CABINET

26 NOVEMBER 2013

GATEWAY 4 PROCUREMENT POST PROJECT COMPLETION REVIEW: FAMILY GROUP CONFERENCE (FGC)

Portfolio Holder: Councillor Mike O’Brien, Children’s Services (Lead Member)
Councillor David Brake, Adult Services

Report from: Barbara Peacock, Director of Children and Adults Services

Author: Marilyn Morgan, Partnership Commissioning Manager
Phyllis Thompson, Acting Category Specialist (People)

Summary

This report seeks permission from the Cabinet to review the progress of the Family Group Conference (FGC) contract currently awarded to Family Action, the supplier as highlighted within 2.1.1 of this report.

The commencement and delivery of this procurement requirement was approved by Cabinet at Procurement Gateway 1 on 4 October 2011 (decision no. 140/2011) and subsequent approval for contract award was provided by Cabinet at Procurement Gateway 3 on 17 April 2012 (decision no. 78/2012).

This Procurement Gateway 4 report has been approved for submission to Cabinet after review and discussion at Children and Adults Directorate Management Team meeting on 1 October 2013 and Procurement Board on 13 November 2013.

1. Budget and Policy Framework

1.1 Post Project Appraisal / Contract Management

1.1.1 This procurement post project appraisal and its subsequent review is within the Council’s policy and budget framework and supports the identified Core Values, Strategic Priorities, Strategic Council Obligations and Departmental/Directorate service plans as highlighted within the Procurement Gateway 1 Report.
1.2 Statutory Requirements

1.2.1 Whilst not a statutory service in its own right, the FGC supports the Authority’s statutory safeguarding duties. The FGC model is an internationally recognised method of meeting the required outcomes for children on the edge of care and as such can prevent escalation of a child into care. Family Group Conferences are also recognised in court proceedings as providing solutions to a range of issues, including finding alternative carers for children.

1.2.2 The FGC model supports compliance with the Mental Capacity Act in supporting people to be central to decision-making processes. Additionally, the model supports increased safety of the vulnerable adult within improved family support and functioning.

1.3 Funding/Engagement From External Sources

1.3.1 Not applicable

1.4 Urgency Report

1.4.1 Not applicable.

2. Background

2.1 Contract Details

This contract is a Services contract.

2.1.1 Supplier Details

This Gateway 4 Report relates to the Family Group Conference contract currently delivered awarded to Family Action.

2.1.2 Contract Description

A Family Group Conference is a process led by family members to plan and make decisions for a child or vulnerable adult who is at risk. Young people and vulnerable adults are normally involved in their own Family Group Conference, although often with support from an advocate. It is a voluntary process and families cannot be forced to have a Family Group Conference.

Families, including extended family members, are assisted by an independent FGC coordinator to prepare for the meeting. At the first part of the meeting, social workers and other professionals set out their concerns and what support could be made available. In the second part of the meeting family members meet on their own to make a plan for the child/adult. The family should be supported to carry out the plan, unless it is not considered to be safe.
The current provider is contracted to provide

1. a minimum of 4 children’s services conferences per calendar month

2. a minimum of 1 conference per calendar month in relation to protecting Vulnerable Adults – this was a one year pilot running from July 2012 to June 2013, and was extended for a further year to June 2014.

3. access to advocacy in relation to adult conferences when deemed necessary by the contracting service

4. additional conferences in negotiation with the contracting service

5. access to conflict resolution when deemed necessary by the contracting service

Children’s Social Care Conferences
The model is now well established and recognised within child protection and children in need services as highly effective in building upon the strengths and knowledge of the wider family to provide an informed and appropriate package of support and monitoring and, where it is safe, avoiding children and young people being taken into care.

Conflict Resolution
The service is set up to respond immediately to referrals from Medway Children’s Social Care staff where parents are in dispute with either their children or their partner and the dispute could lead to the child being accommodated. In some cases this is a precursor to an FGC being held.

Vulnerable Adults - Pilot Programme
A pilot to extend FGCs to vulnerable adults resulted from a Safeguarding Vulnerable Adult case file audit. That audit revealed that vulnerable adults and their families who have been subject to a safeguarding investigation are rarely explicitly involved in the risk assessment process and protection plan decision-making. This adult protection process was effectively marginalising them.

The audit also highlighted the need for improved demonstration of robust protection plans involving the vulnerable adult. It was felt that having Vulnerable Adult FGCs would address these issues.

This programme supports Directorate Service Plans by enabling further development of Safeguarding Vulnerable Adults practice.

