

Barnardo's - Written supplementary evidence (PSC0065)

Note for the Lords Public Services Committee following the oral evidence session on 19th May 2021.

Following the session on 19th May, we thought it would be helpful to provide the Committee with some further information:

1. An outline of our approach to the **commissioning relationship** between Government, local statutory agencies and charities, including examples of where we have innovative 'Strategic Partnerships'. (This topic was not covered in detail at the session due to time constraints.)
2. Further information about our **SOLAR mental health service** in Solihull, which is an example of how a non-traditional, partnership approach to support can improve outcomes.
3. The final evaluation [report](#) of our **See, Hear, Respond** services, which was commissioned by the Department for Education and reached over 100,000 vulnerable children who did not receive statutory support but faced additional challenges due to the pandemic.

1. Commissioning services for children and families

Barnardo's has come to believe that the system surrounding vulnerable children is no longer fit for purpose, and the pandemic must be seen as a catalyst for change. An updated system - 'children's services 2.0' should be based on key principles, including: innovation; interdependent partnership working (between statutory agencies and also charities); longer-term investment; and co-design with children, young people and families.

Fundamentally, the challenges facing children are too complex to address through our current ways of working, so if we are serious about improving outcomes, of 'levelling up' for the most vulnerable, we need radical change.

After more than a decade of reductions in funding available to local authorities, there has been a shift in spending from early to late intervention, meaning families are reaching statutory children's services in crisis, where the issues they face are multiple and often complex. Analysis by Barnardo's and other leading children's charities shows that local authority spending on early intervention services for children and young people fell from £3.5 billion to £1.9 billion between 2010/11 and 2018/19, a 46% decrease.¹ To support a family in this position requires intensive and expensive interventions. However, local authority budget cycles are often very short which limits the ability of services to plan **quality long term provision** – which families with

¹ <https://www.barnardos.org.uk/sites/default/files/2020-05/Summary%20of%20the%20analysis%20and%20deep%20dive%20reports%20-%20May%202020.pdf>

complex needs require. The short-term nature of budget cycles, combined with siloed budgets across public services for children (health, social care, education) which are constrained by in-cycle cash limits, means there is no mechanism to consider long-term investment return, such as the cost that is saved by other public services and society by supporting a family earlier.

A key learning from the pandemic is that commissioners and charities have focused on ensuring the continuity of service and innovation in service delivery to adapt to national and local lockdowns. This was achieved at pace, removing lengthy processes. Having **simpler, streamlined and more accelerated processes** that are accessible to grassroots organisations expands the pool of voluntary, community and social enterprise (VCSE) expertise local authorities can draw from. Additionally, working with established charities, like Barnardo's, to create a network of VCSE to deliver multi-partners programmes enables statutory authorities to harness community assets across sectors around social care needs – **See, Hear, Respond** is a good example of this model of delivery. Being able to capitalise on community assets and working with agility to meet evolving need should be the goal when deliver services to children and families, rather than through a prescribed solution. To achieve this way of working requires trust, co-design and iterative contract and grant management.

See, Hear, Respond

The Department for Education (DfE) funded Barnardo's to lead *See, Hear, Respond*. Set up to support children and young people affected by the pandemic, but who were 'hidden' and did not meet thresholds for statutory services, the partnership supported over 100,000 children and young people between its inception in July 2020 and when the funding ended in April 2021. This innovative, interdependent partnership brought together over 80 large and small, national and local charities and community-based organisations. Importantly, 74% of the funding went to partners, and smaller, local charities also benefited from capacity building, including in terms of support with policies, procedures and the ability to bid for future funding. This innovative partnership approach provided a blended offer to children, young people and families through an online support hub, online counselling and therapy, access to specialist group work, face-to-face 1:1 support for those most in need, detached youth work in places and spaces where children are exposed to risk, and support with reintegration into education.

Additionally, it also requires **better and more responsive integrated services that have a good understanding of children and families holistically**, rather than focusing on one issue. Barnardo's has found that forming what we call 'strategic partnerships' with local authorities, enables greater flexibility to collaborate and innovate, achieving change at a deeper level, that cannot be achieved through traditional transactional commissioning. Strategic partnerships focus on moving away from layering additional complexity onto an already complicated system, and instead focus on addressing the root cause of structural, societal and systemic disadvantage by adopting a 'systems change' approach.

Barnardo's now has several strategic partnerships with different local authorities. Key characteristics driving their success include strong governance and leadership;

dedicated resources to co-ordinate and drive innovation and design; strong communication across all levels of both organisations; shared vision, values and priorities; and trust and transparency.

Case study: Leicestershire Children's Innovation [Partnership](#)

In 2017, the council's medium-term financial strategy set out that £66million of savings need to be realised across the council by 2020/21, £4.3 million of which must come from children's social care. At the same time, the number of looked after children in Leicestershire was projected to grow, resulting in an estimated cost increase of £14.7 million by 2021/22. External residential placements made up 11.7 per cent of the total looked after children population. In addition to the financial challenges facing councils such as Leicestershire, there is also a national 'market sufficiency' challenge, in providing good value-for-money residential placements for looked after children with a multiplicity of complex needs. As a result of inadequate supply in the market, providers can negotiate fees outside of already procured contracts and 'cherry pick' the less complex children.

