

Public Document Pack

Executive Member Decisions

Friday, 30th November, 2018

Time Not Specified

AGENDA

1. **Tier 4 Framework - Commissioning of Residential Substance Misuse Rehabilitation**
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Date Published: 3rd December 2018
Harry Catherall, Chief Executive

EXECUTIVE MEMBER DECISION



REPORT OF:	Executive Member for Health and Adult Social Care
LEAD OFFICERS:	Director of Adult Social Services (DASS) Director of Public Health
DATE:	30 th November 2018

PORTFOLIO/S AFFECTED: Health and Adult Social Care

WARD/S AFFECTED: All

SUBJECT: Commissioning of Residential Substance Misuse Rehabilitation, Direct Access and In-patient Detoxification placements.

1. EXECUTIVE SUMMARY

This paper sets out a series of recommendations whilst also providing a summary of historic arrangements with regards to the commissioning of tier 4 substance misuse services. These include: In-patient Detoxification (medically managed and medically monitored), Residential Rehabilitation placements and Direct Access provision.

Direct Access enables access to community or in patient based detoxification in partnership with community substance misuse providers which is enhanced by timely access to a secure bed in a residential rehabilitation setting, facilitated locally for people who require a safe place to live and are experiencing a range of multiple and more complex needs.

It is recommended that the Blackburn with Darwen Borough Council (BwDBC) commissions a newly agreed Dynamic Purchasing System (DPS) which is similar to an electronic DPS agreement. This involves the following: -

- New suppliers can join the DPS at any time as long as they meet the specified criteria.
- Entry to and exit from the DPS will be managed completely via an electronic process.
- BwDBC as the contracting authority will not impose any limit on the number of suppliers that may join the DPS.
- All prospective suppliers must be assessed by BwDBC as the contracting authority within 10 working days of their application once it has been established for the first time.

By tendering a DPS our local provision can be aligned to a series of refreshed service specifications which will meet local and national requirements, whilst improving overall outcomes for people who reside in Blackburn with Darwen (BwD). The arrangement will also provide an opportunity to include the Direct Access model of delivery which has been piloted in BwD since 2014 and provided by the local charity THOMAS. This has proved to be a successful Tier 4 option for 'revolving door' clients and has demonstrated a number of positive outcomes including reduced demand on wider parts of the health and social care system e.g. the hospital, the housing needs team and within the criminal justice system.

Both quality and value for money will be considered as a priority for the DPS and the proposed

arrangement will widen opportunities for improved integrated pathways of care, allowing us to build on a systematic approach to improving longer term outcomes within the development of the Local Integrated Care Partnership and 'new models of care' in BwD. Interdependency will continue to be developed with; the community substance misuse prevention, education, treatment and recovery service currently provided by CGL (Change Grow Live), the adults and children's social work teams, integrated neighbourhood teams, complex case panels, MEAM and Transforming Lives.

2. RECOMMENDATIONS

That the Executive Member:

- Approves the commencement of a joint tender exercise between Public Health, Adults Social Care and the Strategic Commissioning service to establish a DPS of suitable providers who will be required to sign up to a contractual arrangement with BwDBC.
- Agrees that the DPS considers the provision of In-patient Detoxification (both medically managed and medically monitored), Residential Rehabilitation placements from across a wide geographical footprint to ensure choice, Direct Access options for both males and females which will be based upon individual need.
- The timescales for this tender to be undertaken and completed for this process are to start in November 2018. Final agreement back to Executive Members to award the contract in January 2019. The anticipated contract start date for this commission is the 1st April 2019.

3. BACKGROUND

Over the past four years both strategic and operational developments have led to an improved integrated provision of abstinence based recovery substance misuse services for adults who experience addiction to both drugs and alcohol.

Pathways have improved between community, in-patient and residential services and the workforce supporting the implementation of such pathways has successfully embraced a range of innovative developments and change of practice. Learning has been shared across the system to enhance the outcomes achieved within joined up pathways and a multiagency 'plan around the person' approach. This is aligned to wider strategic developments, the concept of Transforming Lives and the Local Integrated Care Partnership.

An example of such progress has included the development of the Direct Access Service provided by the local Voluntary, Community and Faith Sector (VCFS) service THOMAS which has enabled us to trial a different way of working. This has brought together referral pathways from the community, the hospital and the clinical provision of community based detoxification via the public health commissioned service CGL Inspire. This has involved the utilisation of a number of locally available beds for 'local people' within the local residential rehabilitation setting at Witton Bank. The project has proved particularly successful where individuals were previously living in either temporary accommodation, a HMO or of no fixed abode. The provision has embraced the treatment of people with a number of physical and mental health challenges, many who have experienced long term conditions, Adverse Childhood Experiences (ACEs), trauma, homelessness, and several periods of incarceration and complex lifestyles.

