

Agenda item:
Paper no:

	Surrey County Council use	CCGs use
Section 151 Finance cleared on:	N/A	N/A
Legal cleared on	N/A	
Executive Director cleared on:	N/A	26/07/22
Cabinet Member cleared on:	N/A	

Title of Report:	Surrey ICB – LDA Keyworking Service	
Status:	TO APPROVE	
Committee:	Surrey-wide Commissioning Committees in Common	Date: 21/09/22
Venue:	TBC	
Presented By:	Laura Saunders, Head of LDA Integrated Commissioning, Surrey Heartlands ICS	
Author(s)/ Lead Officer(s):	Laura Saunders, Head of LDA Integrated Commissioning, Surrey Heartlands ICS	

Executive Summary:

The keyworking service is part of the NHS Long Term Plan for 23/24. Following successful pilots in selected ICS’s across England, Surrey ICS is now mobilising its keyworking service.

Surrey ICB’s keyworking service will be offered to children and young people aged 0 – 25 who have Learning Disabilities and / or Autism, with the most complex needs and those who are either at risk of admission or residing in Tier 4 inpatient beds. It will also include those at risk of placement breakdown (school, family or residential placement). Those deemed ‘at-risk’ will be identified as red or amber on the dynamic risk register and assigned a designated keyworker.

The purpose of the keyworking function will be to help families and young people navigate existing social and healthcare services whilst providing personalised care solutions working at a neighbourhood or place level.

Programme mobilisation activity commenced in July 2022 for a planned service Go-Live in January 2023.

Governance:

Conflict of Interest: The Author considers:	None identified	✓
Previous Reporting: (relevant committees/ forums this paper has previously been presented to)	Committee name: Surrey ICS Executive Board Meeting date: 18/07/22 Outcome: Approved Committee: Commissioners Collaborative Meeting date: 02/09/22 Outcome: TBC	
Freedom of Information: The Author considers:	Open – no exemption applies. Part I paper suitable for publication.	✓

Decision Applicable to:

Decision applicable to the following partners of the Committees in Common:	NHS East Surrey CCG	✓
	NHS Guildford and Waverley CCG	✓
	NHS North West Surrey CCG	✓
	NHS North East Hants and Farnham CCG	✓
	NHS Surrey Downs CCG	✓
	NHS Surrey Heath CCG	✓
	Surrey County Council	✓

Recommendation(s):

It is recommended that the Surrey-wide Commissioning in Common Committee, approve the decision made by the ICS Executive Board and the Surrey Strategic Commissioners Collaborative to host the service alongside the Children with Disabilities team. This does not preclude future developments which may impact locating teams at place level or delivery to the age of 25. This will be via a Deed of Variation to the Emotional Wellbeing and Mental Health Section 75 agreement between the ICB and Council.

It is also recommended that Surrey Youth Focus are commissioned as our strategic partner for continued co-production in the development of the service.

Reason for recommendation(s):

The service has been designed and co-produced through a series of workshops involving experts by experience, parent carers, and lived experience children and young people (CYP) organisations. The team will be multi-disciplinary (comprised of both social care and health roles) and consist of two layers – strategic and intensive. The strategic layer will work closely with the wider system to provide a strategic perspective on: operational issues, identify pan-system challenges, drive required change to service provision and implement service improvements. The operational or ‘intensive’ layer will provide ‘hands-on’ support to children and young people before ‘stepping back’ once appropriate to do so. The CWD service is the most suitable hosting arrangement to facilitate the delivery of this model. The service will have governance reporting lines into the wider LDA programme and Tier 4 Provider Collaborative. The proposal has been agreed by NHSE South East Region and NHSE National Keyworking Programme.

Next Steps

The proposals for the keyworking function were co-designed and developed based on engagement with the system across health, social care, education and Voluntary, Community and Social Enterprise sector. The ICS Executive have approved the structure and model of the keyworker function as set out in this paper with the expectation that mobilisation will explore place-based models of delivery. This will ensure that implementation roll out makes a meaningful impact at place.

The mobilisation plans are being updated to ensure that at place delivery is fully scoped at considering opportunities for integration within both education (schools and colleges) and health/ care (primary care, community health services).

Following approval by Committees in Common, programme mobilisation activities will continue and be concluded by January 2023 at which point programme mobilisation will cease and incremental roll-out of the service to March 2024 will commence.

Current funding arrangements with NHSE cease at the end of FY 23/24. Surrey ICS will liaise with NHSE to discuss further funding beyond this time, but another approval decision may need to be brought to Committees in Common in Q4 of FY 23/24 to permit continuation of the service.

