an early age and throughout life. Stress and psychological wellbeing directly affect resilience, health conditions and health behaviours.
- 3 Differences in health behaviours or other risk factors between groups, for example smoking, diet, and physical activity levels have different social distributions. Health behaviours may be influenced by wider determinants of health, like income.
- 4 Unequal access to or experience of health and other services between social groups.

PHE Health Equity Assessment Tool (HEAT)

People who share protected characteristics, as defined in the Equality Act 2010, may experience poorer health outcomes as a direct result of discrimination or due to different experiences of the factors described above.

## The tool

Programme or project being assessed	Sefton Kooth Procurement 2024
Date completed	
Contact person (name, Directorate, email, phone)	
Name of strategic leader	George Lock

Steps to take	Your response – remember to consider multiple dimensions of inequalities, including protected characteristics and socio-economic differences
<b>A. Prepare – agree the scope of work and assemble the information you need</b>	
<p><b>1. Your programme of work</b></p> <p>What are the main aims of your work?</p> <p>How do you expect your work to reduce health inequalities?</p>	<p>The impact of unidentified and untreated mental health disorders can cause significant health impacts across the life course; early intervention could prevent problems escalating and have major societal benefits. Evidence also shows that some young people turn to risk-taking behaviours as a way of coping with life pressures and adversities, which in turn can increase the risk of poor mental health and lead to life-long consequences. Mental health problems are strongly associated with behaviours that pose a risk to health, such as smoking, drug and alcohol use and risky sexual behaviour<sup>7</sup>.</p> <p>Counselling is a recognised psychological therapy that is often provided to those experiencing mental health problems and there is a wide body of evidence on the effectiveness of psychological therapies for a range of</p>

<sup>7</sup> "Future in Mind". Department of Health. (2015).

	<p>mental health disorders. It can help young people due to its non-confrontational and facilitative approach and working with an individual who enables them to explore and establish personal values and goals is a valued and trusted approach by young people.</p> <p>Studies show that young people value the anonymity and confidentiality afforded by online counselling<sup>8</sup> and are more likely to open up online<sup>9</sup>. Young people have also been found to appreciate the control they have over the online interface, such as the ability to log-off or to delete a draft response<sup>10</sup>. The accessibility of online services outside of the working day was also seen as beneficial<sup>11</sup>. A key feature of on-line support schemes is that they offer a degree of anonymity to participants. On-line projects usually involve monitoring or moderating by teachers or professionals, either to deal with referrals, ensure anonymity is maintained, or deal with more serious cases<sup>12</sup>.</p> <p>The aim of Sefton Kooth is to:</p> <ol style="list-style-type: none"> <li>1. Provide an early response to - and identification of - emotional wellbeing and mental health problems, leading to improved well-being, prevention of symptom escalation and provision of the right care at the right time</li> <li>2. Encourage the use of self-care tools and resources intended to build resilience and self-help</li> <li>3. Remove barriers for more vulnerable/disadvantaged/harder-to-reach individuals</li> <li>4. Promote and improve integrated partnership and collaborative care across agencies, to reduce the demand on specialist services, particularly CAMHS, social care and Access Sefton/ Improving Access to Psychological Therapies (IAPT)</li> </ol>
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<sup>8</sup> Bambling, M., King, R., Reid, W., and Wegner, K. (2008). Online counselling: The experience of counsellors providing synchronous single-session counselling to young people. *Counselling and Psychotherapy Research*, 8, 110–116. <http://doi.org/10.1080/14733140802055011> Evans S. (2014) The challenge and potential of the digital age: young people and the internet. *Transac Analysis* 44(2) 153-166, doi:10.1177/0362153714545312 A Thematic Analysis of Preferences of Young People using Online Support to Discuss Suicide Ideation - UK © 2013 Sally Evans

<sup>9</sup> Fletcher-Tomenius, L. and Vossler, A. (2009). Trust in Online Therapeutic Relationships: The Therapist’s Experience. *Counselling Psychology Review*, 24(2) pp. 24–34.

<sup>10</sup> King, R. et al (2006)'Online counselling: The motives and experiences of young people who choose the Internet instead of face-to-face or telephone counselling', *Counselling and Psychotherapy Research*, 6:3,169 — 174. DOI: 10.1080/14733140600848179 URL: <http://dx.doi.org/10.1080/14733140600848179> Fletcher-Tomenius, L. and Vossler, A. (2009). Trust in Online Therapeutic Relationships: The Therapist’s Experience. *Counselling Psychology Review*, 24(2) pp. 24–34

<sup>11</sup> Malik S, Coulson NS. The therapeutic potential of the internet: exploring self-help processes in an internet forum for young people with inflammatory bowel disease. *Gastroenterol Nurs* 2011;34(6):439-448. [doi: 10.1097/SGA.0b013e318237a9ba] [Medline: 22129797]

<sup>12</sup> [https://assets.publishing.service.gov.uk/media/5a820b3d40f0b62305b922c5/Children\\_and\\_young\\_people\\_s\\_mental\\_health\\_peer\\_support.pdf](https://assets.publishing.service.gov.uk/media/5a820b3d40f0b62305b922c5/Children_and_young_people_s_mental_health_peer_support.pdf)

	<ol style="list-style-type: none"> <li>5. Improve the knowledge and capacity of schools, employers, community and voluntary groups to identify and address emotional wellbeing and mental health problems through good engagement and promoting a whole-system approach.</li> <li>6. Provide a platform for users to gain peer to peer support through forums, ensuring moderation for safeguarding.</li> </ol>
<p><b>2. Data and evidence</b></p> <p>What are the key sources of data, indicators, and evidence that allow you to identify HI in your topic?</p> <ul style="list-style-type: none"> <li>● Consider nationally available data such as health profiles and RightCare</li> <li>● Consider local data such as that available in JSNA, contract performance data, and qualitative data from local research</li> </ul>	<p>Example sources of data include, but are not limited to those listed below:</p> <ul style="list-style-type: none"> <li>● <a href="https://fingertips.phe.org.uk/profile-group/mental-health/profile/cypmh">https://fingertips.phe.org.uk/profile-group/mental-health/profile/cypmh</a></li> <li>● <a href="https://www.sefton.gov.uk/media/4887/mh-and-emotional-wb-strategic-assesment.pdf">https://www.sefton.gov.uk/media/4887/mh-and-emotional-wb-strategic-assesment.pdf</a></li> <li>● <a href="https://www.sefton.gov.uk/media/6082/childhood-poverty-strategy.pdf">https://www.sefton.gov.uk/media/6082/childhood-poverty-strategy.pdf</a></li> <li>● <a href="https://www.sefton.gov.uk/media/5729/digital-inclusion-strategy-2022.pdf">https://www.sefton.gov.uk/media/5729/digital-inclusion-strategy-2022.pdf</a></li> <li>● <a href="https://www.sefton.gov.uk/media/4571/childrenyoung-peoples-plan-2025.pdf">https://www.sefton.gov.uk/media/4571/childrenyoung-peoples-plan-2025.pdf</a></li> <li>● <a href="https://www.sefton.gov.uk/media/4575/emotional-wellbeing-strategy-2021-2026-85.pdf">https://www.sefton.gov.uk/media/4575/emotional-wellbeing-strategy-2021-2026-85.pdf</a></li> </ul> <p><b>Kooth Additional Information</b></p> <p>Hospital Admissions for Mental Health Conditions are higher than national averages at 97.5 per 100,000 in 2016/17 in Sefton. 1 in 10 Children are affected by Mental Health Problems.( Sefton Children's and Young People Plan). Self harm rates are higher than the national averages, with 512.6 per 100,000 between the age of 10-14 admitted to hospital as a result of self harm. ( Fingertips data 2022/23), which correlates with Self Harm being one of the highest presenting issues when Service users are accessing Kooth.</p> <p>We also collect and utilise data from Kooth service users based on demographics, access and activity within the platform. We track trends across all contracts (~90 CYP contracts) to understand behaviours associated with health inequalities; we run an annual user and stakeholder survey, as well as ad hoc surveys alongside our standard data collection at registration and based on usage</p>

	<p>Findings from our most <a href="#">recent user and stakeholder survey</a> highlight both the support that users receive from the service, but also the wide range of routes into Kooth through GPs, schools, Kooth engagement, social media and more. With individuals accessing care from all aspects of the community, we can identify need and respond.</p> <p>Please see attached documents Sefton Insights Report (last 12 months) as an example of healthcare data on service users within Sefton that we collate.</p>
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**B. Assess - examine the evidence and intelligence**

**3. Distribution of health**

Which populations face the biggest health inequalities for your topic, according to the data and evidence above?

[Add in details about our data and make it explicit](#)

**Gender**

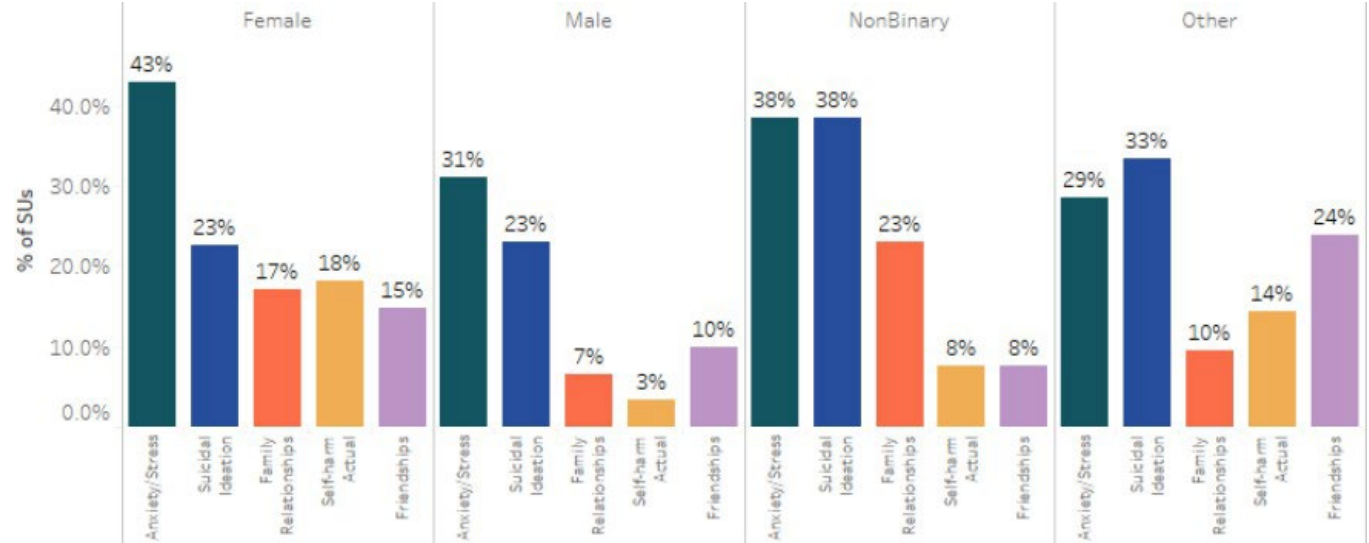
- Overall 14.4% of 11-16 year olds and 16.9% of 17-19 year olds met the criteria for having a mental disorder at the time of the survey. For Sefton that equates to approximately 2,600 and 1,400 children respectively.
- As young people get older, young women are more likely to have a mental health disorder. Rates for young men go up into the mid-teens and then fall slightly. Among boys the likelihood of a disorder was highest at 11-16. Among girls, it was 17-19.
- Nearly 1 in 4 young women aged 17-19 were found to have a mental health disorder, and in the majority of cases this included an emotional disorder. In Sefton this equates to 950 women and 450 men.

Kooth supports individuals in Sefton from age 11 to 25, with content age gated to ensure appropriate access. Over the last 5 years of delivery in Sefton, Kooth has supported 4,703 CYP. At age of registration, demographics were:

	Male	Female	Non-Binary/Gender fluid	Other/ Prefer not to say
11-16	1,224	2,086	109	110
17-19	241	616	26	22
20+	63	193	11	2

The most common presentations by gender are:  
(July 2023 to June 2024)





Based on the *Sefton Mental Health and Emotional Wellbeing Strategic Assessment, 2021*, key areas have been highlighted as risk areas for specific demographics:

**1. Eating disorders**

- a. *The majority of young people with eating disorders are female; there is also evidence that eating disorders are a particular concern for transgender young people.*
- b. **Our approach:** eating disorders are the 11th most common presenting issue for young women, and 7th for non-binary CYP in Sefton. Due to need, our team is trained to support eating disorders, with dedicated training sessions and workshops, along with NICE and BEAT guidance aligned to best practice. We also run national webinars on supporting eating disorders within Eating Disorder Awareness Week, providing information to professionals (such as teachers, healthcare professionals and social workers) and parents who may be supporting CYP impacted by eating disorders.

