28 February 2024

Consultation with Portfolio Holder for Partnerships

Report of Assistant Director (Partnerships)

A.1 Use of health inequalities funding to extend the Housing and Benefits Early Intervention Officer to work with children and families

(Report prepared by A Moore)

PART 1 – KEY INFORMATION

PURPOSE OF THE REPORT

To consult the Portfolio Holder for Partnerships on the proposal to spend up to £66 000 of the £600, 000 from the health funding provided to Tendring District Council from the North East Essex Clinical Commissioning Group (NEECCG) and East Suffolk and North East Essex Foundation Trust for the purposes of addressing inequalities.

Up to £66, 000 is proposed to be used to extend the current post within the multi-disciplinary team (MDT) with the ECC Children and Families Team for a Housing and Benefits Early Intervention Officer. The Officer has been in post since March 2023 and it is proposed that the post is extended until March 2025.

EXECUTIVE SUMMARY

The CCG (now replaced by the Integrated Care Board (ICB)) provided £400 000 for addressing inequality at place work within Tendring. This funding which is ring fenced to be spent on agreed initiatives, was accepted by Cabinet at the meeting held on 21st September 2021. The Cabinet report also outlined the agreed framework for spending the CCG funds and the associated governance arrangements – (reference the Memorandum of Understanding Appendix 3), which can be viewed (p89):-

https://tdcdemocracy.tendringdc.gov.uk/documents/g1838/Public%20reports%20pack%2017t h-Sep-2021%2010.30%20Cabinet.pdf?T=10.

The CCG (now replaced by the Integrated Care Board (ICB)) then provided an additional £200 000 for addressing inequality at place work within Tendring resulting in a total of £600,000 available. This was accepted by Cabinet at its meeting on 17 March 2023.

Report Template Part A (tendringdc.gov.uk)

The MOU expressly required spending proposals could only be enacted with the agreement of the Parties to the MOU and by approval of the NEE HWB Alliance Committee following recommendations from the Strategy Group. Also, that spending and outcomes will monitored and reported to North East Essex Health and Wellbeing Alliance and via the Alliance Change Management Officer reporting routes as required.

It is currently proposed to spend funding on the extension of the Housing and Benefits Early Intervention Officer who works as part of a multidisciplinary team within the Children and Families Team from Essex County Council Social Care to deal with children and families in crisis in the Tendring area. The already existing MDT would benefit from the continued housing and benefits support that the officer provides until March 2025, at which point they hope to use the evaluation from the team to ensure this receives ongoing sustainable funding from Essex County Council.

An indicative spend plan was presented and approved by the Alliance Board when the funding was first received. The spend plan did not include the proposal for a Housing and Benefits Early Intervention Officer.

Since the Early Intervention Officer is beyond what was originally agreed at the Alliance Board a highlight report was sent to the Board in August 2022 which approved £35 000 to originally fund the Housing and Benefits Early Intervention Officer. Further agreement was provided to add an extra £5,000 to this to extend the role to the end of March 2024.

Due to the value of this role additional approval has since been given by the Alliance Executive Group in February 2024 to use up to an additional £66,000 to extend the post for a further year until the end of March 2025.

The Assistant Director for Partnerships is proposing to allocate up to £66,000 of the overall inequalities in place funding to this role extension and consultation with the Portfolio for Partnerships and Section 151 and Monitoring Officers is sought to enable the Assistant Director for Partnerships to agree the outcomes and spending proposals for each project, as required by the authorised delegation from Cabinet.

RECOMMENDATION(S)

It is recommended that:

- a) That, subject to (b) the Assistant Director for Partnerships agrees to the spending proposal of up to £66 000 from the health inequalities funding provided from the Clinical Commissioning Group to contribute towards the extension of the existing Housing and Benefits Early Intervention Officer post until the end of March 2025.
- b) prior to implementation of this recommendation the Portfolio Holder for Partnerships is consulted on the outcomes and spending proposals for each project, in consultation with the Section 151 and Monitoring Officers, highlighting the implications set out within this Report to accompany the published Officer decision.