During 2017-18 (to end of Q3) the following successful completion rates have been achieved at the point of exiting the Tier 4 services:-

- In-patient detoxification 96%
- Residential rehabilitation 82%

- Direct Access 75%

The commissioning of in-patient detoxification services to date was established under a DPS agreement which was originally commissioned on a PAN Lancashire basis. The overall contract management responsibilities were facilitated by Blackpool Primary Care Trust (PCT) on behalf of all drug and alcohol commissioners from across the geographic footprint. This arrangement continued informally after the transition of PCT business into the Local Authorities in 2013 with Blackpool Council via a Public Health contract until 2014/15. From that point in time BwDBC notified all providers on the DPS that the contract management would continue for BwD residents via a local Public Health contract. All placement agreements, monitoring, reporting and payment for placements have been facilitated by the Public Health commissioners and have been assessed via small multi-agency panel. Both Blackpool Council and Lancashire County Council have since retendered their DPSs at different times.

Residential Rehabilitation services have historically been commissioned on an individual social care contract basis via service specifications which have not been reviewed for a number of years. Specified social workers have assessed and reviewed placement referrals, requested the funding for the placements and have worked in an integrated ways with the commissioners, the community detoxification and nursing wellbeing team provided by CGL Inspire and as part of the multi-agency panel arrangement.

The priority locally is to utilise community based rehabilitation services where ever possible and to keep people in their own homes but on some occasions these type of Tier 4 services are absolutely necessary to keep people alive, aid recovery and keep them safe from harm. The tendering of a DPS provides an opportunity to build on the consideration of individual detoxification interventions, direct access and residential rehabilitation placements as joined up and complimentary packages of care. Commissioners will also be able to test the market for improved quality, as well as new and innovative ways of working, building on a better understanding of the root causes of behaviours and lessons learnt over the past eight years.

Outcomes will be monitored to ensure improved ongoing aftercare and move on via suitable accommodation where required as well as improved circles of support to ensure connection with positive peers, family and friends linked to the step down principles of Transforming Lives.

4. KEY ISSUES & RISKS

The Direct Access Pilot has been running since 1st Jan 2014 and recent evaluation has demonstrated that it has effectively engaged a number of vulnerable and high risk clients who would have found it extremely challenging to access effective abstinence based recovery in the community due to their chaotic lifestyles, complexities and problematic behaviours. Clients who have accessed the service have reported patterns of frequent hospital admission prior to engagement and many have had a history of offending with numerous episodes of incarceration.

The majority of service users who require tier 4 interventions have experienced very poor physical and mental health and some have accessed in the past directly from prison or hospital without a robust longer term support plan in place.

Without a continued option for Direct Access considerable demand on the wider system could re-emerge. A number of Direct Access clients have been in contact with a range of community prescribing services on and off for prolonged periods of time, the longest being in and out of contact with treatment agencies for as long as 25 years. BwD's drug and alcohol strategic needs assessment (2014-15) demonstrated that the longer a person has been 'in and out' of contact with community substance misuse treatment services, particularly where this is in excess of a two year timescale and where they are struggling to maintain a safe place to live, the more likely it was that they would

continue to represent to a range of services without achieving improved long term sustainable outcomes. Clients who have accessed the local facility have expressed that they would have been too chaotic to sustain any form of pre-rehabilitation interventions, groups or programmes and that Direct Access has enabled this within a safe residential environment to achieve and sustain stabilisation.

Locally identified clients, many of whom currently resided in the HMO/ Hostel environment, have come through the Direct Access project and been given priority for placements within move-on accommodation. This has provided an enhanced offer, creating clear pathways of referral via joint work with a number of other key commissioned services that provide community detox, access where needed to inpatient detox, daily recovery support, peer mentoring and support to reduce offending behaviour.

The original successful PAN Lancashire Inpatient Detoxification Framework has provided substantial improvement over the past eight years with a rate of successful completions ranging from 80% in 2013-14 to 96% in 2017-18. There is still a range of well performing providers on the current Framework but by retendering it will allow for stimulation of the market with the opportunity to review and vary the specifications, consideration of new treatment options, innovation and opportunities for combined packages of support which may be more cost effective.