**2. Suicide**

- a. *Males aged 15–24 are more likely to die by suicide.*

	<p>b. <b>Our approach:</b> whilst not a crisis service, Kooth has stringent safeguarding and clinical governance structure, able to identify and manage risk using Safeguarding Level 4 trainer escalation points, safety plans, and onwards referrals to Crisis services when needed. We recognise the difference between suicidal thoughts and suicidal intent, and our team is trained to handle each case individually through chats. Our robust moderation processes will also flag anything of concern to our team from the community / individual content functions and a team member will always contact the CYP to ensure their safety and wellbeing.</p> <p><b>3. Self harm</b></p> <p>a. <i>High levels of self-harm are evident among girls and young women in particular.</i></p> <p>b. <i>Additionally, <b>the rate of admission to hospital for self-harm in the 10-24 age group is significantly above the national and regional average.</b>- Children and Young People Mental Health and Emotional Wellbeing Strategic Assessment</i></p> <p>c. <b>Our approach:</b> in Sefton, self harm is the 3rd highest presenting issue for girls and young women; when compared nationally, self-harm is the 4th most common presenting issue. Our team is trained to support individuals self-harming, or at risk of self-harm, and will use our safety plans and escalation processes to safeguard as needed. We have a dedicated content collection focused on self-harming, including titles such as:</p> <ul style="list-style-type: none"> <li>■ Self Harm and Distress Tolerance</li> <li>■ Self harm and the holidays: how you can help yourself</li> <li>■ Self Harm: Not Just a Teenage Issue</li> <li>■ Getting to Know Your Self Harm</li> <li>■ Let's talk about self harm myths</li> <li>■ Mythbusting: talking about self harm</li> <li>■ Why do people self harm?</li> <li>■ Living with self harm</li> </ul> <p><b>Ethnicity</b></p> <p>Health inequalities driven by ethnicity are a consideration across Sefton; with recent events, we anticipate that this may increase. South Sefton and Southport are the most diverse areas within the contract, including a</p>
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	<p>Portuguese community in Southport. We will continue to utilise our Engagement lead in area to reach out across the population.</p> <p><b>Socio-economic status or deprivation</b></p> <p><i>Almost 1 in 6 (8202) under 16s live in relative poverty. ( Sefton Child Poverty Strategy) Those that live in areas of deprivation are more likely to have poor mental health.</i></p> <p><i>In Sefton approximately 1 in 6 or 2,700 secondary school pupils are in receipt of Free School Meals. The rate is 1 in 5 or 4,400 primary school pupils. (Sefton Mental Health and Emotional Wellbeing Strategic Assessment, 2021)</i></p> <p>Throughout Sefton, we recognise that cost of living has impacted some areas harder than others. Based on deprivation indexes, and our lived experience within the locality, we know that South Sefton is the area within the contract most impacted by this. Seven of Sefton’s LSOAs (3.7%) fall in the most deprived 1% of the country, all of which are in South Sefton. Linacre, Derby, St Oswalds, Litherland, Ford, Church, Netherton and Orrell. (<a href="#">Indices of deprivation Sefton summary</a> 2019). The health inequality for people that live in Bootle, Litherland, Seaforth and Netherton directly correlates with the poorer health they are likely to have in accordance with Marmot’s, Fair Society, Healthy Lives. We would apply proportionate universalism in the engagement process, aiming to improve the mental health of all Sefton children young people but with a greater focus on those facing the greatest need and can allocate greater resources through engagement time in person to allocated greater resource to those greater in need, and avoid simply supporting those who are easiest to support.</p> <p><b>Our approach:</b> our engagement team will, in collaboration with the commissioners, agree priority areas of the contract for in-person engagement. We would recommend focusing on the areas in South Sefton with lower socio-economic status, and with higher levels of poverty are prioritised, whilst ensuring access to Kooth in Sefton is promoted across the whole CYP population in Sefton as a universal service. A holistic approach would be taken to ensure that the engagement works in a variety of settings and takes into account the high number of pupils with school based avoidance behaviours, low attendance at school or college and also those in the cohort that do not traditionally reach out for support through the local health care system. and would focus on engaging with schools, GPs and community groups. Previously, we have engaged with the following</p>
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	<p>within known areas of increased poverty, and we would maintain relationships there with additional sessions with both CYP and referrers.</p> <p>Our engagement work is supported by a number of the engagement team with extensive experience of engaging with service users and stakeholders to embed Kooth where the need is greatest.</p> <p>Engagement undertaken in the boroughs most deprived wards in South Sefton have centred around community events and partnerships including building relationships with 0-19 team, working closely with the Happy and Healthy Team and delivering at events at schools including Hillside High School and Bedford Primary school.</p> <p>Kooth can be accessed on any device, including shared devices without need for a downloaded app. We also partner with schools/libraries/community centres to create 'Kooth Booths'. These are calming spaces that contain a computer with access to our platform. Schools can also create a direct link from their home pages to Kooth for students to find immediate support through school or personal devices. All logins time-out after 15 minutes of inactivity to maintain security on shared computers.</p> <p><b>LGBTQIA+</b></p> <p>Individuals within this community are at higher risk of self-harm and suicide. Our approach to supporting these presenting issues is detailed above. Additionally for our LGBTQIA+ community, we provide specific content generating 602 views for LGBTQIA related forums and 94 views for related articles in Sefton in the last 2 years. We have over 80 content pieces including podcasts focused on gender, sexuality, gender identity and LGBTQIA+ issues, and a vibrant LGBTQIA staff diversity group within Kooth supporting content, policies and approaches, ensuring we merge clinical best practice with lived experience. Our support is accessible and stigma free; over 10% of registrations in the last 12 months identified as non-binary or a gender other than male or female.</p>
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	<p>We commit to supporting vulnerable groups, including:</p> <ul style="list-style-type: none"> <li>● people experiencing homelessness</li> <li>● prison leavers</li> <li>● young people leaving care</li> <li>● young carers</li> </ul> <p>We know that each vulnerable group will have different requirements, and we have various content collections with information tailored to their needs, including lived experience articles, tips and hints. We also run community forums, with 3 moderators, where individuals can be a part of the community and receive peer support.</p> <p>In another contract, we have co-created a pilot prison outreach programme, led by a local corrections officer. Kooth is available on prison computers to support the wellbeing of inmates. Through this service, Kooth has worked with 42 prisoners since July 2023, delivering 107 sessions of professional support. The programme is aimed at rehabilitation of prisoners into productive members of society. A similar project could be implemented in Sefton should it be of interest.</p> <p>We recognise that whilst each group requires tailored support, equitable treatment is of the highest priority. Therefore, all users within Kooth are always fully anonymous to other service users, with any personal identifiable information only visible to Kooth workers to support safeguarding and integration with other services. Sign up to the platform is a simpler registration process which does not require a referral - removing as many barriers as possible to access.</p> <p>Adhering to the Accessible Information Standards and supporting individuals with neurodiversity and additional needs we provide:</p> <ul style="list-style-type: none"> <li>● Information in multiple formats, including audio/easy-read</li> <li>● Podcasts with episodes on specific issues, meditation guides and peer-led episodes</li> </ul> <p>In-building accessibility, Kooth is designed to:</p> <ul style="list-style-type: none"> <li>● Be compatible with screen readers, voice recognition, adjustable font sizes with up to 400% zoom capability</li> <li>● Provide alternative mediums (podcasts/videos)</li> </ul>
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	<ul style="list-style-type: none"> <li>• Be written at an age-appropriate language level</li> <li>• Support Google Translate</li> </ul> <p>Ease of access aligns directly to the ask from CYP in Sefton according to the <i>Sefton Mental Health and Emotional Wellbeing Strategic Assessment, 2021</i> :</p> <p><i>'No barriers, people caring, listening and freedom'</i></p>
<p><b>4. Causes of inequalities</b></p> <p>What does the data and evidence tell you are the potential drivers for these inequalities?</p> <ul style="list-style-type: none"> <li>• Which wider determinants are influential? E.g. income, education, employment, housing, community life, racism and discrimination.</li> <li>• What aspects of mental wellbeing are affected? Consider risk and protective factors.</li> <li>• Which health behaviours play a role?</li> <li>• Does service quality, access and take up increase the chance of</li> </ul>	<p><i>Income , education and employment prospects are key wider determinants that impact young peoples mental well being.</i> Drivers of inequalities in Sefton <a href="#">(from the LGA report this year)</a> include:</p> <ul style="list-style-type: none"> <li>• Lower income families / cost of living impact</li> <li>• Lower education rates in areas such as South Sefton.</li> <li>• Poverty: <i>(one in six children under the age of sixteen live in relative poverty, which has risen by 17.5% over the last 5yrs)</i></li> <li>• Low unemployment rates</li> <li>• Poor housing</li> <li>• Poor health- The inequality in life expectancy at birth for males living in most and least deprived areas is 14.1 years and for females, 12.3 years; these figures rank second largest for females and third largest for males in England. and within Sefton there is a difference of upto 14 years for males living in the most affluent part of the borough ( Formby) compared to those living in Bootle.</li> <li>• Smoking related disease</li> <li>• Diet-related diseases such as obesity, diabetes, cancer, heart disease and tooth decay</li> <li>• Those living in the most deprived areas of Sefton have poorer outcomes across a range of indicators - including Obesity, teenage pregnancy, education attainment and low birth weight</li> </ul> <p>A Sefton priority, from the Childhood Poverty Strategy is: <b><i>Do what we can to reduce the cost of living and to remove financial and other barriers that lower the benefit low income families get from local opportunities and support on offer.</i></b></p> <p>At Kooth, we cannot control the socio-economic bracket that a CYP is in, we cannot control if they are living in poverty, or in poor housing, or if they are impacted by unemployment within their family.</p> <p>We can support equitable access to support, ensuring that a child from a lower income family receives the same support as their peers. Kooth is a 24/7, 365 days a year service, here to support CYP at a time that works</p>

<p>health inequalities in your work area?</p> <p>Which of these can you directly control?</p> <p>Which can you influence?</p> <p>Which are out of your control?</p>	<p>for them - whether that be around school work, shift work or caring responsibilities. Our chat function is supported by trained practitioners, available from 12pm - 10pm Monday- Friday and 6pm-10pm on weekends and bank holidays (including Christmas). As referenced above, we work to ensure that our service has no barriers to access, and is welcoming and safe to all.</p> <p>Our engagement team will work with stakeholders across the community to raise awareness of our service, including working with food banks, community organisations who are in food poverty. Alongside working with organisations such as Sefton@work and job centres to reach those older young people who are unemployed. Our team also run national webinars with themes around Suicide Prevention, Mental Health stigma in minority communities, managing anxiety and stress, male mental health and healthy relationships, exploring stress for students and LGBTQ+ workshops. Training and informations sessions for stakeholders, providing support for our referral partners and providing insights from our clinical, safeguarding and engagement teams.</p> <p>Key to our approach to embedding Kooth within the community is the working with the VCF sector and partnership opportunities linking with Sefton CVS, local community centres including those part of Living Well Sefton partnership, May Logan Centre, Netherton Feel Good Centre, and the Brighter Living Centre Partnership. Other stakeholders include the Family Well Being centres through as key to increasing access to the service and increasing awareness of the service for parents. Delivery to Family Wellbeing centres has been a key focus within engagement at Kooth and a recent presentation delivered to Family Well Being Staff and Early Help worker.</p> <p>We recognise that school avoidance can lead to poor mental health outcomes, and experience supporting CYP back to school. Recently, a Kooth service based on school avoidance was set up in neighbouring St Helens; learnings from our delivery in the North West will be directly relevant to our support in Sefton.</p>
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<p><b>C. Refine and apply – make changes to your work plans that will have the greatest impact</b></p>	
<p><b>5. Potential effects</b></p> <p>In light of the above, how is your work likely to affect</p>	<p>We commit to supporting Sefton to reduce health inequalities through our provision and ongoing development of our service at Kooth. We value co-production throughout our service, utilising CYP and lived experience feedback throughout our design, implementation and delivery. Stigma is still a barrier in seeking help, including</p>

<p>health inequalities? (positively or negatively)</p> <p>Could your work widen inequalities by:</p> <ul style="list-style-type: none"> <li>• requiring self-directed action which is more likely to be done by affluent groups?</li> <li>• not tackling the wider and full spectrum of causes?</li> <li>• not being designed with communities themselves?</li> <li>• relying on professional-led interventions?</li> <li>• not tackling the root causes of health inequalities?</li> </ul>	<p>shame-based issues in some communities. We have specific features designed to support individuals to access Kooth who may be concerned about the stigma:</p> <ul style="list-style-type: none"> <li>• Kooth is 'anonymous-by-default'. Individuals do not need to provide personal identifiable information to join Kooth, and their account does not link to their email address. Anonymity is a powerful disinhibitor, enabling people to be their true self.</li> <li>• You do not need to download an app, or use a specific device to access Kooth. Although smartphone adoption is high, parental controls may prevent children from downloading apps. Kooth works on any browser (pc, tablet, smartphone, library desktop) to tackle this. CYP may be concerned about friends of family discovering they are using a mental health service and the Kooth model means no downloads or awkward "pings" on your phone.</li> </ul> <p>We work nationally and locally via both campaigns and direct education work with stakeholders, carers, parents and CYP, to promote the importance of proactively taking care of your mental health, to counter stigma and support disadvantaged and seldom heard communities. We undertake targeted participation work with specific user groups to understand how our approach and language can further reduce barriers to access - e.g. recent work with black young adults, and the muslim community.</p> <p>Examples of this include:</p> <ul style="list-style-type: none"> <li>• Our co-production work with Blackout UK and Cultures CIC; we engaged service users with lived experience to understand how our service can effectively and appropriately serve men from different ethnic minority backgrounds. The organisations were remunerated for their involvement, whilst individuals participants received certificates and vouchers. Their influence and contribution was showcased when Kooth was shortlisted for the Collective Health Power Alliance Award, work that helped us develop an organisational framework for anti-discrimination.</li> <li>• Kooth Booth's; dedicated physical space and digital resource for young people to access the service. Digital poverty is a barrier that many young people may experience if they have no access to personal devices or an internet connection at home. Young people experiencing digital poverty can still benefit from Kooth as a preferred option if they have the opportunity to use a web enabled device in a safe</li> </ul>
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	<p>place. Schools, colleges and local services are in an ideal position to enhance their own offer by providing a ‘Kooth Booth’ alongside their existing services, and Kooth has worked with a number of institutions to establish space for these including East Lea College, Hampshire; Sheffield College; and Starling CIO, Trafford &amp; Tameside.</p> <ul style="list-style-type: none"> <li>● Kooth and the Trans community; a safe space to engage with gender dysphoria and questioning. The platform contains myriad content that supports this in a safe and moderated manner including “Gender dysphoria and how to cope” or “Supporting someone coming out as non-binary”.</li> </ul> <p>We would seek to take a refreshed approach to <b>ensure we are leaving no-one behind</b> within the new contract. This includes</p> <ul style="list-style-type: none"> <li>● Undertaking a comprehensive gap analysis, working with our data, key stakeholders and partners to identify any specific vulnerable groups: We already work successfully with a broad range of ethnic groups, LGBTQ+ groups and individuals, lower income communities, children of services personnel and people with disabilities.</li> <li>● We will continue to tailor our content to ensure it speaks directly to the concerns and experiences of the targeted vulnerable groups in Sefton</li> </ul> <p><b>Our approach to mental health is based on choice.</b> Our offer and design are user-led and user-centric, from users proposing and voting on preferred content, to targeted workshops with diverse communities. To ensure that our service does not favour those from more affluent backgrounds, we have a range of pathways including:</p> <ol style="list-style-type: none"> <li>1. <b>Self directed care:</b> Service users can read or create age-rated/appropriate articles, listen to podcasts, engage with mini-activities including coping mechanisms, keep a journal and set goals. All journal entries, comments and articles are pre-moderated (fully reviewed for appropriateness by our practitioner/safeguarding team) prior to publication. This allows us to reach out and offer 1:1 support to users whose submissions indicate they are struggling with their mental health and wellbeing, providing the opportunity for early intervention.</li> <li>2. <b>Engaging with our Kooth &amp; Qwell community:</b> Users can access our peer-supported spaces including live forums, discussion boards and peer-created content (pre-moderated by our</li> </ol>
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	<p>practitioner/safeguarding team). This allows users to share their experiences and thoughts in depth with other users, providing validation and the opportunity to support others.</p> <p><b>3. Interacting with a counsellor via our responsive, structured and ongoing pathways:</b> Users have multiple ways to receive professional support. They are able to use asynchronous messaging to receive therapeutic support by exchanging messages with Kooth practitioners. Users also benefit from our drop-in service where CYP can access our practitioners for a single chat session, or “one at a time” single sessions of live text-based chat. Finally they are able to access structured/ongoing support where users can attend pre-booked sessions with a named counsellor, working to achieve goals and work on identified issues over a series of sessions, usually weekly.</p> <p>By providing a range of pathways, we can engage with CYP in different ways. If a user indicates that they are at risk within a comment, journal entry or activity, our moderators flag this to our team, who will then engage with the user through messages or chats; we reach out to them, rather than waiting for them to come to us.</p> <p><b>Ensuring easy access to through outreach:</b> Our dedicated Kooth Engagement Lead, works with schools, colleges, GPs, third sector, local mental health services, faith organisations and community providers, youth groups to promote awareness to CYP, education and provider organisations.</p> <p><b>Removing barriers to access:</b> CYP can access Kooth without a referral and create an account in under a minute. Our model is anonymous, and non-stigmatising. We capture DOB, gender, disability, sexual orientation, race/ethnicity and a postcode as standard, with additional personally identifiable information collected by consent if an onward referral is needed. In response to CYP feedback, users can personalise their avatars and pronouns, supporting feelings of ‘belonging’.</p> <p><b>Ensuring the platform is accessible:</b> Kooth achieved a 96% score for accessibility in our ORCHA review. We comply with Web Content Accessibility guidelines (WCAG) level 2.1 AA, enabling visually impaired CYP to access Kooth using a screen reader, or navigate the site using an assistive input device instead of a mouse. Our platform is inherently accessible for the deaf community as the primary modality is text based. We are working with national partners SignHealth, National Deaf Children’s Society, Sense and National Deaf CAMHS on a</p>
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	<p>provider collaborative bid to NHSE for a dedicated national mental health prevention service for deaf children, and incorporating insights from these organisations into our standard delivery.</p> <p>Kooth also adheres to the Accessible Information Standards to support individuals with neurodiversity and additional needs, providing:</p> <ul style="list-style-type: none"> <li>● Information in multiple formats, including audio/easy-read</li> <li>● Podcasts with episodes on specific issues, meditation guides and peer-led episodes</li> </ul> <p>In-building accessibility, Kooth is designed to:</p> <ul style="list-style-type: none"> <li>● Be compatible with screen readers, voice recognition, adjustable font sizes with up to 400% zoom capability</li> <li>● Provide alternative mediums (podcasts/videos)</li> <li>● Be written at an age-appropriate language level</li> <li>● Support Google Translate</li> </ul> <p><b>Supporting English as a second language:</b> Kooth is written for a low reading age and to accommodate CYP with little English ability. This supports use of in-browser automatic translation options to enable translation into any language. All practitioners complete specific training: “Wellbeing for children with English as an Additional Language”.</p>
<p><b>6. Action plan</b></p> <p>What specific actions can your work programme or project take to maximise the potential for positive impacts and/or to mitigate the negative impacts on health inequalities?</p> <ul style="list-style-type: none"> <li>● How can you act on the specific causes of inequalities identified above?</li> </ul>	<p>Kooth delivery will support CYP from all parts of the community, including reaching out to those who are impacted by health inequalities. Our support is twofold:</p> <ol style="list-style-type: none"> <li>1. <b>Reaching everyone:</b> through our engagement team embedded in the community, our wider engagement team supporting key stakeholders and bringing learnings from across the country to reach seldom heard groups, and through marketing including social media, we will ensure that we maximise our reach within Sefton. Please see our engagement action plan below.</li> <li>2. <b>Supporting everyone:</b> Kooth is designed as a safe, welcoming and inclusive space for everyone, with specific content tailored to support those impacted by health inequalities. Kooth is based on choice; service users are able to access support in a variety of methods from self-help and community support to async messages and chats with qualified practitioners. Supporting individuals in the way that suits them best increases accessibility and encourages individuals to own their healthcare.</li> </ol>