1. Strategic context and Surrey position

“By 2023/24 children and young people with a learning disability, autism or both with the most complex needs will have a designated keyworker, implementing the recommendation made by Dame Christine Lenehan.

Initially, keyworker support will be provided to children and young people who are inpatients or at risk of being admitted to hospital.

Keyworker support will also be extended to the most vulnerable children with a learning disability and/or autism, including those who face multiple vulnerabilities such as looked after and adopted children, and children and young people in transition between services.” (Paragraph 3.33, Long Term Plan)”

- 1.1 The national keyworking model was launched with 13 pilot areas following extensive consultation with young people, parents, carers and other stakeholders. The Council for Disabled Children have produced guidance on the functions and competences for these sites. The programme is now rolling out to all areas following notification of funding to the system to enable a phased mobilisation plan from 2022/23.
- 1.2 The service offers an additional layer of support to those children and young people most at risk and aims to supplement the current care provisions within the system rather than replace them. Keyworking will be delivered across Surrey, coterminous with Surrey County Council, including Surrey Heartlands Health and Care Partnership and Surrey Heath (part of Frimley ICB).
- 1.3 Prior to 1 July 2022, Surrey Heartlands CCG (now ICB) was asked to submit a proposal for service development in Q4 2021/2022; this was completed through codesign workshops with colleagues from across the health, education and social care system including existing providers (i.e. Mindworks) and partners (i.e. Family Voice Surrey, Surrey Youth Focus).
- 1.4 The proposal has been agreed by NHSE Southeast Region and NHSE National Keyworking Programme in June 2022.

2. Service proposition

- 2.1 Keyworking services will be offered to children and young people from ages 0-25 with a learning disability and/or autism, with most demand for the service expected to be in the 11-25 age range. These CYP would be those with most complex needs who feature on Surrey’s Dynamic Support Register as either Red or Amber, as well as those being referred through existing or to-be developed referral pathways.
- 2.2 The service will work in a hands-on way with these CYP and their families/carers to support their unique journeys, ensuring integration and access to existing local provisions. The programme will be mobilised throughout 2022/23 and the service incrementally rolled-out from January to March 2023 by which point CYP identified as Red/Amber on Surrey’s Digital Dynamic Support Register¹ will be offered a keyworker. Any challenges to implementation will be managed throughout this mobilisation phase (e.g., the need to update and streamline Surrey’s Digital DSR mobilisation and risk stratification processes).

¹ [NHS England » Dynamic registers and dynamic systems](#)

3. Keyworking team structure and core function

- 3.1 The keyworking team will contain two layers. The strategic layer will work closely with the wider system to provide a strategic perspective on operational issues, identify pan-system challenges, drive required change to service provision, and ensure any learning is properly actioned.
- 3.2 The team model will be developed to implement on the recommendations of the Fuller Stocktake²; with the Digital Dynamic Support Register as the primary enabler to identify and support integrated delivery of the Keyworking function.
- 3.3 The current dynamic register does not currently enable a comprehensive place-based identification of need. Therefore, mobilisation will include data sampling to understand place-based need. This will be delivered by using the current Dynamic Support Register (including those who have been admitted in the last 18 months), identification of individuals with learning disabilities and autism, those funded through joint commissioned packages (including continuing care) and individuals identified at risk or in need of support by education and social care teams. This work will enable the phased roll out to agree priority areas for delivery.
- 3.4 Mobilisation will prioritise the implementation of the Digital Dynamic Support Register to enable a Surrey wide identification of need. Integrated through the shared care record, social care, primary care and community health colleagues will be able to access a clinical risk tool for those with Learning Disabilities and Autism. This will act as the main referral tool for accessing a Keyworker, streamlining access to care and advice. Parents, families, carers and adults (keyworking is up to the age of 25) will make an informed choice and consent to being placed on the Dynamic Support Register and referred to Keyworking.
- 3.5 The keyworking team will facilitate place based multi-disciplinary teams to enable proactive, personalised care to enable professionals to support people with more complex needs. Over time the connection to place based working will be further developed and strengthened.
- 3.6 The operational or 'intensive' layer will provide 'hands-on' support to the children, young persons and their families or carers to: coordinate their personalised care, support system navigation, follow-up Care, Education and Treatment Reviews (CETR) /Local Area Emergency Protocol (LAEP) actions, and provide advice, challenge and present alternative options to care. Keyworkers will 'parachute' into core services ensuring that they do not work with families in isolation and core services will be able to call in support from the keyworking team to aid solution finding and improved outcomes. The workforce functions will be based on the Council for Disabled Children Guidance³ and Workforce Competency Framework⁴, along with learning from the 13 pilot areas
- 3.7 Mobilisation of the keyworking function will build on the locality models that are already in operation through social care teams. Quadrant / Locality teams, as outlined in image 1 below, engage with key providers including: community health, GPs, Health Visitors, CAMHS, education and community and voluntary sector organisations to meet the needs of the children and their families and / or carers. The DSR will enable needs led identification of which Multidisciplinary