The retender would also allow for the inclusion of Residential Rehabilitation providers on the DPS with the opportunity for combined packages of support, flexible timescales and innovative offers. Recent outcomes from Residential Rehabilitation Services have demonstrated improved therapeutic interventions within shorter timescales however the current list of providers being utilised by BwD is somewhat limited. These packages of care should be designed to complement the community service preparation prior to entry. This may include a referral to an In Patient Detox facility as stage one as well as post rehab placement recovery support via community recovery services, mutual aid networks and developing mutual interest groups. This allows for an established and productive longer term recovery journey which is often enhanced by positive peer support, access to education, training and employment and opportunities for improved accommodation which is all widely accepted as complimentary.

To date Direct Access has been commissioned on a block contract basis which has involved the securing of eleven dedicated beds initially and more recently six beds for local males at THOMAS Witton Bank. By adding this type of facility to the DPS it should enable an opportunity for complex females to also access a similar provision. What we cannot anticipate is the potential demand for such beds nor can we estimate potential activity but this will be managed and monitored regularly by the Tier 4 panel which will include the responsible commissioners who are required to manage any funding available and as a priority consider community interventions as the first priority.

5. POLICY IMPLICATIONS

As part of the strategic vision across public health and adult social care, there is a need to consider options for people experiencing multiple disadvantage, vulnerabilities and complex needs as they cost the Borough a significant amount of money. Their overall life chances are poor so it is important that we intervene as early as possible to reduce the prevent them getting caught up in the 'revolving door'. This is in line with the NHS Five Year Forward View, the Sustainable Transformation Programmes (STPs) and the transformation of health and social care locally is being considered across Pennine Lancashire. This model of delivery also aligns to the local strategic developments of Transforming Lives and enhances our local Making Every Adult Matter (MEAM) approach which is supported by a collation of national charities.

A combined DPS will create improved wellbeing and positive health and social care outcomes with improved value for money in line with the latest National Drug Strategy 2017. We envisage that the developments will also be aligned to any future National Alcohol Strategy; this is currently being

developed by a range of central Government departments.

This proposal contributes to BwD Borough Council's strategic priorities of 'Improving Health & Wellbeing', 'Safeguarding the Most Vulnerable' and 'Making Your Money Go Further' and has considered BwD's Integrated Strategic Needs Assessment.

The tender documentation will include notification that there will be an option for commissioners from the across wider Integrated Care System to access the DPS framework at any time during the lifetime of the framework.

6. FINANCIAL IMPLICATIONS

Provision of a DPS allows BwDBC the ability to consider a combination of in-patient detox and residential rehabilitation services and to quality assess the providers without any financial commitment. It will be commissioned on a 'no guaranteed activity' basis from the start of the contract. Individual support packages can be called off dependent on specified need and provision will be made possible via the range of specific offers detailed by the list of successful providers.

The allocated departmental budgets will continue to be monitored by the lead commissioners to ensure efficiency and best value at all times. Although the DPS will mean a list of quality approved providers the choice directive can still be adhered to if a service user does not find a suitable option from the DPS. Where specific or unusual needs are identified the DPS does not disallow BwDBC from spot purchasing outside of the DPS.

All commissioned placements will be restricted to local residents and a combination of in patient detox and residential rehab packages will provide opportunities for efficiency and better value for money.

Improved outcomes will also provide opportunities for the demonstration of improved return on investment. Longer term savings will be achievable in relation to the costs associated with the reductions in reoffending, improved health and social care outcomes, improved access to better housing, reduced hospital attendances and admissions, improved engagement in recovery, education, training and employment. The following figures demonstrate investment over the past five years into residential rehabilitation, direct access and in-patient detoxification. Ongoing expenditure will be monitored regularly via the panel arrangements with lead commissioners and finance officers working together to ensure costs do not escalate beyond what is acceptable given the increasing pressures on local authority budgets.

Year	2013/14	2014/15	2015/16	2016/17	2017/18
Residential Rehabilitation expenditure	131,050	171,986	164,302	227,369	334,340
THOMAS Direct Access expenditure	217,515	69,282	93,219	93,219	93,219
In-patient Detoxification expenditure	93,431	132,224	179,646	159,208	120,000

7. LEGAL IMPLICATIONS

The tender process will need to comply with the EU procurement rules and the Councils Contract and procurement procedure rules and be sufficiently wide in scope to allow other interested organisations to benefit from the DPS agreements if they chose to do so.

The DPS Contract will be in a form approved by the legal officer in the Local Authorities legal team.

8. RESOURCE IMPLICATIONS

The procurement process and evaluation of the DPS tender will be completed in partnership with the Strategic Commissioning team with support from corporate procurement, finance, specialists from Public Health and Adults Social Care, partners from the CCG will be asked to assist with clinical governance requirements as required.