<ul style="list-style-type: none"> <li>● Could you consider targeting action on populations who face the biggest inequalities?</li> <li>● Could you design the work with communities who face the biggest health inequalities to maximise the chance of it working for them?</li> <li>● Could you seek to increase people’s control over their health and lives (if appropriate)?</li> <li>● Could you use civic, service and community-centred interventions to tackle the problem – to maximise the chance of reaching large populations at scale?</li> <li>● Who else can help?</li> </ul>	<p>By identifying those impacted by health inequalities, we can design specific outreach programmes and also tailor content to their needs - ensuring that our reach and support is accessible and promoted directly to those who traditionally struggle to access services.</p> <p><b>Engagement action plan</b></p> <p>Our engagement approach is a blend of wide reaching activities and targeted activities for specific populations. Our outreach is directed both to CYP who will use the platform, and stakeholders who can signpost CYP to us for support (including healthcare, social care, education, and employment professionals). Our engagement is community centred, to maximise reach, build trust and to support de-stigmatisation of mental health (through any route).</p> <p><b>1. Reaching CYP across Sefton</b></p> <ol style="list-style-type: none"> <li>a. School support through assemblies offered to schools throughout Sefton (priority will be given to schools in areas of higher deprivation, and can be agreed in conjunction with the commissioners)             <ol style="list-style-type: none"> <li>i. Secondary Schools in Sefton are aware of the Kooth offer and are utilising the service. There is a push to make sure that the schools are all accessing assemblies in September, and work with the MHST teams to support this.</li> <li>ii. Primary schools have been particularly engaged with the Kooth offer of support for their Y5 and Y6 classes, and the online safety (social media) session has been really well received by Primary Schools; we will continue to offer this</li> <li>iii. Continued support to School Nurses: we have previously delivered training to all 3 school nurse clusters, with ongoing engagement / provision of resources.</li> <li>iv. Specific assemblies and content has been planned for Anti-Bullying week in October, noting that individuals impacted most by health inequalities are also high risk of bullying</li> </ol> </li> <li>b. Proactive and frequent use of social media effort to normalise MH: Both the kooth_UK handles and individual KEL accounts share various information designed to destigmatise mental health</li> </ol>
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	<p>and help young people feel more comfortable discussing mental health and searching for support.</p> <p>c. Nationally delivered webinars specifically designed for boys and young men’s mental health, supporting mental strength and resilience.</p> <p><b>2. Reaching specific groups within Sefton who are most impacted by health inequalities</b></p> <p>a. Support through food banks: 7 foodbanks have been identified within Sefton through <a href="https://www.sefton.gov.uk/cost-of-living/foodbanks-and-food-pantries/">https://www.sefton.gov.uk/cost-of-living/foodbanks-and-food-pantries/</a> , <a href="https://www.sefton.gov.uk/cost-of-living/food-pantries/">https://www.sefton.gov.uk/cost-of-living/food-pantries/</a> : we will provide these food banks with information to be handed out to all families &amp; young people who use food banks.</p> <p>b. Outreach to the travelling community (Red Rose site in Formby &amp; Irish Community Care)</p> <p>c. Virtual school support (care system support, most vulnerable): Our flexible offer means that we are able to deliver our sessions virtually/through webinars to reach those who may not all be able to attend one specific space. The online support aspect opens up the service to those who may not have access to traditional forms of support, especially those post 18.</p> <p>d. Presentation and engagement with children social work staff and the leaving care team to ensure the offer of support is embedded amongst children and young people who are supported by children social work teams.</p> <p>e. Dedicated engagement with LGBTQIA+ groups, raising awareness linked to New Beginnings youth groups</p> <p>f. Focus on South Sefton as the key priority , embedding with local community partners, area of deprivation- webinars for staff, in person training, linking in with mental health workers from South Sefton PCN. staff training with Health professionals and social care staff.</p> <p><b>3. Reaching stakeholders &amp; referrers to support access</b></p> <p>a. Ongoing engagement with GPs &amp; PCNs as core referral partners: providing teams with key messages to share with patients aiming to help those who face inequalities/ barriers to accessing</p>
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	<p>MH support engage with Kooth. Delivered through outreach/ info sessions, newsletters, physical and digital resources.</p> <ul style="list-style-type: none"> <li>b. Ongoing engagement with CAMHs as a referral partner, to encourage signposting to Kooth for CYP support whilst awaiting CAMHs availability or if they do not meet the CAMHs threshold. We are also able to provide them with digital materials that can be added to the end of any discharge letters.</li> <li>c. To support World Suicide Prevention Day on Tuesday 10th Sep, we're running a national webinar series entitled 'KoothTalks: An exploration of accessible support options for suicide prevention &amp; awareness'.</li> <li>d. We will be presenting of self harm and suicidal ideation data at an upcoming Sefton Suicide Prevention board meeting.</li> <li>e. Parent &amp; Carer networks - (providing anxiety sessions/stalls at community events): Kooth has a strong connection with the Parent/Carer Forum in Sefton. We have attended multiple community events to share support available in the community to their parents. We have also run parent/carer sessions for the forum to provide additional support and information.</li> <li>f. Supported Living Housing Services (SHELTER): engagement with staff as a referral partner, providing training so they can effectively signpost/help young people sign up. We can provide the centres with promotional materials, leaflets and cards to share alongside the digital materials. The services listed below have been commissioned by Sefton Council to deliver an Integrated Homeless Service and are linked to Sefton Mainstay Gateway; these would be prioritised:             <ul style="list-style-type: none"> <li>i. BOSCO Society (Accommodation &amp; support services)</li> <li>ii. Excel Housing (Accommodation &amp; support services)</li> <li>iii. Light for Life (Rough Sleeper service and support services)</li> <li>iv. New Start (Accommodation &amp; support services)</li> </ul> </li> </ul>
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v. Venus Support (Accommodation and Floating Support)

**4. Integrating into the wider health ecosystem:**

a. MHST Support & integration:

i. We are working with Sefton’s MHST team which allows Kooth to be a part of their termly planning meetings to discuss the needs of the schools in their cohort. We are also delivering summer sessions as a MHST/CAMHS/TAS/Kooth unit to deliver workshops to parents.

b. Happy n Healthy Partnership: We are one of the 6 organisations that make up the Happy n Healthy Partnership who are all commissioned by Public Health to provide health interventions and support in Sefton. As a benefit of being part of the partnership is the opportunity for signposting between services and the opportunity to obtain and build awareness with other staff. Successful example of that engagement was the workshop delivered to the sexual health service. This partnership also allows Kooth to be represented by the other 5 services in various situations including, individual projects run by the other Public Health commissioned partners and the general day to day interaction with their service users.

c. New focus on Family Hubs will be a part of the engagement strategy for Sefton, liaising with 12 centres ( including family wellbeing centres) identified to offer training, info sessions and resources.

d. Working with colleagues in a range of council departments to embed the Kooth offer and are currently an active partner in the Team Around the School Model ( TAS)

e. Working with VCF colleagues and embedding into local organisations, we are an active member of the Mental Health in Schools group led by Sharon Cotterill. We will also link into the Every Child Matters forum led by Sefton CVS and seek other opportunities to embed Kooth into wider spaces such as Living Well Sefton who support families and parents and carers who may have children that would benefit from Kooth support.

	<p>f. Physical presence and opportunity to attend in person events and engagement opportunities in key locations in the borough with a focus in the areas in South Sefton will be capitalised on.</p> <p><b>Coproduction</b></p> <p>To engage, reach, learn from and support targeted communities and CYP, we take a proactive, user-led participation approach, and work on national and local programmes alongside charities and service organisations. Our co-production approach is based on the Lundy model of participation adopted internationally.</p> <p>Maintaining clear communication, your dedicated KEL will share co-production updates and feedback service user (SU) experience of Kooth through quarterly reports and performance reviews. These reviews are an opportunity to jointly discuss new engagement strategies and align priorities.</p> <p>We engage with SUs directly to capture feedback and user voice through:</p> <ul style="list-style-type: none"> <li>● We send 1,000s of feedback forms within the digital platform every year</li> <li>● Our annual user survey, piloted in 2023, focuses on what is important to SUs, what they want and how and why they use Kooth. This directed our improvement pipeline prioritisation</li> <li>● Via our engagement team school assemblies</li> </ul> <p>Previous examples of co-production with specific communities include engagement with the Muslim community in North East London through faith groups and GPs, and reaching the Black community through VCSEs such as BlackOutUK. Our engagement team will work with commissioners to understand priority groups for co production.</p> <p><b>Tailored Content</b></p> <p>Engagement with the community and increasing access to our service is critical to supporting those suffering health inequalities; however similarly important is ensuring that our platform speaks to the concerns of those seldom heard groups when they access our support. Our content library is consistently updated with new content, influenced by the activity within the platform and feedback from our engagement team. Recent uploads include collections on financial pressures and the impact of the cost of living crisis and perinatal mental health. Additional collections can be suggested by the commissioner as we work in partnership to meet the needs of all CYP.</p>
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<p><b>7. Evaluation and monitoring</b></p> <p>How will you quantitatively or qualitatively monitor and evaluate the effect of your work on different population groups at risk of health inequalities? What output or process measures could you consider?</p>	<p><b>Our impact</b></p> <p>From an independent review, Kooth has been assessed to drive improvements across nearly all mental health and wellbeing measures after just one month of using Kooth’s web-based platform. These included significant reductions in psychological distress, suicidal ideation, self-harm and loneliness. On average, Kooth users experienced the following meaningful improvements:</p> <ul style="list-style-type: none"> <li>● 20% fewer reports of self-harm</li> <li>● 15% increase in confidence that their hopes can be met</li> <li>● 13% reduction in loneliness</li> <li>● 12% increase in self-esteem</li> <li>● 11% reduction in psychological distress (low mood and anxiety)</li> <li>● 9% reduction in thoughts of suicide</li> <li>● 8% less arguing with parents</li> </ul> <p>We can monitor impact through:</p> <ul style="list-style-type: none"> <li>● Access numbers split by demographic</li> <li>● Activity levels</li> <li>● Community impact measures including our Peer Online Community Evidence Measure</li> <li>● Clinical outcome measures including             <ul style="list-style-type: none"> <li>○ Our Single Session Wants and Needs Outcome Measure (SWAN-OM), validated independently with a highly respected UK research partner CORC (Child Outcomes Research Consortium) and Anna Freud</li> <li>○ Counselling Outcomes Goals System (CoGs) to monitor/score progress towards individualised goals. CoGS is a Goal based Outcome Measure developed by Kooth with the University of Manchester.</li> </ul> </li> <li>● Feedback provided through:             <ul style="list-style-type: none"> <li>○ End of Session questionnaires</li> <li>○ Location specific surveys</li> <li>○ Our Annual User and Stakeholder User Survey</li> <li>○ A feedback function within the platform</li> <li>○ Dedicated complaints feedback</li> <li>○ Via our community-embedded engagement lead</li> </ul> </li> </ul>
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	<p>All data points will be reported to the commissioner within our standard quarterly reports and review meetings process, with qualitative user feedback available within meetings, as part of quality assurance or sent as separate reports.</p> <p>We will also provide Sefton specific data on:</p> <ul style="list-style-type: none"><li>• Signposting &amp; referrals to both local and national organisations</li><li>• Economic impact through our model with YHEC</li><li>• Number and reach of engagement activities into Sefton based on health inequalities identified</li></ul> <p>Beyond this, Kooth operates across 35 ICBs in England, and through this and from over 20 years of delivery, we have extensive data allowing us to provide population level insights, comparisons to other regions, and forecasting. By working at a national level, we are also able to bring insights from other areas to support our approach in Sefton and share best practice.</p>
<p>Set a health equity assessment review date, recommended for between 6 and 12 months from initial completion. Review date: 30/06/2025</p>	

Date of meeting:	03 <sup>rd</sup> October 2024		
Report to:	Cabinet		
Report of:	Executive Director of Children’s Services		
Portfolio:	Cabinet Member – Children, Schools and Families		
Wards affected:	Not applicable		
Is this a key decision:	No Due to the level of expenditure pre-procurement authority needs to be obtained from Cabinet to comply with Contract Procedure Rules.	Included in Forward Plan:	No.
Exempt/confidential report:	No		

## 1. Summary

- 1.1 This report seeks approval to re-procure an existing care and support package for a child for up to a period of 6 months to give time to conduct a procurement to identify longer term care and support. The procurement exercise will call off the Pseudo Dynamic Purchasing System (PDPS) which has been approved for the Liverpool City Region. The current contract expires on the 12th of October 2024.
- 1.2 This report also seeks permission to procure longer term care and support for this child.

## 2. Recommendation(s):

- (1) That the Executive Director of Children’s Services in conjunction with the Cabinet Member for Children, Schools and Families be delegated the authority to conduct a procurement exercise for an individual package of care and enter a contract with the selected provider for a maximum period of 6 months (until the end of the 2023/24 financial year) with an annual value of up to £811,200 whilst longer term arrangements are procured. This care and support arrangement is jointly funded between Sefton Council and NHS Cheshire & Merseyside ICB Sefton Place who will be party to the procurement exercise.
- (2) That any inflation or additional costs relating to the lifetime of the 6-month contract and the longer term 3-year contract which will follow is delegated to the Executive Director of Children’s, Schools and Families in consultation with the Cabinet Member within financial standing order and within the current scheme of

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delegation.

- (3) That the Executive Director of Children's Services in consultation with the Cabinet Member for Children, Schools and Families be granted delegated authority to award the contract resulting from the procurement exercise outlined above and the procurement of the long-term care, with Cheshire & Merseyside ICB party to the decision making relating to this procurement.
- (4) That the Executive Director for Children, Schools and Families in consultation with the Cabinet Member for Children, Schools and Families is delegated authority to enter longer term contracting arrangements of up to 3 years with Cheshire and Merseyside ICB for the care and support for this child. The Executive Director of Adult Social Care and Wellbeing and Cabinet Member for Social Care be consulted in respect of the longer-term arrangements leading to the transition to adult services.
- (5) That the Executive Director for Children, Schools and Families is delegated authority to identify another provider should the care breakdown over the life of this contract.
- (6) It be noted that the Leader of the Council and the Chair of the Overview and Scrutiny Committee (Children's Services and Safeguarding) had given their consent under Rule 46 of the Overview and Scrutiny Procedure Rules for this decision to be treated as urgent and not subject to "call in" on the basis that it would result in the breach of Public Contracts Regulations 2015, as the call-in period would delay the commencement of the re-procurement.

## **3. The Rationale and Evidence for the Recommendations**

- 3.1.1 On the 13<sup>th</sup> of July 2024, a decision was taken to direct award a package of care due to an urgent requirement for a child in Sefton.
- 3.1.2 This report seeks permission to re-procure the package of care and support prior to the expiration of the current contract on the 12th of October 2024. The recommendation is to put in place a contract of up to 6 months whilst longer term care and support is identified which would meet the complex needs of this young person. The exercise would ensure best quality and focus on improving longer term outcomes for the child whilst at the same time, achieving better value and compliant spend in line with The Public Contracts Regulations 2015.
- 3.1.3 The procurement would be in consultation with the Director of Adult Social Care, Health and Wellbeing as the child is within the transition to adulthood process. The Council's Children's and Adult's Social Care Teams will work together to deliver a provider event in October 2024 which will engage several providers in anonymously discussing the child and how they can work with the Council and Services to meet the child's immediate and longer-term needs, and outcomes, which includes education. The Services involved with supporting the child will come together to ensure there is a robust transition plan in place, with an aim to commence the transition by January 2025.