This pilot was originally planned to run for one year from 1 July 2012 to 30 June 2013, but was extended for a further year to 30 June 2014 to enable further work to be done to embed the FGC across Adult Services.

Advocacy
Advocacy support is available as part of the contract to support vulnerable adults to participate fully in an FGC, and advocacy for children and young people can also be put in place if required.
2.2 Permissions Required

2.2.1 This report provides Cabinet with a post project appraisal and seeks permission to continue this termed contract for remainder of the contract duration of 3 years plus 2 year extension, subject to the Cabinet’s further review of the action plan detailed below.

This request is on the basis that even though in the first year the contractor has fulfilled their requirements in accordance with the service specification and associated contract terms and conditions, this service has not been fully utilised by Children’s and Adult’s Social Care Teams with fewer referrals being made than anticipated in the case of the children’s FGC element, and few referrals and no conferences taking place with respect to the Vulnerable Adult FGC pilot.

Ofsted will look to use evidence of FGC being utilised as part of a strategy to prevent children coming into care. The Assistant Directors for Partnership Commissioning and Children’s Social Care will be working together to ensure use of this service is optimised.

<table>
<thead>
<tr>
<th>Action</th>
<th>Timescale</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Family Action Medway (FAM) senior staff will present to Children’s Social Care Management Team in order to agree service and provider actions to improve referrals</td>
<td>9 October 2013</td>
</tr>
<tr>
<td>2. FAM team restructure to enable focus on increasing referrals and monitor progress</td>
<td>Complete by 31 October 2013</td>
</tr>
<tr>
<td>3. All FAM staff have increased target of 70% conversion rate from referral to conference in their performance development plans (current is 60%), and 80% of referrals meeting specified timescales.</td>
<td>In progress, completion by 31 October 2013</td>
</tr>
<tr>
<td>4. FAM will visit all children social care teams and adult teams to raise the profile of FGC services</td>
<td>October to December 2013</td>
</tr>
<tr>
<td>5. FAM will develop rolling programme of team visits and engagement events as a continuation of (2)</td>
<td>Programme finalised by November 2013</td>
</tr>
<tr>
<td>6. FAM will institute virtual drop in sessions for social care staff wishing to talk through a potential referral or ask questions. These sessions may be via telephone or webinar</td>
<td>From October 2013 onwards</td>
</tr>
<tr>
<td>7. FAM will institute regular email update including case studies of successful conferences for circulation across social care teams and key stakeholders</td>
<td>By mid-October and ongoing, every 4 weeks</td>
</tr>
<tr>
<td>8. FAM will share progress data arising from internal work stream monitoring meetings with the commissioning lead</td>
<td>Fortnightly from September 2013</td>
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<tr>
<td>9. Monthly performance monitoring meetings</td>
<td>October 2013 onwards</td>
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</tbody>
</table>
3. Options

In arriving at the preferred option, the following options have been considered:

3.1 Conclude Current Contract and Provide Action Plan

The Children’s FGC service, whilst not statutory, is considered ‘best practice’ in supporting strategies to prevent children from coming into local authority care and has been successful in this aim despite the low level of referrals. This will also result in a reduction in higher cost foster placements.

Conflict resolution is an important option, which has enabled some cases to be resolved without further children social care input.

The Vulnerable Adult pilot within the contract has not generated referrals or conferences within the first year, although there are signs of improvement (three referrals are being processed at the time of writing).

Both the Vulnerable Adult and Children’s Social Care FGC elements of the contract will be reviewed against the action plan detailed in section 2.2.1 of this report.

3.2 Continue With Current Contract and Negate Any Further Gateway 4 or Gateway 5 Reporting Requirements

The option of continuing with the current contract for the remainder of the contract term without further Gateway 4 or Gateway 5 requirements is not a viable option. The low number of referrals from both Children’s and Adults’ services need to be addressed through robust management to raise the profile of the provision, with the results reviewed by Procurement Board.

3.3 Continue With Current Contract and Subject Contract to Further Gateway 4 and/or Gateway 5 Reporting Requirements

The option of continuing with the current contract for the remainder of the contract term and subjecting the contract to further Gateway 4 and/or Gateway 5 requirements has been considered and below are the advantages and disadvantages of this option:

Advantages
• Will allow for scrutiny of outcomes from the action plan due to be put in place to resolve the underuse of the FGC contract.
Continued scrutiny of current service provider’s activity levels for FGC.
Complies with procurement rules relating to the possible extension of the contract in 2015.

Disadvantages
None

3.4 Other alternative options

No alternative options have been identified.