In response to these challenges, the council wanted to achieve a whole-system change. The vision was to **co-invest, co-design, co-produce and co-delivery** services that meet the needs of young people, from edge of care to leaving care, with a partner. In 2018, Leicestershire County Council (LCC) procured a strategic partnership through the Procurement Directive: Light Touch Regime Open Procedure. Unlike traditional contracts, the strategic partnership has a 2-tier contractual arrangement which outlines: (1) the Collaboration Agreement outlining the terms and conditions of the Partnership; (2) the Service Delivery Contract outlining the terms and conditions of commissioned services. The contract was awarded to Barnardo's in November 2018 and is up to 10 years working together across the whole of the children's social care system, including responding to new and emerging challenges, to improve outcomes for children and families in Leicestershire.

Barnardo's has invested dedicated charitable funds to develop and deliver the strategic partnership, ensuring relationships were developed and embedded into core services across the Children's Services and wider stakeholders. Together, the partnership has expanded its service offer by co-bidding for new opportunities. As a result, the partnership has evolved to include the delivery of the following services:

- Holiday Activity and Food Programme
- Family Group Conferencing
- Life Skills Programme

In addition to these services, the strategic partnership has co-designed a new and innovative residential care model where LCC capital investment has purchased the properties and Barnardo's will be the service delivery Partner for these residential settings. The benefits of a strategic partnership compared to traditional transactional commissioning has been the co-design, agile mobilisation, trust, transparency and collaboration in all aspect of the development and delivery of new services ensuring integrated pathways to improve the lived experience of children, young people and families.

What needs to change? Government support for to transform commissioning.

1. Incentivise interdependent partnerships, like *See, Hear, Respond*, that draw on the expertise and skill set of more than one organisation and sector to meet local needs. The benefit of VCSE is the added value charities bring alongside the service provision. This could include building local capacity and volunteering programmes.
2. Supporting public services to understand and navigate the use of Contract Procedure Rules to build confidence to develop strategic partnerships within a legal framework. Leicestershire example highlights how this can be done well.
3. Promote a 'From Procurement to Partnership' message. E3M, a Social Enterprise, has developed a [toolkit](#).
4. Offer funding streams to support dedicated resources (e.g. secondments between local authorities and those they partner with) to drive the establishment, mobilisation and delivery of Strategic Partnerships at a local level.

2. SOLAR – A new approach to mental health services

In Solihull, Barnardo's works with Birmingham and Solihull Mental Health NHS Foundation Trust and Autism West Midlands to deliver a fully integrated emotional wellbeing and mental health service called Solar for children and young people 0-19 years of age. It is designed to create a comprehensive system, designed around the needs of children and young people, which keeps children and young people healthy as well as treating those that are ill. The service prioritises resilience, partnership and co-production. Solar was set up as a service not about thresholds or tiers, but about timely access to appropriate support in line with children and young people's needs.

Traditionally CAMHS services are separated into four Tiers of support dependent on need, Tier 1 and Tier 2 services in particular would be provided by a number of different organisations and agencies. These Tiered services are often delivered by multiple agencies across multiple sectors, and there are several transition points, even within the Tiers. **Transition points are often when children are failed. The service replaces the previous tiered approach to CAMHS with a holistic response, reducing the number of transition points, so that *children can access the support they need when they need it.***

The service currently accepts children and young people, until their 19th birthday, who are residents in the borough of Solihull, go to school or college in the Solihull borough, or have a Solihull GP. By employing a single, multi-professional team of practitioners, including psychiatrists, psychotherapists and family support workers, Solar can be agile in adapting intervention strategies and in doing so uses resource more efficiently. As part of this partnership Barnardo's delivers the primary mental health support which is early support for children and young people experiencing difficulties with their emotional wellbeing and mental health Solar supports the following outcomes for children, young people and their families and carers:

- Improved emotional wellbeing and mental health for children, young people and their carers so that they are more resilient, able to manage their mental health needs and have a life which is not defined by their mental illness.

- Children and young people with emotional wellbeing and mental health needs are identified early and supported in community settings including schools, reducing the need for access to more specialist mental health services.
- Children and young people receive mental health services locally, within their own community and close to home, and do not need to be admitted to inpatient services.
- Young people experience a seamless transition to adult services.
- Parents and carers promote the emotional wellbeing of their children.
- Children, young people and their carers feel well informed and supported.
- Parents and professionals in universal services such as schools and primary care feel more confident about responding to emotional wellbeing needs and are clear about when and how to refer on for additional help.
- Improved outcomes for children and young people who are looked after and adopted through reduced placement disruption and breakdown. Children, young people and families design and influence the arrangements for emotional wellbeing and mental health services.

In March 2018, **National Mental Health Data Set showed that Solar was the only service in England to have met the national target of 30% increase in access to CAMHS by hitting a tremendous 34.7%.**

Solar, Molly's Story

Molly, aged 17, struggled to concentrate at college, experienced low mood and anxiety, and spent time being extremely tearful saying 'I just want to die', and had taken an overdose of sleeping tablets.

She had been prescribed citalopram and an antidepressant by a CAMHS practitioner, but a month later stopped taking the medication as she said it made her numb. She attributed it to the cause of her increased self-harming and feeling increasingly suicidal.

At Solar, Molly was offered psychotherapy and says of them, 'without the session I won't have that lightness when I leave the session hence, I manage to get here.' She has developed a broader vocabulary of feelings she experiences. The therapy has motivated her, and she has taken up activities such as kick boxing, which has encouraged her previously poor appetite and encouraged her to cook.