## **4. Reasons for the Recommendation(s):**

The recommended proposal will ensure that:

- (1) The Council carries out its duty in relation to cared for children under the Children Act 1989, to ensure they are safeguarded and welfare promoted.

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- (2) It will allow adequate care support to be in place while an appropriate, longer-term placement is sought, in consultation with Adult Social Care.
- (3) The Council's spend is compliant with the Public Contracts Regulations following the expiration of the current waiver on the 12<sup>th</sup> October 2024.
- (4) The re-procurement activity provides the opportunity to achieve better quality and value through increased competition.

## 5. Financial Implications

The current total weekly cost of the package of care exceeds the delegation of the Executive Director of Children, Families and Schools. The package is currently joint funded by Children's Social Care and Cheshire & Merseyside ICB Sefton Place. The current costs of provision are reflected in the services budget monitoring statement for the year as reported previously to cabinet therefore this does not increase the pressure in the service.

## 6. Legal Implications

- 6.1 As stated in **Reasons for the Recommendation(s): 1 & 3.**

## 7 Risk Implications

- 7.1 Overall, there is low—moderate risk associated with the recommendations within the report however it must be noted that a change to eligibility for contribution from Cheshire and Merseyside ICB who are jointly funding this arrangement may lead to a potential budget pressure within the Council.
- 7.2 There is a risk around the potential transfer of care to a different provider. If the package of care were awarded to a different provider, the social work team and the commissioning team and the quality team involved in the care and support of the child would put a transition plan in place to help mitigate the risk.
- 7.3 There is a risk around the short timescales in which the re-procurement exercise needs to be completed and how this provides limited time for prospective bidders to respond to the invitation to tender. This will be mitigated by immediate engagement with a range of providers suitable to manage the complexity of the arrangement. Cheshire and Merseyside ICB Place Team would be involved in selecting the provider.
- 7.4 A decision to reject the recommendations within the report would cause the Council to be in breach of The Public Contracts Regulations 2015. This would result in current waiver being allowed to expire without re-procurement of the package of care.

## 8 Staffing HR Implications

- 8.1 There are no risks associated to Financial, IT, Staffing and Assets.

## 9 Conclusion

- 9.1 For Cabinet to endorse the recommendations set out in the report, as the decision to reject them would pose financial, reputational and Legal risk.

## 10 Alternative Options Considered and Rejected

- 10.1 **Option 1 – To extend the current waiver.** Extending the current waiver by any more than 2 days would take the contract amount over the threshold and would be in breach of the Contract Procurement Regulations.

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**Equality Implications:**

There are no equality implications.

**Impact on Children and Young People:**

No wider impact on children and young people.

**Climate Emergency Implications:**

The recommendations within this report will have a neutral (or negligible) impact.

As part of the mini-competition, bidders will be expected outline how they will achieve Social Value, which makes of 10% of the scoring, of which the environment and sustainability is evaluated.

**What consultations have taken place on the proposals and when?****(A) Internal Consultations**

The Executive Director of Corporate Services & Commercial (FD.7786/24) and the Chief Legal and Democratic Officer (LD.5886/24) have been consulted and any comments have been incorporated into the report.

The Procurement Team, Legal Services and NHS Sefton Place have been consulted and any comments have been incorporated into the report.

**(B) External Consultations**

Not applicable.

**Implementation Date for the Decision:**

With immediate effect. The Chair of the Overview and Scrutiny Committee (Councillor Hardman) has given approval under Rule 46 of the Overview and Scrutiny Procedure Rules for the 'call-in' period to be waived in respect of the executive decision.

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**Appendices:**

There are no appendices to this report.

### Maritime Corridor Scheme Phase 1 - Receipt of Capital Funding

Date of meeting:	Thursday 3 October 2024 Thursday 14 November 2024		
Report to:	Cabinet Council		
Report of:	Assistant Director Highways and Public Protection		
Portfolio:	Cabinet Member - Housing and Highways		
Wards affected:	Litherland; Molyneux; Netherton and Orrell; St. Oswald;		
Is this a key decision:	Yes	Included in Forward Plan:	Yes
Exempt/confidential report:	No		

#### Summary:

Schemes over £1m in value need Council approval and the necessary funding needs to be included within the Council's Capital Programme. The first Phase of the Maritime Corridor Scheme is expected to cost approximately £12.3m. Subject to approval from the Liverpool City Region Combined Authority, a Grant Funding Agreement will be received for this amount.

#### Recommendation(s):

Cabinet is recommended to:

- (1) Recommend to Council the approval of a supplementary capital estimate for £12.303m externally funded using the Levelling Up Fund and City Region Sustainable Transport Settlement from the Liverpool City Region Combined Authority (LCRCA) for the delivery of Maritime Corridor Phase 1 pending the receipt and sealing of a grant funding agreement from the LCRCA.
- (2) Approve the delivery of the first Phase of the Maritime Corridor Phase 1 scheme.

Council is recommended to:

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- (1) Approve a supplementary capital estimate for £12.303m externally funded using the Levelling Up Fund and City Region Sustainable Transport Settlement from the LCRCA for the delivery of Maritime Corridor Phase 1 pending the receipt and sealing of a grant funding agreement from the LCRCA.

## 1. The Rationale and Evidence for the Recommendations

### Background

- 1.1 In January 2024 Cabinet considered a report seeking approval to the Procurement process of Phase 1 of The Maritime Corridor Scheme. This scheme includes a series of improvements centred around the A5036 and the A59 and the employment land in between. The proposals are intended to reduce congestion, improve safety and provide easier access to employment sites in the south of the borough. In the development of the proposals further consideration was given to how people walking or cycling could better access these sites and hence the scope of the scheme was increased to include active travel improvements.
- 1.2 This earlier report provided an update of the funding and delivery of the scheme. It explained that the Liverpool City Region Combined Authority (LCRCA) had submitted a Funding application to the Department for Levelling Up, Housing & Communities (DLUHC) to secure Levelling Up funding (LUF) for a series of transport related improvements in Liverpool, Wirral and Sefton. As such elements of the Maritime Corridor work were included in the LUF Business Case. This Business Case has now been approved and funding made available to the LCRCA.
- 1.3 In addition, funding has been identified in the City Region Sustainable Transport Settlement (CRSTS) allocation to the LCRCA, from the Department for Transport, for the Maritime Corridor Scheme.
- 1.4 The LUF allocation to the Maritime Corridor Scheme, of £9.5m, needs to be expended before March 2025 to meet the criteria set by government. Similarly, any CRSTS funding needs to be expended by March 2027.
- 1.5 A procurement route has been chosen, and subsequently approved by Cabinet, to give the best chance of meeting the spending target. Balfour Beatty, appointed through the Scape Framework, have entered into a Contract with the Council, to develop the scheme Target Cost and delivery programme based on the design information. In addition, a Social Value Plan is being developed with input from the Neighbourhoods Team. This Contract is for Early Contractor Involvement and is therefore limited in its scope. It does, however, enable the main works contract to be developed and the cost identified.

### Funding and Approvals.

- 1.6 The LCRCA recently undertook a re-baselining process to identify a total allocation to fund the Maritime Corridor scheme within the current CRSTS window, i.e. before March 2027. This amounted to £21.2m made up of Levelling Up Funding and City Region Sustainable Transport Settlement Funding.
- 1.7 To give the best chance of ensuring funding timeframes are met, the scheme has been split into 2 phases. The first phase is focussed on work that doesn't require third party land.



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- 1.8 To secure funding from the LCRCA the Council needs to go through a 'Gateway assessment'. This is a process set up by the LCRCA to ensure that the schemes are delivering the appropriate outputs and that Local Authorities have the processes in place to deliver the projects.
- 1.9 A Gateway 3 application, aimed at securing funds to progress design work, early contractor involvement and other costs, has been successful. A Grant Funding Agreement (GFA) was received for the full amount requested. This was subsequently reviewed and approved in accordance with the delegated authority previously granted by Cabinet.
- 1.10 A Gateway 4 application, aimed at securing the cost of works delivery and associated costs, has been reviewed and accepted by the relevant Panel. A Grant Funding Agreement is now being drawn up for approximately £12.303m.
- 1.11 Cabinet, at its January meeting, gave delegated authority to the Chief Legal and Democratic Officer, following consultation with Cabinet Member, to sign the grant funding agreement for the necessary funding to enable the construction stage of the Maritime Corridor Phase 1 project to be undertaken. The same meeting also approved the delegation of the award of the construction contract to the Assistant Director - Highways & Public Protection, again following consultation with Cabinet Member.
- 1.12 Assuming the GFA is approved, the Council will receive an additional £12.303m. To comply with the Financial Regulations, Council approval is sought to include this additional funding within the Capital Programme.
- 1.13 The scheme was included in the Transport Capital Programme in 2024-25 and the scheme details, phasing and funding have been discussed with Cabinet Member.
- 1.14 The scope of the Phase 1 of the project was determined to ensure that and land required for construction was within Council ownership or Highway land. The three main elements are as follows;
  - Introduction of new cycle route on Netherton on Way linking the A5036 and Bridle Road
  - Modification of the junction of A5058, Netherton Way and Bridle Road incorporating pedestrian and cycle crossings.
  - With agreement with National Highways, introduction of a left turn lane from A5036, Dunnings Bridge Road, into Atlantic Park
- 1.15 The scheme details and associated consultation process were set out in the report to the Council's Licensing and Regulatory Committee in November 2023 (see Background Papers). This recommendations in this report were approved.
- 1.16 It should be noted that negotiations have been in progress with National Highways for some years. They have approved the scheme in principle but are currently going through a formal technical review which will culminate in the issue of a formal agreement to enable the Council to complete works on the trunk road.

## Consultation

- 1.17 The wider scheme has been subject to two public consultation sessions, both completed following consideration from the Councils Public Consultation and Engagement Panel.

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- 1.18 Initial consultation was completed in 2021. This was aimed at informing residents and business of the potential for the delivery of the project as well as providing the opportunity for concerns and comments to be raised to help influence the scheme development.
- 1.19 Following the development of the proposals it was considered sensible to complete some more detailed consultation. This second consultation process was more to inform key stakeholders, those with a land interest and the general public about the design of the scheme and its objectives. Engagement was undertaken to secure comments and feedback to help inform the final detailed design process and the full business case.
- 1.20 This further engagement in 2023 was separated into two stages;
- Stage 1, which began in August 2023, focused on key stakeholders identified by the Council; and those who have an interest in the land on which the scheme will be delivered, either through a freehold, leasehold or statutory undertaking. This list was identified by the Land Referencing Company and confirmed by the Land Agent, commissioned to support the Council on this scheme. In total 65 letters were sent out to a private survey link on Your Sefton Your Say.
  - Stage 2 was the wider public engagement and - ran from September to October. This stage consulted the wider public area including residents, schools, college and businesses. All addresses which were adjacent to the improvements were identified via the Council's internal Mapping system and 608 letters were distributed to these addresses inviting them to complete the consultation. In addition, a Social Media campaign was launched on the Council's platforms as well as Press Release being released onto the Council' website. All Protected Characteristics Groups / organisation and regional / national cycling and walking organisations and charities were also invited directly by email to take part in the survey.
- 1.21 Some feedback on the main issues raised during consultation have been set out in the report to L&R Committee (November 2023) mentioned above. Details of feedback from the consultation process were also considered by Public Consultation and Engagement Panel (June 2024)
- 1.22 Ward Member briefings providing details of the consultation were provided and a number of meetings were held subsequently with Ward members.
- 1.23 Recognising the importance of ensuring that all members are fully briefed on the development of the scheme, its phasing, duration, likely implications during construction and ultimate benefits, including social value, that the scheme will deliver, a further meeting has been held with Ward Members to discuss some specific elements of the scheme. Ward Members will be provided with regular updates during the construction process.

## 2. Financial Implications

The Contract value is still being established through the Early Contractor Involvement stage of the procurement process previously agreed by Cabinet.

It is anticipated that the total scheme costs, which will include the Contract Target Cost, supervision and contract administration costs, statutory undertakers diversion costs and any legal or approval costs, will be approximately £12.303m.

The Grant Funding Agreement from the Liverpool City Region Combined Authority will set out the exact figure and a further supplementary estimate will be submitted for approval as per the Financial Procedure Rules for any variation to the £12.303m identified in this report. This will be received and reviewed prior to the works Contract being signed. It should be noted that Cabinet has previously given delegated authority to the Chief Legal and Democratic Officer, following consultation with Cabinet Member, to sign the grant funding agreement for the necessary funding to enable the construction stage of the Maritime Corridor Phase 1 project to be undertaken.

It should be noted that Cabinet, at its meeting on 4th January approved a supplementary capital estimate of £500k of Development Funding for inclusion within the Transport Capital Programme. This funding is in addition to £12.303m identified in this report.

## 3. Legal Implications

As determined by the Council's Contract Procedure Rules, the contract for the works will need to be sealed.

## 4. Risk Implications

Should Cabinet not recommend the funding for inclusion in the Capital Programme, the contract won't be signed and works not delivered. This will have a negative impact on the Council's reputation and ability to secure further funds from the LCRCA for transport projects.

There is a risk that the Works cost exceed the budget. However, further funding will be secured for Phase 2, so any additional costs over and above the cost plan will be funded from this budget, anticipated to be approved later in 2024. Furthermore a robust costed Risk Register exists to mitigate this risk. This is reviewed on a regular basis.

## 5 Staffing HR Implications

The management of the contract will be overseen by staff in Transportation Planning and Highway Development team. The contract administration and supervision will be undertaken by a team from the existing Transport Technical Services Supply Framework. The intention being that this team will administer and supervise several large capital schemes which are expected for delivery at the same time. The staff costs incurred prior to the award of the Contract will be funded from the Development Funding secured by the Council from the LCRCA which is contained within the Transport Capital Programme. Staff Costs, once the contract for the works is awarded, will be funded from the capital funding secured for the construction

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## 6 Conclusion

By approving the recommendations the Council is able to include the funding in the Capital Programme and let the Contract for the delivery of the Maritime Corridor Phase 1 Works.

### Alternative Options Considered and Rejected

No alternative options have been considered

#### Equality Implications:

The equality Implications have been identified and mitigated.

#### Impact on Children and Young People:

The Impact of the scheme cared for children and care experienced young people was considered as part of the Equality Impact Assessment. Options for positive impacts will be considered in the development of the Social Value commitments that the Contractor will be expected to provide.

#### Climate Emergency Implications:

The recommendations within this report will have a Neutral impact.

The construction process will have negative impact in that new materials will be used and there will be a net carbon increase. There will also be a negative impact on traffic movements on the impacted streets whilst works are ongoing. However, the scheme when implemented, will improve accessibility and should encourage people to walk, cycle or use public transport. This should reduce the carbon impact. The scheme is one of a number of schemes currently subject to a Whole Life Carbon Assessment which will be able to provide a definitive picture.

### What consultations have taken place on the proposals and when?

#### (A) Internal Consultations

The Executive Director of Corporate Services & Commercial (FD.7779/24) and the Chief Legal and Democratic Officer (LD.5879/24) have been consulted and any comments have been incorporated into the report.

#### (B) External Consultations

Consultation on the highway proposals formed part of the wider consultation on The Maritime Corridor. This consultation was completePage 76 dance with the proposals approved by the

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Public Consultation and Engagement Panel in April 2021. Further detailed engagement with Ward Members, key stakeholders, residents and business has recently been completed in September and October 2023 and results appraised. Comments relating to the Phase 1 proposals were summarised in the recent report to Licensing and Regulatory Committee (Nov 23).

Recognising the importance of ensuring that all members are fully briefed on the development of the scheme, its phasing, duration, likely implications during construction and ultimate benefits, including social value, that the scheme will deliver, a further meeting has been held with Ward Members and some minor changes to the scope of the works completed.

## Implementation Date for the Decision

Immediately following the Council meeting.