² [Microsoft Word - FINAL_003_250522 - Fuller report\[46\].docx \(england.nhs.uk\)](#)

³ [cdc.keyworking.guidance.v4.pdf \(councilfordisabledchildren.org.uk\)](#)

⁴ [cdc.keyworking.competencies.v5.pdf \(councilfordisabledchildren.org.uk\)](#)

Team (MDT) or locality teams to engage with and offer support to those who are rated “red” or “amber”. The DSR will allow analysis of need at an Integrated Care Partnership and neighbourhood levels.

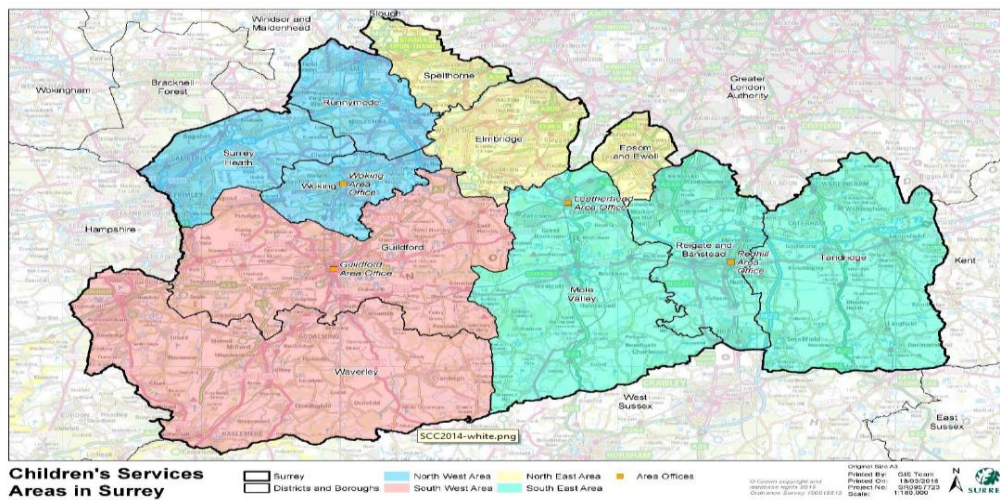


Figure 1: Quadrant team map

- 3.8 The keyworking function will combine a data driven population-based approach to identification of need via the DSR and coproduction to understand the how to personalise the service so it understands the needs specific those with Learning disabilities and Autism. Working with communities will be central to the mobilisation of the service, Surrey Youth Focus will support the development of an induction and training package which embeds skills such as appreciative inquiry, coproduction and systems thinking within the keyworker. This paper proposes that Surrey Youth Focus are commissioned as strategic partner to deliver this work, ensuring that it is has the capacity to deliver in addition to the keyworking team.
- 3.9 Learning through co-production and through thematic analysis of the intensive keyworking layer, the strategic keyworkers will be able to work directly with health and social care teams to develop the required integrated teams to meet the needs of those children and young people who are at risk of crisis. Working directly with families and young people, the keyworking function will have a ‘live’ understanding of the fragmentation experienced. The strategic keyworkers will work across system to implement new sustainable ways of working through integration, acting as conduit to developing models of integration (i.e. primary care network neighbourhood teams and / or team around the school). They will also look across to other systems, bringing in best practice from the other keyworking programmes.
- 3.10 The team will require a variety of skills, backgrounds, and previous experience from across education, health, and social care due to the nature of the roles and the complex needs of Surrey’s population. Keyworkers will be supported to develop a core skill set in systems thinking and systems working. This includes operating a “Think Family” approach where the whole family, including siblings, are factored into support and case planning, motivational interviewing and Surrey appreciative inquiry and Learning. The team will build on the Time for Kids Principles which have been co-produced to re-focus the system into putting CYP at the heart of everything we do. The Keyworkers will work alongside partners including Safeguarding to reduce the focus on “managing risk”.

4. Commissioning options for keyworking

- 4.1 Keyworking will be jointly commissioned by Surrey Heartlands ICB and Frimley ICB. A variety of hosting options were considered within the Surrey system. The preference was to host the service with the Children with Disability team in a Memorandum of Understanding with Surrey County Council. The commissioning options that were considered are outlined below, with the full options appraisal supplied in annex A of this paper.