Senior management and administrative resource will be met through existing Public Health, Social Care and Strategic commissioning, financial changes will be monitored in partnership with the Council's finance department.

9. EQUALITY AND HEALTH IMPLICATIONS

Please select one of the options below. Where appropriate please include the hyperlink to the EIA.

Option 1 Equality Impact Assessment (EIA) not required – the EIA checklist has been completed.

Option 2 In determining this matter the Executive Member needs to consider the EIA associated with this item in advance of making the decision. *(insert EIA link here)*

Option 3 In determining this matter the Executive Board Members need to consider the EIA associated with this item in advance of making the decision. *(insert EIA attachment)*

10. CONSULTATIONS

A consultation workshop on 25th of July 2018 with input from key members of the local Tier 4 panel, clinicians, interdependent providers, social workers and people with lived experience from the VOICE user network.

A market engagement exercise was also undertaken on the 7th September 2018 which included various providers and a service user representative.

VOICE substance misuse service user network is consulted on a regular basis by commissioners from Public Health with regards various service developments. Requirements and feedback from their latest report have been considered in the development of this tender and they will continue to be consulted on re: the requirements of the service specifications and service provision throughout the lifetime of the DPS.

11. STATEMENT OF COMPLIANCE

The recommendations are made further to advice from the Monitoring Officer and the Section 151 Officer has confirmed that they do not incur unlawful expenditure. They are also compliant with equality legislation and an equality analysis and impact assessment has been considered. The recommendations reflect the core principles of good governance set out in the Council's Code of Corporate Governance.

12. DECLARATION OF INTEREST

All Declarations of Interest of any Executive Member consulted and note of any dispensation granted by the Chief Executive will be recorded and published if applicable.

VERSION: 2

CONTACT OFFICER:	Karen Cassidy
DATE:	21 st September 2018
BACKGROUND PAPER:	

EQUALITY IMPACT ASSESSMENT CHECKLIST

This checklist is to be used when you are uncertain if your activity requires an EIA or not.

An Equality Impact Assessment (EIA) is a tool for identifying the potential impact of the organisation's policies, services and functions on its residents and staff. EIAs should be actively looking for negative or adverse impacts of policies, services and functions on any of the nine protected characteristics.

The checklist below contains a number of questions/prompts to assist officers and service managers to assess whether or not the activity proposed requires an EIA. Supporting literature and useful questions are supplied within the [EIA Guidance](#) to assist managers and team leaders to complete all EIAs.


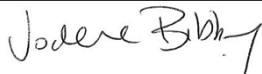
Service area& dept.	Adults and Public Health	Date the activity will be implemented	01/04/2019
Brief description of activity	Procurement of Substance Misuse Services – Tier 4 Detoxification and rehabilitation Framework 2018		
Answers favouring doing an EIA	Checklist question		Answers favouring not doing an EIA
<input checked="" type="checkbox"/> Yes	Does this activity involve any of the following: - Commissioning / decommissioning a service- Budget changes - Change to existing Council policy/strategy		<input type="checkbox"/> No
<input type="checkbox"/> Yes	Does the activity impact negatively on any of the protected characteristics as stated within the Equality Act (2010)?		<input checked="" type="checkbox"/> No
<input type="checkbox"/> No <input type="checkbox"/> Not sure	Is there a sufficient information / intelligence with regards to service uptake and customer profiles to understand the activity's implications? SU Feedback, Co production applied, Volunteer programme. Service monitoring		<input checked="" type="checkbox"/> Yes
<input type="checkbox"/> Yes <input type="checkbox"/> Not sure	Does this activity: Contribute towards unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act <i>(i.e. the activity creates or increases disadvantages suffered by people due to their protected characteristic)</i>		<input checked="" type="checkbox"/> No
<input type="checkbox"/> Yes <input type="checkbox"/> Not sure	Reduce equality of opportunity between those who share a protected characteristic and those who do not <i>(i.e. the activity fail to meet the needs of people from protected groups where these are different from the needs of other people)</i>		<input checked="" type="checkbox"/> No
<input type="checkbox"/> Yes <input type="checkbox"/> Not sure	Foster poor relations between people who share a protected characteristic and those who do not <i>(i.e. the function prevents people from protected groups to participate in public life or in other activities where their participation is disproportionately low)</i>		<input checked="" type="checkbox"/> No
FOR = 1	TOTAL		AGAINST = 5

Will you now be completing an EIA?