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## Appendices:

None

## Background Papers:

Report to Licensing and Regulatory Committee – 6 November 2023

Report to Cabinet – Procurement Strategy for Maritime Corridor Scheme – Phase 1 – 4 January 2024

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**Member  
Responsible for  
Housing  
Complaints**

Date of meeting:	Thursday 3 October 2024
Report to:	Cabinet
Report of:	Assistant Director Regeneration, Economy and Assets (Economic Growth and Housing)
Portfolio:	Cabinet Member – Housing and Highways
Wards affected:	All
Included in Forward Plan:	Yes
Is this a key decision:	Yes
Exempt/confidential report:	No

**Summary:**

This report explains the requirement for the Council to appoint a Member Responsible for Complaints for its council housing landlord services in order to comply with the Housing Ombudsman Service (HOS) statutory Complaint Handling Code (the Code).

The report further seeks to identify the role of the Member Responsible for Complaints within the Council and provide an update to the Council’s Housing Advisory Board as previously reported to Cabinet.

**Recommendation(s):**

Cabinet is asked to:

- (1) Agree the appointment of the Cabinet Member for Housing and Highways to the role of Member Responsible for Complaints as required by the Housing Ombudsman Service in compliance with the statutory Complaint Handling Code.
- (2) Note the Membership for the Housing Advisory Board and the proposal to create the Shadow board in October/November 2024 subject to diary availability.

**1. The Rationale and Evidence for the Recommendations**

**Introduction/Background**

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- 1.1 The Social Housing (Regulation) Act 2023 (the Act) received royal assent in July 2023 providing the legislative basis to introduce a number of key social housing reforms largely brought forward following the tragic events at Grenfell Tower. Events at Grenfell Tower saw serious issues on the safety and quality of social housing identified as well as the way in which social housing tenants are treated by their landlord. Many of the provisions are not yet in force and are subject to further regulations made by the Secretary of State, however some measures within the Act have been introduced such as a new set of consumer standards implemented by the Regulator of Social Housing (RSH).
- 1.2 The law brings forward some ground-breaking changes including:
- Strengthening the RSH to carry out regular inspections of the largest social housing providers and the power to issue unlimited fines to social landlords.
  - Enhancing the RSH's role in regulating the consumer standards.
  - Additional Housing Ombudsman powers to publish best practice guidance to landlords following investigations into tenant complaints.
  - Powers to set strict time limits for social landlords to address hazards such as damp and mould.
  - New qualification requirements for social housing managers.
  - Introducing stronger economic powers to follow inappropriate money transactions outside of the sector.

## **Housing Ombudsman Complaint Handling Code**

- 1.3 In April 2024, the Housing Ombudsman Complaint Handling Code became statutory. All social housing providers are mandatory members of the Housing Ombudsman Scheme meaning that the Council will need to comply with the Code once it becomes a landlord. Key areas of the Code include:
- Universal definition of complaint.
  - Providing easy access to the complaints procedure and ensuring residents are aware of it, including their right to access the Housing Ombudsman Service.
  - The structure of the complaint's procedure – only 2 stages necessary and clear times set out for responses.
  - Ensuring fairness in complaint handling with a resident-focused process.
  - Taking action to get things right and appropriate remedies.
  - Creating a positive complaint handling culture through continuous learning and improvement.
  - Demonstrating learning in annual reports.
  - Annual self-assessment against the Code.
- 1.4 The Housing Ombudsman has a legal duty to monitor landlord compliance against the Code irrespective of whether it receives individual complaints from residents. This means that landlords will need to self-assess against the Code and submit an annual self-assessment to the Ombudsman irrespective of the number of homes that it owns, and which will be aligned to the RSH requirements to publish Tenant Satisfaction Measure outcomes as part of the regulatory standards.
- 1.5 The current membership fee for 2024-25 is £8.03 per unit payable annually to the Housing Ombudsman.
- 1.6 The Code requires landlords to have a Member Responsible for Complaints on their governing body to provide assurance to the governing body on the effectiveness of its complaints system, including challenging the data and information provided. The expectation is that the Member Responsible for Complaints is responsible for ensuring that



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complaint handling drives service improvement for residents and learning and business improvement for the organisation.

- 1.7 The role of the Member Responsible for Complaints is to champion a positive complaint handling culture and build effective relationships with complaints teams, residents, audit and risk committees as well as wider teams and the HOS. The Housing Ombudsman has set out clear expectations for the role and this is appended at Appendix 1.
- 1.8 The Housing Ombudsman informs that the Member Responsible for Complaints for Local Authorities is a lead member or Councillor who has oversight in the Cabinet for housing. For Sefton, this would mean the Cabinet Member for Housing and Highways. Officers will further work with the Cabinet Member to provide support with this role including the identification of suitable resources, training and/or events.

## **Housing Advisory Board**

- 1.9 Details of the Housing Advisory Board were presented to Cabinet on 4th April 2024, and it was noted that the intention was to create a Shadow Board to be in place circa. 6 months prior to the onboarding of properties at Buckley Hill Lane which would then transition into the Housing Advisory Board once the properties were taken into management.
- 1.10 The Housing Advisory Board will support Cabinet in the oversight of the Council's housing management service to tenants will provide additional governance to enable oversight and accountability in light of legislative and regulatory requirements with key officers and Members in place. The role of the Board will include to:
  - Review the Business Plan
  - Review capital and revenue budgets
  - Prepare, discuss and review draft reports on key decisions informing recommendations to Cabinet / Council
  - Review high-level performance statistics
  - Consult and review policy changes
  - Consult on Regulatory / Legislative draft consultation responses
  - Review and monitoring of risk
- 1.11 The properties at Buckley Hill Lane are forecast for handover March 2025. With this in mind, it is anticipated that a meeting will be scheduled for October/November 2024 subject to diary availability to convene the Shadow Housing Advisory Board. Draft Terms of Reference will be developed as the Board is created.

## Membership

- 1.12 This report asks Cabinet to note appointment to the following Members of the Housing Advisory Board:
  - a) Two Councillor representatives:
    - Cabinet Member for Housing and Highways (Council Housing Advisory Board Chair and Member Responsible for Complaints),
    - Cabinet Member for Corporate Services.
  - b) Senior Officers for the Council:
    - Executive Director - Regeneration, Economy and Assets (Health and Safety Lead),
    - Housing Strategy and Investment Service Manager,
    - Strategic Housing Officer,
    - Finance Representative (to be confirmed).

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- 1.13 The Housing Advisory Board will oversee the delivery of the housing management and maintenance service to ensure it is being delivered in line with legal and regulatory requirements, a representative of the appointed housing management agent will therefore be invited to attend Housing Advisory Board meetings where appropriate and relevant.
- 1.14 It is the intention for a representative from Sandway Homes to attend the Shadow Housing Advisory Board in advance of the homes at Buckley Hill Lane being handed over to the Council. Their role will be as attendance only and will be beneficial in preparing for the onboarding of the properties once practically complete. Sandway will not formally be members of the full Housing Advisory Board, however there may be occasions where it is agreed that their attendance would be beneficial dependent on agenda items to be discussed as may be the case for other relevant attendees.
- 1.15 As the April 2024 Cabinet report noted, the composition of the Housing Advisory Board will be kept under review, including the future opportunity for tenant representation. Many Local Authority Boards whether decision making or non-decision making include tenant representation and this is the same for housing association boards.
- 1.16 As the Housing Advisory Board becomes operational and embedded as part of the Council Housing Programme governance structure, appropriate training opportunities will be reviewed and identified as necessary.

## 2. Financial Implications

- 2.1 There are no direct financial implications that will arise following the approval of recommendations within this report. There are however financial implications linked to the delivery of council housing and the ongoing management and maintenance of homes. These would be subject to a separate decision.

## 3. Legal Implications

- 3.1 In becoming a landlord of social housing, the Council is required to comply with all relevant legislation in managing and maintaining its homes. As a Local Authority Registered Provider, the Council will be regulated by the RSH and required to comply with the standards set for local authorities and well as complying with the statutory Complaint Handling Code published by the HOS.

## 4. Corporate Risk Implications

- 4.1 The key risk implications are detailed in the table below:

Risk	Result	Mitigating Actions
Failure to appoint a Member Responsible for Complaints.	Non-compliance with the statutory Complaint Handling Code.  Potential action taken by the Housing Ombudsman and Regulator of Social Housing if this impacts the quality of landlord complaint handling.	Appoint Member Responsible for Complaints in advance of the Council acquiring its first homes.
Failure for the Member Responsible for Complaints to discharge their duty in accordance with the Housing Ombudsman's expectations.	Non-compliance with the statutory Complaint Handling Code.  Potential action taken by the Ombudsman	Identify and provide training and support for the Member appointed.

	and Regulator of Social Housing if this impacts the quality of landlord complaint handling.	
Failure to appoint Members to the Housing Advisory Board.	Strengthened governance arrangements are not in place ready for handover of the Council's first homes.	Seek authority to approve board members and convene a shadow housing advisory board at the earliest opportunity and in advance of handover of the Council's first homes.

## 5 Staffing HR Implications

5.1 There will be a staffing requirement to the management of the Housing Advisory Board which will be met within the Housing and Investment Service. The cost of ongoing management and maintenance of the housing stock will be met from rental income from tenants.

## 6 Conclusion

- 6.1 Officers are continuing work up the operational requirements for the Council Housing Programme and this will progress with the appointed housing management agent in place.
- 6.2 In accordance with the HOS the Member Responsible for Complaints is recommended to be the Cabinet Member for Housing and Highways.
- 6.3 Creation of the Shadow and later full Housing Advisory Board will provide added governance and oversight to the management of the Council's homes which will further develop as the Council Housing Programme grows. Training opportunities will be explored and identified where relevant for Housing Advisory Board Members as well as any Members and/or officers with specific identified roles such as those within this report.

## Alternative Options Considered and Rejected

If the Council does not identify a Member Responsible for Complaints, it will be non-compliant with the statutory Complaint Handling Code published by the Housing Ombudsman. Alternatively, the Council could identify a Member who is not the Cabinet Member for Housing and Highways, however this would not align with guidance from the HOS which advises the role for Local Authorities should be a lead member or a Councillor who has oversight in the cabinet for housing.

### Equality Implications:

An Equality Impact Assessment has been undertaken and no negative impacts have been identified. The EIA found that the provision of council housing and subsequent landlord service will have a positive impact on the protected characteristics of age and disability. The EIA will be reviewed and updated at the relevant review point and as work continues with the operational requirements to enable the Council to provide council housing.

### Impact on Children and Young People:

New council housing will provide safe, secure, quality homes to those most in housing need, including for young people, children and their families showing the Council's continuing support.

### Climate Emergency Implications:

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The recommendations within this report will have a Neutral impact.

There are no direct climate emergency implications as a result of the recommendations of this report.

## What consultations have taken place on the proposals and when?

### (A) Internal Consultations

The Executive Director of Corporate Resources and Customer Services (FD.7764/24) and the Chief Legal and Democratic Officer (LD.5864/24) have been consulted and any comments have been incorporated into the report.

### (B) External Consultations

Not applicable.

### Implementation Date for the Decision :

Following the expiry of the “call-in” period for the Cabinet / Council decision.

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### Appendices:

The following appendices are attached to this report:

Appendix 1 – Member Responsible for Complaints Role Expectations.

### Background Papers:

Cabinet Report: [Report to: \(sefton.gov.uk\)](#)

The Housing Ombudsman Service Complaint Handling Code is available here:

<https://www.housing-ombudsman.org.uk/landlords-info/complaint-handling-code/the-code-2024/>.

## Expectations for the Member Responsible for Complaints Role

### Purpose

The statutory Complaint Handling Code requires landlords to have a Member Responsible for Complaints on their governing body.

The role is to champion a positive complaint handling culture. To provide assurance to the governing body on the efficacy of its complaints system, including challenging the data and information provided to the Board. To seek assurances from the complaints team and where appropriate the operational teams that complaints are being managed, change is happening and that residents are being heard through the process. To ensure complaint handling promotes service improvement for residents and learning and business improvement for the organisation.

### Responsibilities – Governing Body Assurance

1. To promote a culture of openness and transparency where complaints made by residents are seen as form of insight into the how the organisation is managed. To provide assurance that systems are in place to capture learning from complaints and that governing bodies are engaged with this. To ensure senior level ownership of learning and accountability stemming from complaints.
2. To provide assurance to the governing body, through engagement with operational teams, that complaints are valued as an opportunity to learn, to give an early warning of ineffective processes, policies, or behaviours, to identify areas for improvement and to improve awareness and accessibility; and how this is happening across the organisation.
3. To engage with the chair of the audit and risk committee, or equivalent, to discuss any risks emerging from complaints and any recommendations for improvement in service areas which may be relevant to internal audit's activities.
4. To engage in, oversee, and ratify the annual self-assessment against the Complaint Handling Code, providing assurance that an accurate self-assessment is produced and published each year. This may include engaging residents in the self-assessment exercise.
5. To alert the governing body of any concerns they have about the handling of complaints, the substantive issues giving rise to complaints, or the outcome of an individual complaint.
6. To ensure the whole governing body understands its responsibilities to deliver a positive complaint handling culture and that complaints are given the status they deserve within the senior leadership's work.

## Responsibilities – Complaint Handling Code

7. To review the communication of the landlord through its complaints to ensure it is empathetic, effective, and appropriate.
8. To gain assurance of the organisation's timely compliance with Housing Ombudsman evidence requirements and orders promoting an organisation wide culture that demonstrates the learning and the changes to services that are provided for residents.
9. To promote a culture where every employee supports effective complaint handling, where complaint handlers have the authority and respect within the organisation to help put things right when they go wrong. This should also extend to where landlords use contractors and other service providers. To have a visible presence that is organisation wide and has access to individual staff members to be able to 'test' that proactive complaint handling is embedded across all staff.
10. To gain assurance following the self-assessment, that the complaints team has the resources available to fulfil its obligations.
11. To receive regular updates on the volume, categories, and outcome of complaints, alongside complaint handling performance and take an inquisitorial approach when reviewing this information. The aim is to ensure that information presented to the governing body, provides sufficient assurance of a well-managed and customer focused complaints handling culture.

## Responsibilities – Learning

12. To commission from the executive a self-assessment against Housing Ombudsman Spotlight reports and future good practice and facilitate a discussion with the governing body on how the organisation can learn and improve from its recommendations. This should include consideration of relevant policies and procedures.
13. To require intelligence provided by the Housing Ombudsman is used to develop and improve services, gaining assurance that recommendations are actioned and, where necessary, reviewing policies, procedures and approaches to service delivery following Ombudsman reports.
14. To encourage a culture of effective cross-organisational and cross-department learning where operational teams collaborate with each other to produce improved service delivery.
15. To encourage a culture where senior management regularly review issues and trends arising from complaint handling with themes or trends being assessed and reported to the governing body, which identify potential systemic issues, serious risks or policies and procedures that require revision. To gain assurance that where revision or change is required, this is followed through and

communicated to the governing body and that residents are central to any change.

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### Financial Management 2024/25 to 2027/28 - Revenue and Capital Budget Update 2024/25 – October Update

Date of meeting:	3rd October 2024
Report to:	Cabinet
Report of:	Executive Director – Corporate Services and Commercial
Portfolio:	Corporate Services
Wards affected:	All
Included in Forward Plan:	Yes
Is this a key decision:	Yes
Exempt/confidential report:	No

#### Summary:

To inform **Cabinet** of:

- 1) The current position relating to the 2024/25 revenue budget.
- 2) The progress made on transformation within Sefton New Directions.
- 3) The current forecast on Council Tax and Business Rates collection for 2024/25.
- 4) The monitoring position of the Council's capital programme to the end of August 2024:
  - The forecast expenditure to year end.
  - Variations against the approved budgets and an explanation of those variations for consideration by Members.
  - Updates to spending profiles and proposed amendments to capital budgets necessary to ensure the efficient delivery of capital projects.