PART 2 – IMPLICATIONS OF THE DECISION

DELIVERING PRIORITIES

The provision of the funding will help to deliver Community Leadership within the Corporate Plan by working with partners to improve quality of life and in particular to promote safer, healthier, well connected and inclusive communities.

FINANCE, OTHER RESOURCES AND RISK

The CCG provided £600 000 for use around health inequalities to be ring-fenced for agreed initiatives. Although some of this funding has now been allocated, there are sufficient resources available to fund this post until March 2025.

Funding will be utilised in line with the governance framework set out in the associated Cabinet Report 21st September 2021, "Agenda Item 13 - North East Essex Health and Wellbeing Alliance update and acceptance of funding from health partners", and associated Memorandum of Understanding, Appendix 3 (link to report including Memorandum of Understanding see above).

Section 151 Consultation

There are no additional comments to make over and above those already set out in the report. It is expected that the Service will continue to maintain a detailed record of expenditure from the various tranches of funding made available by our health partners that can be made available as required along with ensuring the necessary actions are undertaken in adherence to the MOU and associated financial governance arrangements set out elsewhere in this report.

LEGAL

The money provided by the CCG and ESNEFT as part of the North East Essex Health and Wellbeing Alliance is subject to an MOU which has been signed by Tendring District Council, the CCG and ESNEFT.

To originally allocate funding to this work a highlight report was taken to the Alliance Board in August 2022 and was approved for up to £35, 000 to be spent on a Housing and Benefits Early Intervention Officer. Further approval was obtained to add an extra £5,000 to extend the post to the end of March 2024.

Due to the value of this post within the system additional approval has since been given by the Alliance Executive Group in February 2024 to use up to an additional £66,000 to extend the post for a further year until March 2025.

As the Multi- Disciplinary Team (MDT) that this role is a part of is a pilot, the work is being evaluated and the Children's Social Care Team are seeking to obtain mainstream funding from Essex County Council to continue this work after March 2025.

The post is employed by Tendring District Council and seconded over to the ECC multidisciplinary team. This will continue to be a fixed post until March 2025. If the work is not at that point mainstreamed by Essex County Council then Tendring District Council would potentially incur employment liabilities such as a redundancy payment.

The employment liability costs such as redundancy have been included within the £66,000 being requested for this role.

The secondment has been approved as part of the Council's staffing up to the end of March 2024 via the Workforce Panel process. If approved to be extended until the end of March 2025 this will also be via the Workforce Panel process.

Subsidy Control

The post is employed by Tendring District Council and seconded over to the ECC multidisciplinary team. There will therefore be no Subsidy Control implications as the Council is not providing funding to an external organisation. Monitoring Officer Consultation

The report should include

- reference to approval and that the post has been approved until March 2025 as part of the establishment
- reference to the implications for once funding has ceased and whether the extension creates any employment concerns
- what are the expectations for the support being provided once the post and employment cease

(All these items are now included in the report)

OTHER IMPLICATIONS

Consideration has been given to the implications of the proposed decision in respect of the following and any significant issues are set out below.

Crime and Disorder / Equality and Diversity / Health Inequalities / Area or Ward affected / Consultation/Public Engagement.

The provision of the funding will help to deliver Community Leadership within the Corporate Plan by working with partners to improve quality of life and in particular to promote safer, healthier, well connected and inclusive communities. In particular it will help address health inequality as the post holder seeks, as part of an MDT, to provide support to families most in need.

PART 3 – SUPPORTING INFORMATION

BACKGROUND

The North East Essex Health and Wellbeing Alliance have provided a total of £600k health inequalities funding to spend on work to deliver around reducing health inequality.