4. Advice and analysis

4.1 Preferred Option

The following preferred option is recommended to the Cabinet:

Continuing with the current contract for the remainder of the contract term and subjecting the contract to further Gateway 4 requirements as outlined in 3.3.

The provider has performed within the requirements of the service specification and contractual requirements; however there have been insufficient referrals to the service. This is particularly marked in relation to FGCs for Vulnerable Adults.

4.1.1 Children’s Conferences

Medway has had a FGC service for a number of years and it was not unusual for seven of eight conferences to take place in one month. Significant changes in Children’s Social Care, in particular high turnover of staff, has contributed to the low number of referrals (averaging 4 a month). The conversion rate from referral to conference is approximately 60%. As a consequence of this low referral rate, only 31 conferences have been held within the review period compared to a target of 48.

Of the 31 cases that went to conference, 11 have been followed up with the individual social worker involved as part of this review. In 6 cases, in the professional judgement of the lead practitioners, the FGC was instrumental in avoiding a total of 11 children being taken into or remaining in care. This includes two unborn children.

For costs, please refer to exempt appendix.

Option 3.3 has therefore been recommended, as further scrutiny is required to ensure the measures being introduced to increase referrals have been effective and the service is being used to its full capacity.

4.1.2 Vulnerable Adult FGC Pilot

The referral rate to this service has been very poor, despite the efforts of the service lead and the provider in publicising it to teams and
management teams across Health and Social Care. Only 2 referrals were made in the first year, and neither went to conference (in one case the vulnerable adult ultimately declined and, in the other, circumstances for the adult improved so that no conference was necessary).

The provider and the commissioning service have agreed a target of four conferences to take place before the end of December 2013, together with the delivery of a robust engagement programme to raise the profile of the service and generate referrals from practitioners. Should the target not be achieved, the future of this aspect of the service will be reviewed. Delivery of the children’s element of the contract, and provision of advocacy, would not be affected by withdrawal of adult funding.

Option 3.3 has therefore been recommended, as further scrutiny is required to ensure the measures being introduced to remedy the situation have been effective and the service is being used to its full capacity.

4.1.3 Conflict Resolution

The process begins with individual meetings to prepare each party for a joint meeting between both parties and the mediator. There may be a number of individual meetings prior to the joint meeting; where one party is a young person more preparation is generally required.

- 23 conflict resolution referrals were received within the period of this review
- Of those, 18 cases were closed (in cases that have closed without a joint meeting it is usually because either one or both parties refuse to engage)
- 5 cases are ongoing
- 9 cases progressed to joint meetings between the mediator and the parties in conflict, and of those, 7 made successful agreements/plans for the future.

175 hours of conflict resolution were delivered in the first year. For costs, please refer to exempt appendix.

Conflict Resolution Case Example:

Initial referral from Children’s Social Care was for an FGC as there were some concerns that a member of the family had physically assaulted the child involved, which, if substantiated, could have led to the child being accommodated. It transpired that the main issue was that the separated parents did not get on and struggled to communicate concerning their 5-year-old child, and they were now involved in legal proceedings to resolve contact issues. After one joint meeting an agreement was formulated. After one month this was reviewed. Both parents were happy with the agreement made previously, felt that they were able to communicate better, and contact had been easier. They both explained they had found the conflict resolution process helpful and it gave them useful techniques for the future. This successful outcome meant a more secure environment for the child (high conflict parental separation is
associated with poor outcomes for children), and time and cost saving related to avoidance of further social work involvement.

### 4.1.4 Advocacy

No advocacy has taken place. As this is paid for on an hourly basis, no cost has been incurred.

### 4.1.5 Procurement Project Outputs / Outcomes

The following procurement outcomes/outputs identified as important at Gateway 1 to the delivery of this procurement requirement and identified as justification for awarding the contract at Gateway 3, have been appraised in the table below to demonstrate how the procurement contract and corresponding supplier has delivered said outcomes/outputs.