Yes

No

The EIA toolkit can be found [here](#)

Assessment Lead Signature	
E&D Lead Signature	
Date	11/09/2018

Agenda Item 2

EXECUTIVE MEMBER DECISION



REPORT OF:	Executive Member for Neighbourhood and Prevention Services Executive Member for Children's Services
LEAD OFFICERS:	Director of Localities and Prevention Director of Children's Services
DATE:	30th November 2018

PORTFOLIO/S AFFECTED:	Neighbourhood and Prevention Services	Children's Services
WARD/S AFFECTED:	All	

SUBJECT:

Tender for Domestic Abuse 2019-22 (possibility to extend to 2024)

1. EXECUTIVE SUMMARY

The purpose of this paper is to update the elected member on the Domestic Abuse services, both community and refuge based, and to request approval to undertake a procurement / tender exercise for a core offer of support across all levels of risk.

Stakeholder workshops were undertaken during May, June & July to inform the development of the local Domestic Abuse delivery model, which were successful in engaging a wide range of agencies, professionals and service users. Good progress has been made on developing a draft delivery model, and a steering group, along with a series of task and finish groups are in place to develop the implementation plans.

It is proposed to retender the current specialist provision contracted to support victims of domestic abuse as below

- Lot 1 - Community Service; including Independent Domestic Violence Advocates (IDVA), victims recovery programmes, perpetrator courses etc – currently delivered by Changing Lives
- Lot 2 Supporting People; Accommodation Based Support – providing refuge accommodation for victims fleeing Domestic Abuse currently delivered by Blackburn Darwen and District Without Abuse – The Wish Centre and Humraaz
- Lot 3 - Supporting People; Floating support, supporting people to stay safe in their own homes currently delivered by BDDWA – The Wish Centre

Supported by the investment of a range of partner agencies a service review exercise has been undertaken, developing three new service specifications for the above lots. We are now in a position to publish the tender documents on the chest to allow the continuation of this core service in line with EU procurement requirements and the Councils own Contracts and Procurement procedure Rules ..

2. RECOMMENDATIONS

That the Executive Member:

- i. Notes and agrees the content of this report
- ii. Approves the intention to commence the tender process for Domestic Abuse community and refuge, to enable a new contract to be in place by 1st April 2019
- iii. Delegate authority to manage the process to the Director of Adult Services and Prevention

- iv. Approve a senior officer lead review of submissions and make recommendation on outcome of the process
- v. Delegate authority to approve final appointment(s) to the Director of Adult Services and Prevention in consultation with the Executive Member for Neighbourhood & Prevention Services and the Executive Member for Children, Young People & Education.

3. BACKGROUND

The Community Safety Team provides policy support and operational governance in support of the Domestic Abuse Strategic Board (DASB). The DASB recently published the Domestic Abuse Strategy 2018-23 which outlines 4 priorities for Domestic Abuse;

- Prevention and early intervention
- Protecting those at greatest risk of harm
- Partnership working
- Pursuing perpetrators

The community offer is holistic and comprises six elements:

- IDVA - 3 tiered response service
- Sanctuary programme
- Mentoring & counselling services
- Voluntary perpetrator scheme
- Victims Programme
- Statutory and non-Statutory front line training to SafeLives standard
- Education programme to schools

The specialist refuge contracts aim to;

- Provide short term accommodation for those escaping Domestic Abuse
- Stabilise the crisis situation
- Work with service users, housing needs and other agencies to secure an exit from the service
- Develop the service users capacity to live independently in the community and have the skills to maintain a tenancy
- There is a dedicated contract supporting those from the BME community with specialist provision

It is the intention of the retendering process to advertise three lots of service provision as previously provided and outlined in the Executive Summary, with the opportunity for organisations to bid for single lots or combined services.

4. KEY ISSUES & RISKS

The commission is required in order to:

- Protect vulnerable people and support victims of crime in line with our statutory duties.
- Provide a holistic domestic abuse service which meets the need of the people of Blackburn with Darwen
- To provide the best value, highest quality service for the residents of Blackburn with Darwen.
- Provide a service model that ensures safe, compliant, quality services which are effective and efficient and meet critical needs within this borough as required and inspected by Ofsted and Her Majesty's Inspectorate of Constabulary and Fire & Rescue Services.

Robust performance management and monitoring arrangements will be in place for the life of this contract. These will be in the form of quarterly evidenced-based report cards, which will evidence better outcomes which can be measured on quality of service and value for money. Quarterly provider

meetings will take place as a tool for monitoring and evaluating the performance of the contract.

The new provider(s) will be expected to attend the quarterly Strategic Board; this will ensure governance arrangements are in place and adhered too. In addition to this the service managers will also have to attend the operational meetings as a key member of the group, to provide updates on services and raise any areas of concern.