#### Recommendation(s):

**Cabinet** is recommended to: -

#### Revenue Outturn

- 1) Note the current position relating to the 2024/25 revenue budget.
- 2) Note the actions being taken to refine forecasts and identify mitigating efficiencies to ensure each service achieves a balanced position.
- 3) Recognise the financial risks associated with the delivery of the 2024/25 revenue budget and acknowledge that the forecast outturn position will continue to be

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reviewed, and remedial actions put in place, to ensure a balanced forecast outturn position and financial sustainability can be achieved.

## **Sefton New Directions**

- 4) Note the progress made on transformation within Sefton New Directions, that a detailed report will be provided to it as shareholder at the November meeting outlining how a sustainable budget will be set for 2025/26 and how this will enable financial sustainability in the long term.

## **Capital Programme**

- 5) Note the spending profiles across financial years for the approved capital programme (paragraph 8.1).
- 6) Note the latest capital expenditure position as at 31 August 2024 of £19.011m (paragraph 8.08); the latest full year forecast is £88.566m (paragraph 8.7).
- 7) Note that capital resources will be managed by the Executive Director Corporate Service and Commercial to ensure the capital programme remains fully funded and that capital funding arrangements secure the maximum financial benefit to the Council (paragraphs 8.10-8.12).

### **1. The Rationale and Evidence for the Recommendations**

To ensure Cabinet are informed of the current position in relation to the 2024/25 revenue budget.

To provide an updated forecast of the outturn position with regard to the collection of Council Tax and Business Rates.

To keep members informed of the progress of the Capital Programme against the profiled budget for 2024/25 and agreed allocations for future years.

To progress any changes that are required in order to maintain a relevant and accurate budget profile necessary for effective monitoring of the Capital Programme.

To approve any updates to funding resources so that they can be applied to capital schemes in the delivery of the Council's overall capital strategy.

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## 1. Introduction

- 1.1 On 29 February 2024, Members approved the Budget for the financial year 2024/25. This budget was developed throughout the preceding nine months and took account of all known issues. Within that report, and as with previous years, the inherent financial risk within the budget, especially with respect to Adult Social Care, Children's Services and Education Excellence (Home to School Transport), was identified. This was further reflected within the reserves' strategy for the Council, as reported in the Robustness Report also presented to Budget Council.
- 1.2 This report is the second of the Council's monthly budget monitoring reports for 2024/25 and provides an early revenue forecast outturn position for all services, including the pressures that have materialised since the budget was set.
- 1.3 The report also outlines the current position regarding key income streams for the Authority, namely Council Tax and Business Rates. Variations against expected receipts in these two areas will also affect the Council's financial position in future years.
- 1.4 The capital section of the report informs Members of the latest estimate of capital expenditure for 2024/25 and forecast expenditure for 2025/26 and 2026/27. The capital budget to date is presented in paragraph 8.1. Paragraphs 8.2 to 8.9 review progress of the capital programme, including additional capital schemes. Finally, paragraphs 8.10 to 8.12 confirm that there are adequate levels of resources available to finance the capital programme.

## 2. Revenue Budget 2024/25 – Forecast Outturn Position as at the end of August 2024

- 2.1 Members are provided with updates of the Council's forecast financial revenue position each month during the financial year from July. As would be expected as the forecast develop through the year, they become more robust and can inform decision making. The Council adopted this approach by developing its in year remedial budget actions on the back of the mid-year review position and this report is the first step that will lead to that.
- 2.2 As at the end of August 2024, the forecast outturn shows a net overspend on services of £5.089m, which relates to potential additional pressures within Adult Social Care, Children's Social Care and Education Excellence (Home to School Transport). It should be noted that the majority of services are reporting a balanced position or are implementing local remedial actions to return a balanced position at this stage. As with all organisations at this time, the Council is operating in a very challenging financial environment. However, it is vital that the Council achieves a balanced forecast outturn position to ensure its financial sustainability.
- 2.3 The table below highlights the variations across services that make up the £5.089m forecast overspend:

	<b>Budget</b>	<b>Forecast Outturn</b>	<b>Variance</b>	<b>Variance to July Forecast</b>
	<b>£m</b>	<b>£m</b>	<b>£m</b>	<b>£m</b>
<b><u>Services</u></b>				
Strategic Management	3.996	3.996	0.000	0.000

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Adult Social Care	121.738	122.046	0.308	-1.692
Children's Social Care	81.226	86.226	5.000	1.500
Communities	11.387	11.387	0.000	0.000
Corporate Resources	10.466	10.466	0.000	0.000
Economic Growth & Housing	6.882	6.882	0.000	0.000
Education Excellence	17.931	18.931	1.000	1.000
Health & Wellbeing	19.870	19.784	-0.086	-0.033
Highways & Public Protection	10.886	10.886	0.000	0.000
Operational In-House Services	17.614	17.614	0.000	0.000
Property and Building Services	-0.528	-0.528	0.000	0.000
<b>Total Service Net Expenditure</b>	<b>301.468</b>	<b>307.690</b>	<b>6.222</b>	<b>0.775</b>
Council Wide Budgets	15.462	14.329	-1.133	0.170
Levies	37.290	37.290	0.000	0.000
General Government Grants	-95.740	-95.740	0.000	0.000
<b>Total Net Expenditure</b>	<b>258.480</b>	<b>263.569</b>		
<b><u>Forecast Year-End Deficit</u></b>			<b><u>5.089</u></b>	<b><u>0.945</u></b>

2.4 The key areas relating to the outturn position are as follows:

- Adult Social Care** – Initial forecasts assumed that the Adult Social Care budget would overspend by £2.000m during 2024/25. The forecast for this month has now been reduced to an overspend of £0.308m to reflect an assumption that there will be full achievement of savings proposed by the Service for the year (see below). However, there are a number of significant assumptions and uncertainties that could impact on this position before the year-end. The service has also committed to a number of efficiencies and savings that amount to £4.8m, in order to meet the savings approved as part of the approved 2024/25 budget plus additional savings to meet the additional budgetary pressures arising from the increases in provider fees approved at Cabinet meetings in May 2024. The achievement of these savings will be carefully monitored throughout the year. As at the end of August, £1.6m of the £4.8m of savings have been delivered. The current position reflects the delivery of these savings in full during this year which the Service has confirmed.

Like all councils, the Service is experiencing growth pressure with demand for services and are seeking to meet the cost of this within the resources available. As would be expected with a budget of this size and volatility, this remains a key risk during the current year, with the added uncertainty of whether additional winter pressures or other grant funding would be received in year. Work will continue to be undertaken throughout the year to understand the pressures arising and refine forecasts. As an adverse forecast outturn position is currently forecast work will be undertaken to explore options to ensure that any potential overspend is mitigated.

- Children's Social Care** – Initial forecasts assumed that the Children's Social Care budget would overspend by £3.500m during 2024/25. The current forecast for the service shows a potential overspend of £5.000m (see below). However, there are a number of significant assumptions and uncertainties that could impact on this position before the year-end. Further work continues to be undertaken to understand the pressures and refine forecasts.

Members will be aware that the 2023/24 approved budget included an additional £21m of investment in the service based on the requirement for additional staffing (including temporary funding for additional age

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including International Social Workers and from staff coming through the social work academy) as well as additional resources to reflect the number of packages at the time, some potential growth as well as resource for inflationary pressures. The 2024/25 approved budget included an additional £3m to reflect the number of packages at the time as well as resource for inflationary pressures.

The current forecast for staffing is an overspend of £1.400m. A report to Cabinet in May 2024 approved a new staffing structure within the Service, with the cost of the new structure being £2.450m more than the existing staffing budget. Cabinet approved the virement of £2.450m, to fund the increased cost of the new structure, from the Residential Care budget to the staffing budget based on the forecast reduction in packages across the year provided by the Service based on the improvement work that they are undertaking and the performance information that they produced. However, as the new structure is recruited to with permanent staff, significant numbers of existing high-cost agency placements have continued to be required, resulting in a significant overspend being forecast.

Certain areas of accommodation and support packages are now forecast to overspend by £3.600m, an increase of £1.5m since the July forecast. The report to Cabinet in May 2024 outlined that budget realignment would be undertaken to ensure budgets reflected the packages in place at the start of 2024/25 as well as the anticipated reduction in Residential Care packages across the year. This was possible because of continuing improvements in practice which have resulted in more children being placed in more appropriate settings at a lower cost. However, the Service had seen 14 additional children having to be placed in a residential setting at a cost of £0.090m per week (£4.5m for a full year). In addition, the costs of packages for Children with Disabilities had increased, although specialist work continues to be undertaken to ensure health are making the appropriate contributions to the cost of care. These were the two main areas driving the initial forecast overspend.

It was previously assumed that the increase in Residential Care packages would be short-term. However, further work has been undertaken to assess each case and the assumptions made which has identified that some placements will continue for longer than originally assumed. In addition, some further placements, and increases in package costs, have resulted in further spending pressure. There has also been an increase in the number of packages for Children with Disabilities.

Further work has also been undertaken to assess each individual case across the different care settings. This has identified some mitigating reductions in certain settings, including Family Support Packages and Secure Accommodation. This forensic analysis will continue each month to ensure forecasts for each individual case are as robust as possible.

In considering this forecast, work will also be undertaken to determine if any of this pressure is temporary or permanent in nature and needs reflecting in future budget setting processes. At present it is considered that the increase in Residential Care packages is short-term in 2024/25 and so it is estimated that the future years impact is modest at this stage. Together with Adult Social Care and Home to School Transport this is clearly the biggest risk to the Council's budget and a comprehensive review of all residential and other placements, and all agency staff, will continue to be undertaken in order to inform a revised forecast that will be reported as at end of September 2024.

- **Education Excellence** - The current forecast shows a potential net overspend of £1.000m, which relates to Home to School Transport. Members will recall that in this budget, and in previous years' budgets, substantial funding was added to the Home to School Transport budget. However, this budget has come under further pressure due to the significant increase in the number of EHCPs being completed which result in travel support, including more expensive travel relating to out of borough placements.

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- **Other Service Areas** – Most other service areas are currently showing a balanced position. However, based on the initial monitoring undertaken some services are forecasting minor overspends. Given these are early forecasts of the financial year, work will continue to refine forecasts as more information on expenditure and income becomes available. Services will need to ensure that additional cost control measures are in place between now and the end of the year, and mitigating savings are made to offset any forecast overspend, to ensure each service delivers a balanced position.
- **Corporate Budgets** – The Council continues to achieve positive investment returns on its cash balances. It is forecast that this will achieve additional income of £0.233m in 2024/25. However, due to the impact on cash balances of the High Needs deficit, the Council has had to take out additional borrowing earlier than previously planned for. This has reduced the forecast surplus by £0.170m since the July position was reported.

### 3. **Revenue Budget Summary 2024/25**

- 3.1 An overspend of £5.089m is currently forecast. However, as mentioned in section 2, this is a forecast based on a number of uncertainties and assumptions, particularly around Adult Social Care, Children's Social Care, and Education Excellence (Home to School Transport), which all remain volatile. Additional work will continue to be undertaken across service areas to refine the forecasts and identify mitigating efficiencies to ensure each service achieves a balanced budget position. As also mentioned in section 2, within Children's Social Care a comprehensive forensic review of all residential and other placements and all agency staff will continue to be undertaken in order to inform a revised forecast that will be reported as at end of September 2024.
- 3.2 As mentioned, the Council must achieve an overall balanced position to ensure its financial sustainability. Given the overall forecast overspend, following completion of the September 2024 monitoring position, a remedial action plan to meet the residual balance will be produced and will be presented for Members' approval.

#### Other Proposed Remedial Actions

- 3.3 Given there is still a forecast overspend of **£5.089m**, it is proposed to continue with the adoption of financial principles used in previous years, to enable a balanced forecast outturn position to ensure the Council's financial sustainability. This will include cost control in relation to recruitment, non-essential expenditure and no further growth items / additionality.

#### **Summary 2024/25**

- 3.4 An overspend of **£5.089m** is currently forecast. However, this represents the current position that has been forecast to the year end- in the event that further pressure is experienced, further remedial action will be required. As a result of measures taken in 2023/24 to ensure a balanced outturn position, there is no flexibility left for the use of existing Earmarked Reserves or General Balances- as a result this pressure, and any further pressure, will need to be met from within the existing Council budget and delivery monitored carefully and reported to Cabinet. A remedial action plan to meet the residual balance will be produced and will be presented for Members' approval.

### 4. **Sefton New Directions**

- 4.1 Members will recall that at the meeting of Cabinet on 4 January 2024, a report was presented and approved that set out the transformation and development that would take place within Sefton New Directions to continue the evolution of the Company and ensure its financial sustainability moving forward. The report reflected the changes in the care sector, the

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Council's objectives and the wider economy, all of which were naturally having an impact on the Company.

- 4.2 Cabinet as Shareholder of the Company will receive a detailed update on this, together with a proposed budget for 2025/26, at its meeting in November 2024, alongside the other wholly owned companies that the Council has. This is now an embedded part of the governance process with any financial implications feeding into next years' budget process.
- 4.3 In advance of that report, officers continue to meet with the Company to assess progress. At this stage the Company has an inherent budget shortfall of £1.135m for the year and this would see balances reduce to £1m at the end of the current financial year. Therefore, tracking the transformation and business changes is critical. From these discussions, the following financial improvement has been identified and will be delivered for 2025/26:
- £0.220m in respect of business efficiencies, including reducing agency costs
  - £0.134m in respect of James Dixon Court from full cost recovery through the charging model
  - £0.200m in respect of Chase Heys from increased health income and a reduction in cost of delivery, e.g., reduction in agency costs
  - £0.180m in respect of reablement
- 4.4 These proposals amount to £0.734m, with further work being undertaken across all aspects of the business, such as with regard to the realignment of budgets to reflect utilisation and in some areas a review of demand linked to the previously agreed transformation programme.
- 4.5 At this stage, with further work to be undertaken, the inherent deficit would reduce to circa £0.400m which would be a positive move forward in setting a balanced budget for 2025/26 and also ensuring financial sustainability but there is more work to do. The Cabinet report in November will see a detailed progress update being provided against each transformation proposal previously approved together with further work undertaken and will similarly detail each area where progress has not been made as approved, together with a proposed budget for 2025/26.
- 4.6 The Council remains committed to the Company and supporting it through its transformation and development programme and will ensure it remains financially sustainable in doing so.

## 5. **Council Tax Income – Update**

- 5.1 Council Tax income is shared between the billing authority (Sefton Council) and the three major precepting authorities (the Fire and Rescue Authority, the Police and Crime Commissioner and the Combined Authority – Mayoral Precept) pro-rata to their demand on the Collection Fund. The Council's Budget included a Council Tax Requirement of £169.759m for 2024/25 (including Parish Precepts), which represents 84% of the net Council Tax income of £202.200m.
- 5.2 The forecast outturn for the Council at the end of August 2024 is a surplus of £0.154m. This variation is primarily due to: -
- The surplus on the fund at the end of 2023/24 being higher than estimated (-£0.312m).
  - Gross Council Tax Charges in 2024/25 being higher than estimated (-£0.778m).

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- Exemptions and Discounts (including a forecasting adjustment) being higher than estimated (+£0.936m).

5.3 Due to Collection Fund regulations, the Council Tax surplus will not be transferred to the General Fund in 2024/25 but will be carried forward to be recovered in future years.

5.4 A forecast surplus of £1.548m was declared on the 16 January 2024 of which Sefton's share is £1.299m (83.9%). This is the amount that will be recovered from the Collection Fund in 2024/25.

## 6. **Business Rates Income – Update**

6.1 Since 1 April 2017, Business Rates income has been shared between the Council (99%) and the Fire and Rescue Authority (1%). The Council's Budget included retained Business Rates income of £65.692m for 2024/25, which represents 99% of the net Business Rates income of £66.356m. Business Rates income has historically been very volatile making it difficult to forecast accurately.

6.2 The forecast outturn for the Council at the end of August 2024 is a deficit of +£1.158m on Business Rates income. This is due to:

- The surplus on the fund at the end of 2024/25 being lower than estimated (+£2.620m).
- Increase in the gross charge on rateable properties (-£1.687m).
- A number of reliefs announced for 2024/25 were assumed in the NNDR1 return with the loss of income as a result of these reliefs covered by Section 31 grant payments. It is now forecast that the value of these reliefs will be more than anticipated (+£0.521m).
- Adjustments relating to prior years (-£0.296m)

6.3 When taking into account the change in Section 31 grants due on the additional reliefs, a net deficit of £0.960m is forecast.