Table 1: Options Summary

Option	Option Description	Relative Advantages / Disadvantages
Section 75 Agreement Deed of Variation (Recommended)	Hosting service alongside Children with Disability (CWD) team, requires Deed of Variation to the Emotional Wellbeing and Mental Health Section 75	CWD has close working relationships to core service areas for keyworking (e.g. education, social care, health) and strong links to transition to adulthood teams. The team is also undergoing improvement work which keyworking can integrate into. Some CYP for keyworking will not meet CWD's inclusion criteria, but the team can develop clear and independent referral pathways specific to keyworking which include those CYP not meeting CWD inclusion.
Section 75 agreement with the Council – Crisis services	Host service in SCC's section 75 agreement within existing CYP emotional wellbeing and mental health crisis services	This option would allow keyworking to integrate with existing crisis provision already caring for the LDA cohort, but current recruitment challenges, service fragility, and the similarity of these services to the keyworking model would pose a risk to keyworking mobilization, delivery, and effectiveness. Further the s75 reflects services that are delivered through a pooled budget, this service is entirely funded by NHSE allocations.
External procurement	Publish Invitation to Tender for single provider to deliver service	This option would enable a single provider to manage and deliver the service, but procurement timelines would significantly delay service Go-Live. Would also present risks to value for money due to national programme still being in pilot phase
Tier 4 Provider Collaborative (SABP)	Single tender waiver to host service in SABP's Tier 4 collaborative	This option would enable clear links with crisis provision and inpatient discharge processes, but Tier 4's highly clinical delivery model would not suit keyworking's advocacy role spanning education, health and social care.

- 4.2 It is recommended that the Surrey-wide Commissioning in Common Committee, approve the decision made by the ICS Executive Board and the Surrey Strategic Commissioners Collaborative to host the service alongside the Children with Disabilities team, recognising that this need not preclude future developments to locate teams at place level or delivery to the age of 25. This will be via a Deed of Variation to the Emotional Wellbeing and Mental Health Section 75 agreement between the ICB and Council.
- 4.3 It is also recommended that Surrey Youth Focus are commissioned as our strategic partner for continued co-production in the development of the service.

5. Service Development and Delivery Governance

- 5.1 As an integral part of Surrey's All Age Autism Strategy and LDA 3-year delivery plan, the keyworker programme will report to the LDA Strategy Board for its oversight and strategic direction and the Tier 4 Provider Collaborative Board for additional guidance. The service will build strong links to existing governance structures like Preparation for Adulthood Surrey Mental Health Board and SEND transformation programme.

6. Consultation

- 6.1 The keyworking service was developed through an extensive co-design process leveraging insights from Experts by Experience and various local youth organisations such as Surrey Youth Focus. They were engaged through 1:2:1 session and a series of co-design workshops to identify best practice and core service requirements. These were supplemented by recommendations from Surrey User Voice Participation Groups
- 6.2 Co-production with identified partners will remain central to service mobilisation, evaluation, and improvement over the first 18 months of delivery. This approach is being developed through engagement with Surrey Youth Focus, Surrey User Voice Participation Groups (UVPs), and Amplify within Mindworks.
- 6.3 Representatives from these groups are attending the programme's mobilisation meetings to provide advice and guidance and will continue to be involved once the service is operational.
- 6.4 The keyworking proposal has been discussed at selected ICB and Surrey County Council governance boards involving services with which it will work closely. These include the Tier 4 Provider Collaborative, the Tier 4 operational hub, and the Preparing for Adulthood and the Children's Strategic Leadership Board.
- 6.5 The service proposal was approved by the ICS Executive on 25th July 2022. The proposal and joint commissioning arrangement between Frimley ICB and Surrey ICB was also approved by the Commissioner Collaborative on 2nd September 2022.

7. Risk Management and Implications:

- 7.1 **Financial risk:** NHSE are yet to confirm the allocation for 2023 / 2024 and beyond if the budget was moved into the ICB Baseline Allocation then the maybe an impact of the System Deficit to the sustainability of the service. The commissioning team is working directly with NHSE to seek confirmation of funding post 2024. The delivery option also allows for the system to seek solutions and provide a flexible model in budget as opposed to letting a contract.
- 7.2 **Financial Risk:** Delays to service delivery could result in the reducing the per annum allocation as Surrey has been unable to mobilise to demonstrate delivery against the aligned budget. A swift mobilisation working with Surrey County Council 2022/23 and 2023/24 would mitigate against this.
- 7.3 **Performance Risk:** The long-term plan requires each area to have a Keyworking service mobilising by 2022/23 and fully established by 2023/24. The Keyworking

function is designed to reduce the number of CYP requiring inpatient settings. Delays to service delivery could result in increased numbers of CYP being admitted when they could be supported in the community.