5. POLICY IMPLICATIONS

The Domestic Abuse services will be tendered in line with national guidelines and evidence base including:

- Domestic Violence, Crime and Victims Act 2004
- The Protection from Harassment Act 1997
- The Female Genital Mutilation Act 2003
- The Serious Crime Act 2015
- The Homelessness Act 2002
- Home Office: Ending Violence Against Women and Girls Strategy 2016-2020
- Home Office: Violence Against Women and Girls National Statement of Expectations
- Violence Against Women and Girls Ready Reckoner Tool
- NICE Guidance: Domestic Violence and Abuse – Multi Agency Working
- Department for Education: Keeping Children Safe in Education
- Blackburn with Darwen Joint Strategic Needs Assessment 2016-2019
- Blackburn with Darwen Domestic Abuse Strategy 2018-23
- Blackburn with Darwen Review in to ACE – Adverse childhood Experiences
- Independent evaluation of Multi-Agency Risk Assessment Conference (MARAC) – Dr Teresa Young 2016
- Independent evaluation of Perpetrator services – Dr Teresa Young 2018
- Independent evaluation of Complex Case Hub – Dr Teresa Young 2018
- SafeLives Insights IDVA National Data Set

6. FINANCIAL IMPLICATIONS

The Community Safety Team manages this commission on behalf of the Domestic Abuse Partnership with funding identified from cash limited budget (including Supporting People budget transferred from ASC), Public Health internal commission and PCC grant. Further additions to the value and specification may be made as further external investment is in the process of being approved.

The contract will be for three years with potential for a further year and then a further year subject to funding still being available; satisfactory performance and fundamental change in legislation.

There is a 6 month variation and or cancellation option built into the contract to allow for unexpected changes in budgets given the complexities of government, departmental and partnership grants which fund this programme.

	Community Service	Floating Support	Accommodation based services	Total
Year 1	290,000	35,100	79,200	404,300
Year 2	290,000	35,100	79,200	404,300
Year 3	290,000	35,100	79,200	404,300
Sub Total				1,212,900
Option to extend year 4	290,000	35,100	79,200	404,300
Option to extend	290,000	35,100	79,200	404,300

year 5				
Total				2,021,500

7. LEGAL IMPLICATIONS

Under the Crime and Disorder Act 1998, local authorities have a statutory responsibility to work with other agencies to reduce crime and disorder in their local area. As domestic violence accounts for almost a fifth of all recorded violent crime, it should be included within local Community Safety Partnership Strategy.

The procurement will require legal input at various stages of the tender process which will be conducted in accordance with the EU Procurement Rules and the Council's Contracts and procurement Procedure Rules.

It is proposed that an open tender process will be followed with the aim of attracting providers with sufficient knowledge and expertise to enable quality delivery.

Both legal and Procurement departments will be involved in supporting the development of the specification and tender documents (including the proposed contract) and will continue to provide support throughout the tender process.

Legal Services will also be required to support and provide advice in relation to any TUPE implications.

8. RESOURCE IMPLICATIONS

The management and implementation of the tender will be actioned within existing BwD resources including input from Legal, Procurement, Finance, Integrated Strategic Commissioning and Community Safety.

9. EQUALITY AND HEALTH IMPLICATIONS

Please select one of the options below. Where appropriate please include the hyperlink to the EIA.

Option 1 Equality Impact Assessment (EIA) not required – the EIA checklist has been completed.

Option 2 In determining this matter the Executive Member needs to consider the EIA associated with this item in advance of making the decision. *(insert EIA link here)*

Option 3 In determining this matter the Executive Board Members need to consider the EIA associated with this item in advance of making the decision. *(insert EIA attachment)*

10. CONSULTATIONS

Extensive service User consultations were completed across the 3 existing Domestic Abuse Services in 2018.

A series of workshops have been held with a wide range of stakeholders to shape and influence the model that will be tendered.

11. STATEMENT OF COMPLIANCE

The recommendations are made further to advice from the Monitoring Officer and the Section 151 Officer has confirmed that they do not incur unlawful expenditure. They are also compliant with equality legislation and an equality analysis and impact assessment has been considered. The recommendations reflect the core principles of good governance set out in the Council's Code of Corporate Governance.

12. DECLARATION OF INTEREST

All Declarations of Interest of any Executive Member consulted and note of any dispensation granted by the Chief Executive will be recorded and published if applicable.

VERSION: 4

CONTACT OFFICER: Rebecca Leach

DATE: 22/11/2018

**BACKGROUND
PAPER:**

EQUALITY IMPACT ASSESSMENT CHECKLIST

This checklist is to be used when you are uncertain if your activity requires an EIA or not.