6.4 Due to Collection Fund regulations, a Business Rates deficit will not be transferred to the General Fund in 2024/25 but will be carried forward to be recovered in future years.

6.5 A forecast surplus of £11.119m was declared in January 2024. Sefton's share of this is £11.008m. This is the amount that will be distributed from the Collection Fund in 2024/25. Any additional surplus or deficit will be distributed in 2025/26 and future years.

## 7. **High Needs Budget**

7.1 Cabinet and Council have agreed to receive regular reports from the Executive Director of Children's Social Care and Education and the Assistant Director of Children's Services (Education) with regard to the High Needs budget and the changes that are proposed, details of sufficiency planning, the Council's engagement on the Delivering Better Value Programme and the current high needs deficit and the risk around future central government decision making in respect of this deficit.

7.2 A separate report on the High Needs funding position of the Council was presented to Cabinet in July 2025.



## 8. Capital Programme 2024/25 – 2026/27

### Capital Budget

8.1 The Capital Budget and profile of expenditure for the three years 2024/25 to 2026/27 is as follows:

2024/25	£88.644m
2025/26	£61.385m
2026/27	£33.476m

8.2 The following updates have also been made to the capital programme budget since the previous budget report to Cabinet in September:

- **Corporate Resources**
  - £0.498m has been added to the 2024/25 budget for ICT Service Developments funded by prudential borrowing following approval by Council in September
  - £0.148m has been added to the 2024/25 budget for the Committee Meeting Microphone and Live Streaming System project funded by prudential borrowing following approval by Council in September.
- **Economic Growth and Housing** - £0.040m has been added to the 2024/25 budget for the Red Rose Park Works scheme funded by capital receipts following approval by Council in September.
- **Education Excellence**
  - Council in February approved the use of the 2024/25 Schools Condition Allocation (SCA) block grant of £2.242m for new capital schemes. The list of schools projects has now been finalised and approved by Cabinet Member for Children, Schools and Families and is listed below. Due to the timescales required for delivery, the majority of new schemes have been profiled to 2025/26.

Location	Scope of work	Budget
Planned Maintenance	General Planned Maintenance	£300,878
Birkdale CP	Phase 3 Pitched roof repairs	£100,000
Birkdale CP	Refurbish existing toilets	£40,000
Birkdale CP	Small power rewire & lighting upgrade	£90,000
Christ Church CP	Replace remaining roof	£30,000
Crosby High	Resurface carpark and install additional drains	£50,000
Farnborough Road Juniors	Roof replacement	£155,000
Farnborough Road Infants	Repointing brickwork	£10,000
Green Park Primary	Resurface play areas/paths	£20,000
Hatton Hill	Roof	£46,000
Hudson CP	Corridor roof & high-level windows	£130,000
Hudson CP	Concrete repairs/brickwork	£70,000
Larkfield / Presfield	Improvements to carpark and access road	£130,000
Marshside CP	Small playground to rear & canopy	£50,000
Marshside CP	Remaining flat roof phase 3	£50,000

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Marshside CP	Staff toilets refurb	£30,000
Marshside CP	Refurbish existing children's toilets	£50,000
Merefield	Replace flat roof / remove old AC units (phase 2)	£140,000
Netherton Moss CP	Roof to toilets	£55,000
Netherton Moss CP	Drainage upgrade	£15,000
Northway Primary	New flooring to classrooms	£10,000
Northway Primary	Replace roof to boiler room	£30,000
Norwood Primary	Resurface playground and install additional drainage	£140,000
Redgate CP	Security	£15,000
St Philips	Rewire and lighting upgrade & fire alarm phase 1	£90,000
Summerhill CP	Expansion and improvement work	£250,000
Waterloo CP	Roof / fire doors	£145,000
	<b>Total Programme</b>	<b>£2,241,878</b>

- £0.900m has also been added to the budget for new Special Educational Needs and Disabilities capital projects at Beford Primary (£0.450m in 2025/26) and Freshfield Primary (£0.350m in 2024/25 and £0.100m in 2025/26) funded from the High Needs Provision Capital Allocation (HNPCA) grant from DfE and approved by Cabinet Member under delegated authority.

- **Operational In-House Services**

- £0.347m has been added to the 2024/25 budget for the Northern Forest Grow Back Greener Programme funded by grant from The Merseyforest Partnership and approved by Cabinet in September.
- £0.300m has been rephased from 2024/25 to 2025/26 for the Crosby Flood and Coastal Scheme pending confirmation of the scope of works over the winter period.
- £0.086m has been rephased from 2024/25 to 2025/26 for the Hesketh Park Legacy Project due to time required to assess the scope of conservatory works.

8.3 The following block capital grant allocations were approved by Council following recommendation by Cabinet for inclusion in the Capital Programme 2024/25:

<b>Capital Grant</b>	<b>2024/25 £</b>
<b>Adult Social Care</b>	
Disable Facilities Grant	5,261,093
<b>Education Excellence</b>	
Schools Condition Allocation	2,241,878
High Needs Provision Capital Allocation	4,740,380
<b>Highways and Public Protection</b>	
City Region Sustainable Transport Settlement	10,766,000

8.4 Authority has been delegated to Cabinet Members to assign funding to individual capital schemes up to a value of £1m for Adult Social Care, Highways and the Schools block allocations listed above. A £3.5m budget for Disabled Facilities Grants and £6.8m for schemes funded by the City Region Sustainable Transport Settlement have already been approved by Council in July and added to the programme. A further £2.2m of SCA and

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£1.4m of HNPCA capital schemes have been approved by Cabinet Member for Children, Schools and Families under delegated authority and allocated to the programme.

- 8.5 The list of schemes to utilise the remaining grant for 2024/25 is being fully developed and will be presented to the individual Cabinet Members for approval. A full list of the approved capital schemes will be presented in future reports to Cabinet.

## **Budget Monitoring Position to August 2024**

- 8.6 The current position of expenditure against the budget profile to the end of August 2024 is shown in the table below. It should be noted that budgets are profiled dependent upon the timing of when works are to be carried out and the anticipated spend over the financial year. The budget to date in the table below reflects the profiles of each individual scheme.

	<b>Budget to August</b>	<b>Actual Expenditure to August</b>	<b>Variance to August</b>
	<b>£m</b>	<b>£m</b>	<b>£m</b>
<b><u>Services</u></b>			
Adult Social Care	1.788	1.788	-
Children's Social Care	0.172	0.172	-
Communities	0.210	0.204	-0.006
Corporate Resources	0.118	0.139	0.021
Economic Growth & Housing	2.863	3.636	0.773
Education Excellence	1.449	1.447	-0.002
Highways & Public Protection	4.305	4.305	-
Operational In-House Services	2.292	2.405	0.113
Property and Building Services	4.940	4.914	-0.025
<b><u>Total Programme</u></b>	<b>18.137</b>	<b>19.011</b>	<b>0.874</b>

## **Capital Programme Forecast Outturn 2024/25**

- 8.7 The current forecast of expenditure against the budget profile to the end of 2024/25 and the profile of budgets for future years is shown in the table below:

	<b>Budget 2024/25</b>	<b>Forecast Outturn</b>	<b>Variance</b>	<b>Budget 2025/26</b>	<b>Budget 2026/27</b>
	<b>£m</b>	<b>£m</b>	<b>£m</b>	<b>£m</b>	<b>£m</b>
<b><u>Services</u></b>					
Adult Social Care	7.593	7.703	0.110	1.850	-
Children's Social Care	2.298	2.298	-	-	-
Communities	1.767	1.764	-0.003	0.101	-
Corporate Resources	1.596	1.596	-	0.090	-
Economic Growth & Housing	19.470	19.397	-0.073	45.876	27.947
Education Excellence	13.661	13.550	-0.112	2.608	-
Highways & Public Protection	24.566	24.566	-	5.955	1.616
Operational In-House Services	9.892	9.892	-	2.406	1.525
Property and Building Services	7.700	7.799	-	2.500	2.387

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<b>Total Programme</b>	<b>88.644</b>	<b>88.566</b>	<b>-0.079</b>	<b>61.385</b>	<b>33.476</b>
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A full list of the capital programme by capital scheme is at **appendix A**.

8.8 The current 2024/25 budgeted spend is £88.644m with a budgeted spend to August of £18.137m. The full year budget includes exceptional items such as £13.611m for Growth and Strategic Investment projects, £3.377m for new Council Housing schemes, £9.773m for major Highways projects, a £2.707m project for Southport Pier Decking, a one-off budget for a major property acquisition (£4.775m), new funding for refuse recycling and collection (£2.644m), a scheme to upgrade to LED Street Lighting (£3.809m), and £2.000m for Children's Social Care Transformation.

8.9 It should be noted that based on evidence from previous years, it is likely that further reprofiling of spend into 2025/26 will occur as the year progresses, as £89m of capital expenditure would be a significant programme delivered in year- it is therefore essential that all projects are reviewed in a robust manner in order that informed decision making in respect of financial management and member decision making can be undertaken.

## **Programme Funding**

8.10 The table below shows how the capital programme will be funding in 2024/25:

<b>Source</b>	<b>£m</b>
Grants and Other Contributions	61.270
Prudential Borrowing	18.618
Capital Receipts	8.543
Revenue Contributions	0.213
<b>Total Programme Funding</b>	<b>88.644</b>

8.11 The programme is reviewed on an ongoing basis to confirm the capital resources required to finance capital expenditure are in place, the future years programme is fully funded, and the level of prudential borrowing remains affordable.

8.12 The Executive Director of Corporate Services and Commercial will continue to manage the financing of the programme to ensure the final capital funding arrangements secure the maximum financial benefit to the Council.

## **2. Financial Implications**

All financial implications are reflected within the report.

## **3. Legal Implications**

None

## **4. Corporate Risk Implications**

This report highlights the financial position of the Council in 2024/25, which supports its Financial Sustainability in 2024/25 and future years.

## **5 Staffing HR Implications**

None

## 6 Conclusion

Based on current forecasts, the Council is again faced with a challenging financial environment during 2024/25 as a result of pressures within Adult Social Care, Children’s Social Care and Education Excellence (Home to School Transport).

A revenue overspend of £5.089m is currently forecast. Within Children’s Social Care a comprehensive review of all residential and other placements and all agency staff continues to be undertaken in order to inform a revised forecast that will be reported as at end of September 2024. Following completion of the September 2024 monitoring position, a remedial action plan to meet the residual balance will be produced and will be presented for Members’ approval.

### Alternative Options Considered and Rejected

None

<p><b>Equality Implications:</b></p> <p>There are no equality implications.</p>
<p><b>Impact on Children and Young People:</b></p> <p>None</p>
<p><b>Climate Emergency Implications:</b></p> <p>The recommendations within this report will have a <b>Neutral</b> impact.</p> <p>The allocations of capital funding outlined in section 8 may be spent on projects that will have a high climate change impact as they could relate to new build, rebuild, refurbishment, retrofit and demolition proposals. Environmental consideration will be taken into account when specific projects are designed and tendered – which will help to mitigate negative impacts.</p>

### What consultations have taken place on the proposals and when?

#### (A) Internal Consultations

The Executive Director of Corporate Services and Commercial is the author of this report (FD 7788/24).

The Chief Legal and Democratic Officer (LD 5888/24) has been consulted and any comments have been incorporated into the report.

#### (B) External Consultations

None

### Implementation Date for the Decision:

Following the expiry of the “call-in” period for the Cabinet decision.

# Agenda Item 10

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## **Appendices:**

The following appendices are attached to this report:

APPENDIX A – Capital Programme 2024/25 to 2026/27

## **Background Papers:**

None

## APPENDIX A – Capital Programme 2024/25 to 2026/27

<b>Capital Scheme</b>	<b>Budget</b>		
	<b>2024/25</b> £	<b>2025/26</b> £	<b>2026/27</b> £
<b>Adult Social Care</b>			
Disabled Facilities Grants	3,500,000	-	-
ICT Development & Transformation	730,316	2,708	-
ICT Connectivity in Care Homes and Support Living	86,546	-	-
Care Home Improvements	262,589	-	-
Integrated Health and Wellbeing on the High Street	400,000	-	-
Short Term Assessment Unit	1,661,222	1,847,000	-
New Directions Programme	270,329	-	-
Technology Enabled Care	335,401	-	-
Changing Places	36,071	-	-
Falls Prevention Schemes	45,000	-	-
Digitising Social Care	136,393	-	-
Community Equipment	128,963	-	-
<b>Children's Social Care</b>			
Support for Fostering Placements	194,509	-	-
Community Equipment	9,999	-	-
Springbrook Works and Vehicle	93,849	-	-
Children's Social Care Transformation	2,000,000	-	-
<b>Communities</b>			
Atkinson Arts Centre – Infrastructure & Windows	169,555	-	-
Local Authority Housing Fund	1,297,000	-	-
Leisure Centres – Essential Works	151,011	-	-
Libraries Projects	124,999	100,807	-
Neighbourhoods Schemes	24,869	-	-
<b>Corporate Resources</b>			
ICT Development & Transformation	688,498	-	-
ICT Data Centre Relocation	400,000	-	-
ICT Equipment Refresh	360,000	90,000	-
Committee Meeting Live Streaming System	147,806	-	-
<b>Economic Growth &amp; Housing</b>			
Cambridge Road Centre Redevelopment	170,983	-	-
Strategic Acquisitions – Ainsdale	155,000	469,303	-
Marine Lake Events Centre	5,651,282	37,866,796	21,280,701
Enterprise Arcade	1,252,977	35,418	-
The Strand – Maintenance & Improvements	120,330	-	-
The Strand – Repurposing Programme	6,097,159	6,666,667	6,666,666
Changing Places Facilities	109,168	-	-
Brownfield Housing Fund	1,032,281	-	-
Council Housing Early Acquisitions Scheme	-	750,000	-
Council Housing at Buckley Hill Lane	2,080,462	1,150	-
Southport Pier	2,706,736	86,580	-
Town Centre Vacant Sites	54,016	-	-

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	2024/25 £	2025/26 £	2026/27 £
Red Rose Park Works	40,000	-	-
<b>Education Excellence</b>			
Early Years	534,202	-	-
General Planned Maintenance	397,262	-	-
Schools Programme	8,421,149	2,005,683	-
Sporting Betterment of Schools	1,321,388	-	-
Special Educational Needs & Disabilities	2,987,132	602,001	-
<b>Highways and Public Protection</b>			
Accessibility	551,287	-	-
Healthy Lifestyles	190,141	-	-
Road Safety	74,956	-	-
A565 Route Management and Parking	214,035	-	-
A565 Northern Key Corridor Improvements	96,369	-	-
A59 Route Management Strategy	2,549,802	3,299,000	-
Strategic Planning	7,528,511	-	-
Traffic Management & Parking	36,560	-	-
School Streets Schemes	96,510	-	-
Highway Maintenance	4,519,560	-	-
Bridges & Structures	2,060,143	-	-
Drainage	115,930	-	-
Street Lighting	23,394	-	-
Street Lighting LED Upgrade	3,809,462	-	-
Urban Traffic Control	1,070,204	250,000	-
Highways Capitalisation	1,616,000	1,616,000	1,616,000
Transport Growth Programme	-	789,813	-
Completing Schemes	13,491	-	-
<b>Operational In-House Services</b>			
Coastal Erosion and Flood Risk Management	1,815,925	1,329,276	1,430,273
Countryside Stewardship	1,740	-	-
Parks Schemes	309,598	702,062	-
Tree Planting Programme	574,072	94,879	94,879
Golf Driving Range Developments	2,197	280,280	-
Ainsdale Coastal Gateway	543,739	-	-
Green Sefton – Vehicles, Plant & Machinery	1,996,237	-	-
Refuse Collection & Recycling	2,989,182	-	-
Vehicle Replacement Programme	1,659,104	-	-
<b>Property and Building Services</b>			
Acquisition of Magdalen House	4,775,400	-	-
Council Wide Essential Maintenance	524,070	-	-
Council Wide Essential Maintenance Phase 2	2,500,000	2,500,000	2,387,372
<b><u>Total Programme</u></b>	<b>88,644,071</b>	<b>61,385,423</b>	<b>33,475,891</b>



By virtue of paragraph(s) 3 of Part 1 of Schedule 12A  
of the Local Government Act 1972.