<table>
<thead>
<tr>
<th>Outputs / Outcomes</th>
<th>How will success be measured?</th>
<th>Who will measure success of outputs/ outcomes</th>
<th>When will success be measured?</th>
<th>How has procurement contract delivered outputs/outcomes?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Where safe to do so, to reduce the number of children coming into the care of Medway Council.</td>
<td>Reduction of the number of children coming into the care of Medway Council</td>
<td>Children’s Social Care</td>
<td>The measurement will be an ongoing process.</td>
<td>At least 11 children currently not in care who were in care or on the edge of being looked after</td>
</tr>
<tr>
<td>2. Where safe to do so, children remain within the family</td>
<td>The outcome of the conference will be a child remaining with the family where safe to do so</td>
<td>Children’s Social Care</td>
<td>At the outcome of the FGC and then ongoing</td>
<td>6 conferences identified where children have remained with their family subject to a robust plan, or have been returned to their family</td>
</tr>
<tr>
<td>3. Comply with the courts’ request to hold a FGC prior to court proceedings</td>
<td>Reduction in the time taken in court proceedings</td>
<td>Children’s Social Care</td>
<td>Ongoing</td>
<td>Following the Public Law Order outline should ensure that this outcome is achieved. This outcome needs further evaluation.</td>
</tr>
<tr>
<td>4. Compliance with Mental Capacity Act in supporting people to be central to decision-making process, when they have been the victim to an allegation of abuse</td>
<td>Increased involvement and satisfaction of customers who are subject to safeguarding adults’ process</td>
<td>Adult Social Care</td>
<td>At the outcome of the FGC and then ongoing</td>
<td>No outcomes to date</td>
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</tr>
<tr>
<td>5. Increased safety of vulnerable adult which increases family support and functioning</td>
<td>Protection (safety) plans are in place agreed by all members of FGC</td>
<td>Adult Social Care</td>
<td>At the outcome of the FGC and then ongoing</td>
<td>No outcomes to date.</td>
</tr>
<tr>
<td>6. The Vulnerable adult protected as part of a FGC feels safer</td>
<td>Provider reports, client surveys and feedback</td>
<td>Adult Social Care</td>
<td>At the outcome of the FGC and then ongoing</td>
<td>No outcomes to date.</td>
</tr>
</tbody>
</table>

### 4.1.6 Procurement Project Management

This procurement project will be taken through the remainder of the Gateway Procurement Process by Category Management and Partnership Commissioning.

### 4.1.7 Post Contract Award Contract Management

Contract Management will continue to be resourced and managed via Children’s Social Care for the children’s element (supported by Partnership Commissioning), and the Safeguarding Adults service for the adult’s element (also supported by Partnership Commissioning).

### 4.1.8 Other Issues

There are no other issues that could potentially impact the remainder of this contract term.
4.1.9 TUPE Issues

Further to guidance from Legal Services, Human Resources and the Strategic Procurement Team, it was identified at Gateway 1 that as this is a Services related procurement contract, TUPE did apply.

The recommended contract award at Gateway 3 resulted in 3 employees being affected by TUPE and transferring as a result of the incumbent provider from the old contract not being successful as part of the previous procurement tender process.

Further to this, there are no further TUPE issues to consider at this stage.

5. Risk Management

5.1 Risk Categorisation

The following risk categories have been identified as having a linkage to this procurement contract at this Gateway 4 Stage:

<table>
<thead>
<tr>
<th>Risk Categories</th>
<th>Outline Description</th>
<th>Risk Likelihood</th>
<th>Risk Impact</th>
<th>Plans To Mitigate Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Procurement process</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contractual delivery</td>
<td></td>
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<tr>
<td>Service delivery</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Reputation / political</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health &amp; Safety</td>
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</table>

**Risk Categories**

- Procurement process
- Contractual delivery
- Service delivery
- Reputation / political
- Health & Safety
- Equalities
- Sustainability / Environmental
- Legal
- Financial
- Other/ICT*

**Outline Description**

- Internal funding pressures lead to the need to reduce or terminate the funding
- Funding for the adult element of the contract is reduced

**Risk Likelihood**

- A=Very High
- B=High
- C=Significant
- D=Low
- E=Very Low
- F=Almost Impossible

**Risk Impact**

- I=Catastrophic
- II=Critical
- III=Marginal
- IV=negligible
- V=Impossible

**Plans To Mitigate Risk**

- The contract documents state that the contract is subject to funding availability
- As (a) Delivery of the children’s element of the contract would
<table>
<thead>
<tr>
<th></th>
<th>or unavailable</th>
<th></th>
<th>not be affected by withdrawal of adult funding</th>
</tr>
</thead>
<tbody>
<tr>
<td>c) Legal</td>
<td>Delay in being granted court orders increased legal costs, and care costs of the child along with the risk of the authority being challenged by the courts.</td>
<td>D</td>
<td>To follow the PLO (Public Law Outline), there is a requirement to carry out ‘kinship assessment’ prior to a court order being granted. Taking account of this requirement pre-empts this risk.</td>
</tr>
<tr>
<td>d) Equalities</td>
<td>FGC delivery is not culturally sensitive</td>
<td>D</td>
<td>Robust contractual requirements and monitoring to continue.</td>
</tr>
<tr>
<td>e) Financial</td>
<td>Monthly contract cost being paid even though service is not being used.</td>
<td>A</td>
<td>Plans in place to increase referrals. Target for adult FGC to be reached by 31 December. An average of four referrals a month necessitates a considerable amount of work, even where no conference takes place. There is the facility within the contract to reduce payment or divert to pay for advocacy/conflict resolution. However, this carries a risk of the provider</td>
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</tbody>
</table>
being unable to sustain the service. Referral rates will be closely monitored over the next 6 months.