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The checklist below contains a number of questions/prompts to assist officers and service managers to assess whether or not the activity proposed requires an EIA. Supporting literature and useful questions are supplied within the [EIA Guidance](#) to assist managers and team leaders to complete all EIAs.

Service area & dept.		Date the activity will be implemented	Click here to enter a date.
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Brief description of activity	
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Answers favouring doing an EIA	Checklist question	Answers favouring not doing an EIA
<input type="checkbox"/> Yes	Does this activity involve any of the following: - Commissioning / decommissioning a service - Change to existing Council policy/strategy - Budget changes	<input type="checkbox"/> No
<input type="checkbox"/> Yes	Does the activity impact negatively on any of the protected characteristics as stated within the Equality Act (2010)?	<input type="checkbox"/> No
<input type="checkbox"/> No <input type="checkbox"/> Not sure	Is there a sufficient information / intelligence with regards to service uptake and customer profiles to understand the activity's implications?	<input type="checkbox"/> Yes
<input type="checkbox"/> Yes <input type="checkbox"/> Not sure	Does this activity: Contribute towards unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act <i>(i.e. the activity creates or increases disadvantages suffered by people due to their protected characteristic)</i>	<input type="checkbox"/> No
<input type="checkbox"/> Yes <input type="checkbox"/> Not sure	Reduce equality of opportunity between those who share a protected characteristic and those who do not <i>(i.e. the activity fail to meet the needs of people from protected groups where these are different from the needs of other people)</i>	<input type="checkbox"/> No
<input type="checkbox"/> Yes <input type="checkbox"/> Not sure	Foster poor relations between people who share a protected characteristic and those who do not <i>(i.e. the function prevents people from protected groups to participate in public life or in other activities where their participation is disproportionately low)</i>	<input type="checkbox"/> No
FOR =	TOTAL	AGAINST =

Will you now be completing an EIA?

Yes

No

The EIA toolkit can be found [here](#)

Assessment Lead Signature	
Checked by departmental E&D Lead	<input type="checkbox"/> Yes <input type="checkbox"/> No
Date	Click here to enter a date.

EXECUTIVE MEMBER DECISION



REPORT OF: Executive Member for Children's Services

LEAD OFFICERS: Director of Children's Services

DATE: 30th November 2018

PORTFOLIO/S AFFECTED: Children's Services

WARD/S AFFECTED: Wensley Fold

SUBJECT: St Silas's C.E. Primary School Academy Conversion to Cidari Multi Academy Trust

1. EXECUTIVE SUMMARY

On the 16th May 2018 Blackburn with Darwen Borough Council received formal notification from the Department of Education, that St Silas C.E Primary School will convert to an Academy under Section 4 of the Academies Act 2010. Officers are working with the school and the trust to achieve a proposed conversion date of 1 December 2018

2. RECOMMENDATIONS

That the Executive Member:

- Notes the decision of the Secretary of State to exercise his statutory powers in respect of St Silas C.E. Primary School.
- Delegates authority to the Director of Children's Services and Director of HR, Legal & Governance to negotiate and enter into the Commercial Transfer Agreement (CTA) between the Council, the outgoing Governing Body and the Academy Trust.

3. BACKGROUND

3.1 The Secretary of State (SoS) for Education has exercised powers to convert St Silas C.E. Primary School to sponsored academy status under the Academies Act 2010. The Department for Education has identified Cidari Multi Academy Trust as the sponsor.

3.2 Under the Academies Act 2010 the Council is required to enter into a Commercial Transfer Agreement to transfer existing operational and service contracts to the Academy Trust.

4. KEY ISSUES & RISKS

4.1 Schedule 1 to the Academies Act 2010 enables the Secretary of State to make a scheme in relation to the school site (i.e. to make mandatory directions in relation to the transfer of the school

site to the Academy Trust). The school site is already owned by the Blackburn Diocesan Board of Education consisting of the hard standings and buildings therefore no transfer of land or buildings is required.

5. POLICY IMPLICATIONS

None

6. FINANCIAL IMPLICATIONS

The academy conversion process will incur expenditure in terms of professional and legal fees incurred internally by the Local Authority.

Schedule 1 of the Academies Act 2010 does not place any obligation on the Local Authority to reimburse any legal and or other professional costs incurred by the school or Academy Trust in completing the transfer.

The Council's Schools Finance team will work closely with the school to ensure the correct treatment of any surplus/deficit balance and closure of bank accounts in accordance with DfE guidance and legislation: the Academies Act 2010, the Academy Conversions (Transfer of School Surpluses) Regulations 2013 and the School and Early Years Finance (England) Regulations 2018.