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**Report Title:** Procurement of Temporary Accommodation

Date of meeting:	3 October 2024		
Report to:	Cabinet		
Report of:	Assistant Director Communities		
Portfolio:	Communities and Partnership Engagement		
Wards affected:	Borough-wide		
Is this a key decision:	Yes	Included in Forward Plan:	Yes
Exempt/confidential report:	<p>Main report - No</p> <p>Appendix A – Yes, the Appendix is NOT FOR PUBLICATION by virtue of Paragraph 3 of Part 1 of Schedule 12A of the Local Government Act 1972. The Public Interest Test has been applied and favours the information being treated as exempt.</p>		

**Summary:**

As part of the Council’s statutory function in discharging its duties under the Housing Act 1996, Homelessness Act 2002 and the Homelessness Reduction Act 2017, the Council must provide interim accommodation while it makes enquiries if it has reason to believe that an applicant may be:

- Homeless
- Eligible for assistance, and
- In priority need.

These functions are delivered through the Councils Housing Options service and accommodation requirements sourced from a mix of Council stock, Commissioned Providers and accommodation providers from the private sector.

Since August 2023 there has been a 67% increase in the number of households in temporary accommodation. Consequently, the Council has needed to source an increasing amount of accommodation from the private sector.

This paper outlines a strategy for procuring good quality, furnished, and maintained

# Agenda Item 14

accommodation for eligible homeless households through a mix of dispersed temporary accommodation.

## **Recommendation(s):**

That Cabinet:

- (i) Give authorisation for the Assistant Director Communities, to conduct a procurement exercise in compliance with the Procurement Act 2023, evaluated on the basis of the most advantageous tender, to commission accommodation providers to deliver temporary accommodation to eligible homeless households entering into a contract for a minimum of 2 years plus 1 optional year (2+1).
- (ii) Give authorisation for the Assistant Director Communities to, in consultation with the Cabinet Member for Communities, be granted delegated authority to award the Contract(s) resulting from the procurement exercise and to award any extension or amendment thereof following a review of the original award.

## **1. The Rationale and Evidence for the Recommendations**

### **Rationale for the recommendations**

- (i) To ensure that there is access to sufficient provision of temporary accommodation to meet a growing need.
- (ii) Costs associated with the provision of temporary accommodation are reduced.
- (iii) That accommodation provided is of a consistently good standard as set out in the terms of the contract.
- (iv) To ensure that the Council is compliant with Public Procurement Regulations.

### **Outline Strategy for Delivery**

#### **Introduction**

Sefton is currently facing its highest demand for homelessness related support than it ever has. Sefton is not alone in this, and these are pressures that all local authorities in the country are facing.

Although many of the issues driving these homeless pressures are out of the Council's direct control there are several workstreams that are progressing as quickly as possible to strengthen our ability to help residents in this situation.

Sefton currently has a significant and growing need, and the cost of managing this need is increasing significantly.

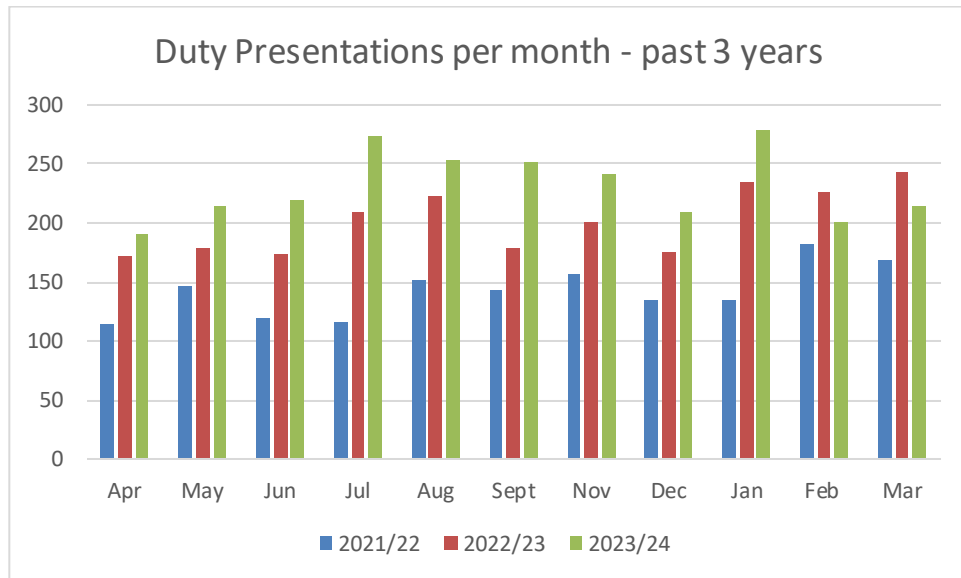
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Homeless cases have significantly increased since the increase in the cost-of-living began in late 2021. Over the last 12 months the number of households presenting as homeless has consistently been greater than 200 per month.

Table 1 below shows the number of presentations that the Housing Options Team have received over the past 3 years. These are 'duty' presentations where the Council is required to make enquiries to establish whether there is reason to believe the household is at risk of homelessness.

Table 1



## Homeless Strategy

The Homelessness Act 2002 requires every Local Authority to carry out a homelessness review in its Borough every 5 years, to develop and publish a Homelessness Strategy based on this review and to consult with other statutory and voluntary organisations.

Following the completion of the research phase to draft Sefton's new strategy, a first draft has been produced and has been out for 12-week consultation in order that a shared strategy is produced by all partners who influence homelessness.

The consultation started on Monday 30 October 2023 and lasted until Sunday 21st January 2024.

One of the suggested strategic priorities for homelessness in Sefton, which this project will contribute to achieving, is:

*Continue to improve the quality of emergency bed and temporary accommodation provision and associated support.*

Following the 12-week consultation, a report was taken to Cabinet in April 2024 where the new strategy and action plan was approved.

## Current Challenges

### *Availability of Temporary Accommodation*

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Although the Housing Options Team does everything they can to prevent residents from losing their home, in many instances Temporary Accommodation (TA) is required. Numbers requiring TA is such that it now exceeds the bedspaces available in the Council owned homeless unit provision and through our homeless providers. Cases are therefore housed in a variety of locations at a significant cost to the council.

The Local Government Association estimates that the total cost to local authorities nationally is £1.7bn per annum. In July 2023 it was widely reported in the national press that households accessing Local Authority temporary accommodation in England was at its highest since records began. The number of households being placed in temporary accommodation had risen by 10% in England for the year to July 2023.

During July 2023 there was a spike in demand which saw Sefton's highest number of households approach the Council for homelessness assistance, as shown in table 1. Although the following months of August, September and October were very high, they did not surpass the July figure.

This increase in demand has also seen a spike in the number of people requiring temporary accommodation. At the beginning of August 2023, the number of eligible households accessing temporary accommodation was 107 however by the beginning of November this had risen to 179, a 67% increase.

The table below shows the comparative data for 3 November 2023 against the same date in August and the size of the households accessing TA.

Table 2

	<b>3 Aug-23</b>	<b>3 Nov-23</b>	<b>Increase</b>
<b>Total in temp</b>	<b>107</b>	<b>179</b>	67%
<b>Total in nightly rate temp</b>	<b>91</b>	<b>157</b>	73%
<i>Of those in nightly rate</i>			
1 person household	54	100	85%
2 person household	26	21	-19%
3 person household	13	17	31%
4 person household	5	10	100%
5 person household	2	2	0%
6 person household	3	5	67%
7 person household	0	0	
8 person household	1	1	0%

To mitigate this spike increasing further the Cabinet Member for Communities and Housing temporarily approved direct matching eligible homeless households with properties that were advertised through Sefton's choice-based lettings service, Property Pool Plus. This ran from November 2023-April 2024 and was successful in stemming the escalating numbers of households requiring temporary accommodation.

*Cost of nightly rate temporary accommodation*

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The table below shows the cost of providing nightly rate accommodation sourced from private sector providers over the past 5 financial years. This accommodation includes self-contained, for example a flat or home, and hotels.

Table 3

	2019/20	2020/21	2021/22	2022/23	2023/24
<b>Total</b>	<b>£178,000</b>	<b>£197,000</b>	<b>£382,000</b>	<b>£749,000</b>	<b>£2,342,000</b>

Some of the expenditure of the accommodation is recoverable from Housing Benefit, however this only accounts for a fraction of the cost of providing the accommodation.

Although the cost of providing this accommodation is through government grants this is not sustainable should the current level of demand continue.

## Linked schemes

### *Refurbishment of council owned properties to habitable dwellings*

The Emergency Temporary Accommodation Project was approved to proceed by Cabinet (March 2023) and the project is progressing. The scope of the project is to redevelop 3 vacant Council properties to deliver 16 additional self-contained units of accommodation.

### *Procurement of supported temporary accommodation from registered providers*

This accommodation will be available to households where household members require holistic support to meet their needs. Where new units of accommodation become available the Council will consider, subject to approval, utilising this accommodation as temporary accommodation from registered providers.

## Homelessness and Rough Sleeping Strategy 2024-2029

Cabinet approved the Sefton Homelessness and Rough Sleeping Strategy 2024-2029 and action plan in April 2024. Key findings from the preceding homelessness review highlighted that there is

*‘increasing incidence of homelessness, including both ‘hidden’ homelessness and demand for services, a lack of supply of affordable social housing and the impact of changes within the private rented housing market, which are placing more households at risk of homelessness, and making it very difficult for those facing homelessness to access new tenancies.’*

To address this, one of the recommendations in the strategy is to ‘Improve the quality of temporary and emergency provision’, which this procurement exercise will contribute to addressing.

## Proposal summary

Subject to Cabinet approval, it is proposed that officers begin the development of a detailed temporary accommodation procurement pack. This pack will set out the timescales, costs, and scope of developing the future provision of temporary accommodation.

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It is anticipated that, due to the varying needs of households facing homelessness, that different levels of support may be required to meet the needs of some households in temporary accommodation.

The property types will also be different depending on the household sizes, whether they are families or single homeless households. Self-contained accommodation such as houses or flats is preferable however, when required hotels and other accommodation with shared facilities will be considered for single person households in a priority need group.

## Timescales

Table 4

<b>Activity</b>	<b>Date</b>	<b>Responsible Officer</b>
Cabinet	5 September 2024	Communities Service Manager, Homelessness and Migration
FTS Notice Published	16 September 2024	Procurement Team
ITT Published	16 September 2024	Procurement Team
Deadline for asking clarification questions	16 October 2024	Procurement Team
Deadline for Tender Submission	23 October 2024	Procurement Team
Evaluation of responses complete	15 November 2024	Communities Service Manager, Homelessness and Migration
Moderation and selection of preferred bidder	18 November 2024	Communities Service Manager, Homelessness and Migration
Notification of Intention to Award and start of the 10-day voluntary standstill period	22 November 2024	Procurement Team
Mandatory Standstill ends	Midnight 2 December 2024	Procurement Team
Award contract	3 December 2024	Assistant Director, People
Contract start date	1 February 2025	Service Providers



## 2. Financial Implications

### What will it cost and how will it be financed?

#### (A) Revenue Costs

Subject to approval, the net revenue costs of the proposal are included in Appendix A (exempt/confidential). Costs will, in the first instance, be met through the Homeless Prevention Grant provided by the Ministry for Housing, Communities and Local Government, plus other grants received relating to Resettlement programmes and housing benefit income.

#### (B) Capital Costs

There are no capital costs associated with this proposal.

## 3. Legal Implications

The Procurement Act 2023 and the Procurement Act 2023 (Commencement No 3 and Transitional and Savings Provisions) Regulations 2024.

## 4. Corporate Risk Implications

Risk will be managed at a Service level.

## 5 Staffing HR Implications

Property and Facilities Management will work alongside the Housing Options and Strategic Housing services to oversee the work.

## 6 Conclusion

That Cabinet give authorisation to complete a procurement exercise to remodel how temporary accommodation is sourced from third party accommodation providers based on the evidence contained within this report.

## Alternative Options Considered and Rejected

1. Lease self-contained dispersed properties from registered providers for use as temporary accommodation.

There is high demand for affordable accommodation across the housing market and from social housing provided by registered providers.

Risk: Reduction in social housing accommodation available.

If social housing properties were used for the purpose of providing temporary accommodation it would reduce the availability of affordable accommodation for Sefton residents. The impact of this could lead to further rises in homelessness as some households could find themselves in unaffordable private sector tenancies.

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2. Lease empty properties directly from landlords in the private sector and manage the accommodation internally.

This option is high cost and resource intensive for the Council to deliver at present. The accommodation provided would need to be maintained, furnished, and managed by the Council. The Council does not currently have the resources to deliver this.

Risk: Financial risk associated with the time it would take to recruit and develop a new service to manage this function.

The initial costs for setting up the service from recruitment and training plus other costs for establishing the properties as homes, for example, providing furniture and utensils.

3. Do nothing.

The Council can continue to spot purchase from the open market at nightly rates agreed at the time of booking.

Risk: Lack of availability and fluctuating costs.

During holiday seasons and when there are large events in the city region, the price of booking accommodation during those periods increases. There are also fewer options available during those periods.

Although the lowest rate is negotiated at the time of booking accommodation there is some uncertainty regarding the long-term costs of providing the accommodation due to how quickly the market can change depending upon demand at the time.

**Equality Implications:** No negative equality impacts have been identified at this stage. This work will increase the amount of accommodation available to homeless households and should have a positive impact on people with a variety of protected characteristics who are affected by homelessness.

**Impact on Children and Young People: Yes**

There will be a positive impact for children, young people and families through improving the quality of temporary accommodation offered to families that become homeless.

**Climate Emergency Implications:**

The recommendations within this report will

Have a positive impact	N
Have a neutral impact	Y
Have a negative impact	N

The Author has undertaken the Climate Emergency training for report authors	Y
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The recommendation within this report will have a neutral impact on the carbon footprint of Sefton Borough. Most of the accommodation used will already exist so there will be minimal refurbishment of property needed.

However, where refurbishment is required by accommodation providers, we will make it a condition of the refurbishment that the developer should install a low carbon heating system at the property. Some refurbishments may also be required to go through the planning system which will also help to minimise the carbon impact of the building by applying the nationally required environmental standards.

**What consultations have taken place on the proposals and when?**

**(A) Internal Consultations include:**

The Executive Director of Corporate Services and Commercial (FD.7746/24) and the Chief Legal and Democratic Officer (LD.5846/24) have been consulted and any comments have been incorporated into the report.

**(B) External Consultations**

Not applicable at this stage. Any necessary consultation will take place if the project proceeds.

**Implementation Date for the Decision**

Following the expiry of the “call-in” period for the Minutes of the Cabinet Meeting

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**Appendices:**

- Appendix A – Financial and Commercially Sensitive Information
- Appendix B – Equality Impact Assessment

**Background Papers:**

There are no background papers.

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## Appendix B

<p><b>Equality Analysis Report</b></p>
<p><b>Details of proposal:</b> To procure temporary accommodation for the purpose of providing accommodation for eligible homeless households.</p>
<p><b>Ramifications of Proposal:</b> Consideration needs to be given to accessibility of homeless households who may be occupying the accommodation and their protected characteristics within the contract.</p>
<p><b>Are there any protected characteristics that will be disproportionately affected in comparison to others?</b> No negative equality impacts have been identified at this stage. The project is to increase the amount of accommodation available and should have a positive impact on outcomes for people with a variety of protected characteristics who are affected by homelessness.</p>
<p><b>Consultation:</b> There is no planned consultation to take place at this stage.</p>
<p><b>Is there evidence that the Public Sector Equality Duties will be met?</b> Yes, the contract will give due regard to people with physical disabilities. Some properties will be required to be accessible at ground level.</p>
<p><b>What actions will follow if proposal accepted by cabinet &amp; Council?</b> The equality impact assessment will be updated at key milestones during the course of the project.</p>

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