An MOU exists in terms of this funding signed by the CCG and the Council. See Cabinet Report 21 September, Agenda item 13, Appendix 3, p89. <u>https://tdcdemocracy.tendringdc.gov.uk/documents/g1838/Public%20reports%20pack%2017t</u> <u>h-Sep-2021%2010.30%20Cabinet.pdf?T=10</u>.

An initial indicative spend plan was agreed by the Alliance Board for this funding which did not include this particular post. A highlight report was therefore taken to the Alliance Board in August 2022 and was approved for up to £35, 000 to be spent on a Housing and Benefits Early Intervention Officer. Subsequently an extra £5,000 was agreed to extend the post to the end of March 2024.

Additional approval has since been given by the Alliance Executive Group in February 2024 to use up to an additional £66,000 to extend the post for a further year until March 2025.

CURRENT POSITION

Colleagues from Essex County Council Children and Families who are part of the Alliance made contact with the Council and requested use of some of the health inequalities funding to support work in respect of a multi-disciplinary team (MDT)

The team which is made up with specialists in their field for example around probation, employment etc. are used to support families in crisis to help resolve their problems by delivering interventions and signposting This is part of a pilot the team are running for the MDT and will include an evaluation process. The success so far means the team expect the ongoing evaluation to result in the team receiving mainstream funding in future from Essex County Council.

As part of the MDT it was requested that some of the health inequalities funding was allocated to providing a housing and benefits adviser who can sit in the team and support residents and in addition link closely to the Council.

The secondment has been approved as part of the Council's staffing up to the end of March 2024 via the Workforce Panel process. If agreed at Portfolio Holder level to be extended until the end of March 2025 this post will also be subject to Workforce Panel approval prior to any agreement to extend the current post.

At the end of March 2025 the Council will not have any further funding to continue this post under existing funding arrangements from the ICB. Evaluation of the work currently has demonstrated the value of the MDT and this particular post.

However with no further funding and if the Children's Social Care Team cannot get mainstream funding from Essex County Council this role would have to cease.

Although this will reduce the service available to families there are other support services for families such as Family Solutions where a referral could be made, although this may result in longer timescales.

There will however be some sustainability because the current officer in the role will be spreading knowledge within the MDT of their role in terms of housing and benefits and similarly the Council's Housing and Benefits Teams will have more understanding of the role of the MDT via their working with the officer over this time.

The Alliance have approved the use of the funding for this post via the Alliance Executive Group meeting in February 2024, to use up to an additional £66,000 to extend the post for a further year until March 2025.

The Assistant Director for Housing and Environmental has also highlighted the increasing prevalence of homelessness which this post will seek to help prevent and therefore supports the proposed spending.

The outcomes for siting this post with the Team are as follows

- The post holder will become central in the team and provide housing and benefits advice to the most vulnerable families in Tendring.
- They will join a team of Subject Matter Experts (SME's) whom are representative of social care, probation, Children and Adult Mental Health Services (CAMHS) and youth work.
- They will work collaboratively with the other experts to deliver bespoke support to families who have a history of being unable to access services.

More Generally

 In terms of the wider advantages, being part of the MDT enables the local council to become part of this progressive approach to supporting the most vulnerable families in Tendring.

Allocation of Inequalities Funding to date:

Area of Spend	22/23	23/24	24/25
Inequalities Coordinator		£55,000	
Harwich Family Solutions Officer	£40,000	£50,000	
Peripatetic Family Solutions Officer		£20,000	
Housing and Benefits Early Intervention Officer		£35,000	£66,000
Community Voluntary Services Tendring		£50,000	(Proposed)
Fuel Poverty Officer		£30,000	
Hospital Discharge Officer		£23,894	
Community Project Officer		£50,000	
TOTAL		£459,894	

FURTHER HEADINGS RELEVANT TO THE REPORT

BACKGROUND PAPERS FOR THE DECISION

Cabinet Report, 21 September 2021 - Agenda Item 13 – "North East Essex Health and Wellbeing Alliance update and acceptance of funding from health partners"

APPENDICES