St Silas currently purchase a number of services from Blackburn with Darwen Council. In the next financial period some of these services will not be renewed and will be delivered directly by the Cidari Trust.

7. LEGAL IMPLICATIONS

The Commercial Transfer Agreement is entered into to ensure that all existing operational and service contracts are captured and transferred to the Academy Trust

From the Council's perspective, this academy conversion does not constitute a transfer to which the Safeguarding of Employees Directive (2001/23/EC) and the Transfer of Undertakings (Protection of Employment) Regulations 2006 (as amended) apply. All of the staff currently working at the school are employed by the Governing Body.

8. RESOURCE IMPLICATIONS

Resource implications will be met within the Schools and Education portfolio with additional support from legal and the property team.

9. EQUALITY AND HEALTH IMPLICATIONS

Please select one of the options below. Where appropriate please include the hyperlink to the EIA.

Option 1 Equality Impact Assessment (EIA) not required – the EIA checklist has been completed.

Option 2 In determining this matter the Executive Member needs to consider the EIA associated with this item in advance of making the decision. (*insert EIA link here*)

Option 3 In determining this matter the Executive Board Members need to consider the EIA associated with this item in advance of making the decision. (*insert EIA attachment*)

10. CONSULTATIONS

Officers have consulted with the relevant departments and will continue to consult internally as and when required.

11. STATEMENT OF COMPLIANCE

The recommendations are made further to advice from the Monitoring Officer and the Section 151 Officer has confirmed that they do not incur unlawful expenditure. They are also compliant with equality legislation and an equality analysis and impact assessment has been considered. The recommendations reflect the core principles of good governance set out in the Council's Code of Corporate Governance.

12. DECLARATION OF INTEREST

All Declarations of Interest of any Executive Member consulted and note of any dispensation granted by the Chief Executive will be recorded and published if applicable.

VERSION:	3
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CONTACT OFFICER:	Carol Grimshaw
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DATE:	28/11/2018
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BACKGROUND PAPER:	
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EQUALITY IMPACT ASSESSMENT CHECKLIST

This checklist is to be used when you are uncertain if your activity requires an EIA or not.

An Equality Impact Assessment (EIA) is a tool for identifying the potential impact of the organisation's policies, services and functions on its residents and staff. EIAs should be actively looking for negative or adverse impacts of policies, services and functions on any of the nine protected characteristics.

The checklist below contains a number of questions/prompts to assist officers and service managers to assess whether or not the activity proposed requires an EIA. Supporting literature and useful questions are supplied within the [EIA Guidance](#) to assist managers and team leaders to complete all EIAs.

Service area & dept.	Childrens Services and Education	Date the activity will be implemented	01/12/2018
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Brief description of activity	St Silas's Academy Conversion to Cidari Trust
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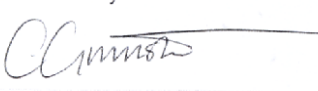
Answers favouring doing an EIA	Checklist question	Answers favouring not doing an EIA
<input type="checkbox"/> Yes	Does this activity involve any of the following: - Commissioning / decommissioning a service - Change to existing Council policy/strategy - Budget changes	<input checked="" type="checkbox"/> No
<input type="checkbox"/> Yes	Does the activity impact negatively on any of the protected characteristics as stated within the Equality Act (2010)?	<input checked="" type="checkbox"/> No
<input type="checkbox"/> No <input type="checkbox"/> Not sure	Is there a sufficient information / intelligence with regards to service uptake and customer profiles to understand the activity's implications?	<input checked="" type="checkbox"/> Yes
<input type="checkbox"/> Yes <input type="checkbox"/> Not sure	Does this activity: Contribute towards unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act <i>(i.e. the activity creates or increases disadvantages suffered by people due to their protected characteristic)</i>	<input checked="" type="checkbox"/> No
<input type="checkbox"/> Yes <input type="checkbox"/> Not sure	Reduce equality of opportunity between those who share a protected characteristic and those who do not <i>(i.e. the activity fail to meet the needs of people from protected groups where these are different from the needs of other people)</i>	<input checked="" type="checkbox"/> No
<input type="checkbox"/> Yes <input type="checkbox"/> Not sure	Foster poor relations between people who share a protected characteristic and those who do not <i>(i.e. the function prevents people from protected groups to participate in public life or in other activities where their participation is disproportionately low)</i>	<input checked="" type="checkbox"/> No
FOR =0	TOTAL	AGAINST =6

Will you now be completing an EIA?

Yes

No

The EIA toolkit can be found [here](#)

Assessment Lead Signature	
Checked by departmental E&D Lead	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Date	28/11/2018



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