6. Consultation

6.1 Internal (Medway) Stakeholder Consultation

As part of this ongoing procurement contract management, the following mandatory internal stakeholder consultation is required:

- Consultation with Adult Social care
- Children’s Social Care Operational Team
- Children’s and Adults DMT

Managers from Children’s Social Care and Safeguarding Adults have attended monitoring meetings, which take place on a quarterly basis and are able to address any concerns and provide feedback to the provider.

As part of this review, 11 social workers that have been involved in a children’s Family Group Conference in the first year of delivery were contacted for feedback on the outcome and process. Five were involved in successful conferences where a family plan was agreed, but all 11 were satisfied with the high quality of service received from Family Action.

Comments included:

- “organised very quickly”
- “difficult case run well”
- “remarkable efforts…really brilliant”

6.2 External Stakeholder Consultation

As part of this ongoing procurement contract management, no external stakeholder consultation is required, however the provider is undertaking a satisfaction survey as part of contractual requirements.

Conference participants complete feedback forms post-conference, marking the experience on a scale of 1 to 10 (with 10 being highly satisfied). Of 142 responses, 48% rated the conference at 10, and 21% rated it at 9.

There has been one formal complaint during the life of the contract (misspelling a name) that was resolved and mitigation put in place to avoid repetition.
7. **Procurement Board**

7.1 The Procurement Board considered this report on 13 November 2013 and supported the recommendations set out in paragraph 9 below.

8. **Financial and legal implications**

8.1 **Financial Implications**

8.1.1 This procurement contract and its associated delivery as per the preferred option highlighted at Section 4.1 ‘Preferred Option’ and the recommendations at Section 9, delivered non-recurrent savings against the agreed budget, during the first year of operation. Please refer to exempt appendix:

8.1.2 Detailed finance and whole-life costing information is contained within Section 2.1 Finance and Whole-Life Costing of the Exempt Appendix.

8.2 **Legal Implications**

8.2.1 This procurement contract and its associated delivery as per the preferred option highlighted at Section 4.1 ‘Preferred Option’ and the recommendations at Section 9, has the following legal implications which the Cabinet must consider:

8.2.2 The statutory position is set out at section 1.2 of this report and there are no other legal implications that affect the preferred option.

8.3 **Procurement Implications**

8.3.1 This procurement contract and its associated delivery as per the preferred option highlighted at Section 4.1 ‘Preferred Option’ and the recommendations at Section 9, has the following procurement implications which the Cabinet must consider:

8.3.2 Category Management supports the recommendation at paragraph 4.1 for the need for a further Gateway 4 to be brought back to Procurement Board in 2014. This is to ensure the robust monitoring of the current contract against performance for both the adults’ pilot and children’s Family Group Conferences. Whilst the service is happy that the contractor has fulfilled their requirements and has performed well, this provision has not been utilised to the level that was contracted.

8.4 **ICT Implications**

8.4.1 This procurement requirement does not have any ICT implications.
9. Recommendations

9.1 Cabinet is requested to:

- approve the Gateway 4 and the continuation of the service as set out in paragraph 4.1 of the report (preferred option)
- agree a further report on progress against the Action Plan to be reported to Cabinet in March 2014.

10. Suggested reasons for decision(s)

- To give time to implement the proposed action plan to increase the usage of the FGC provision
- The need to monitor service usage and the number of referrals over the next year
- To review if there is a need for the service provision to remain at this level or be reduced.

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Title: Partnership Commissioning Manager

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Email: marilyn.roe@medway.gov.uk

Background papers

The following documents have been relied upon in the preparation of this report:

<table>
<thead>
<tr>
<th>Description of document</th>
<th>Location</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gateway 1 Report</td>
<td><a href="http://democracy.medway.gov.uk/ieListDocuments.aspx?CId=115&amp;MId=2334&amp;Ver=4">Link</a></td>
<td>4 October 2011</td>
</tr>
</tbody>
</table>