- 7.4 **Reputational Risk:** Surrey Heartlands Health and Care Partnership have committed establishing the keyworking function through allocation of funding to a Project Manager from 2021/22. Recruitment and capacity challenges within the system has led to delays in mobilising the service. Mitigations have been put in place including a rapid design process and mobilisation planning being developed with additional capacity from a consulting firm. A project manager has now been recruited to manage the mobilisation period. Further delays would impact on the system’s ability to mobilise in 2022/23.
- 7.5 **Recruitment risk:** The recruitment process to appoint keyworker posts may take longer than planned due to workforce challenges across the system. Any substantial blockages to recruitment or onboarding processes will delay planned service Go-Live for January 2023. This risk is being developed by the ongoing development of job descriptions and clear workforce modelling to enable recruitment immediately following decision at CiC.

8. Financial and ‘Value For Money’ Implications

- 8.1 NHSE has provided an initial share of funding until the end of FY 2023/24 to both Surrey ICB and Frimley ICB (for Surrey Heath place). Any funding beyond 2024 has verbally been agreed by the mechanism of transfer by NHSE is still to be determined (i.e. Service Development Fund (SDF) / Service Review (SR) ringfence or baseline allocation).
- 1.1 Frimley ICB has agreed to the funding transfer to enable commissioning the keyworking pilot in line with Learning Disability and Autism Programme (formally Transforming care Partnership). Financial breakdown is shown in Table 2 Financial Allocations.

Table 2: Financial Allocations

ICB	2022/23	2023/24 (TBC - max)	2023/24 (TBC - min)
Surrey ICB	520,000	844,000	530,000
Frimley ICB	47,000	76,000	47,000
Total for Surrey TCP	567,000	920,000	577,000

- 1.2 The funding will be contingent on successful planning and implementation of the service, continued participation in the national and regional community of practice, regular reporting, and full cooperation with regional and national evaluation
- 8.2 Current funding will be contingent on successful implementation of the service, continued participation in the national and regional community of practice, regular reporting, and full cooperation with regional and national evaluation.
- 8.3 Funding beyond 2024 has verbally been agreed by the mechanism of transfer by NHSE is still to be determined (i.e., Service Development Fund (SDF) / Service Review (SR) ringfence or baseline allocation).
- 8.4 Keyworking will include Surrey Heath CCG which is part of Frimley ICB. Frimley ICB has agreed to the funding transfer to enable commissioning the keyworking

pilot in line with Learning Disability and Autism Programme (formally Transforming care Partnership).

- 8.5 It is expected service performance and ROI will be monitored against the pre-set service KPIs outlined by NHSE, in addition to the service evaluation KPIs identified by Surrey ICS and partners during service design and mobilisation.

9. Section 151 Officer Commentary

- 9.1 N/A. The Keyworking service is funded through Surrey ICB.

10. Legal Implications – Monitoring Officer

- 10.1 N/A. The Keyworking service is funded through Surrey ICB.

11. Equalities and Diversity

- 11.1 The keyworking service aims to have a positive impact on all eligible children and young people with LDA, as well as their families and carers. The service is open to all CYP regardless of race, ethnicity, gender, or sexual orientation.
- 11.2 There is no indication the keyworking service will have a detrimental effect on any potential service user group or staff.
- 11.3 A EQIA has been produced as part of service mobilisation to ensure that there is no disproportionate impact not only with regard to human rights but also with regard to the quality of provision and effect that this may have on patient outcome or experience. It is designed to ensure that 'due regard' is given to equality in relation to the services that we commission and where appropriate deliver.
- 11.4 It is required to be a 'living' document through mobilisation so when processes and procedures are developed these considerations are made, avoiding any unintended impacts.
- 11.5 Completion and review will be in line with Surrey Heartlands ICB Corp 16 Policy Joint Quality and Equality Impact Assessment Policy.⁵

Consulted:

An overview of the Keyworking service has been socialised at internal strategic forums:

- Tier 4 Provider Collaborative
- Children Strategic Leadership Board
- Corporate Team Leadership
- Preparing for Adulthood Board

The selected hosting option was chosen after consultation with the following stakeholders:

- Director for Commissioning

⁵ [Policies and Processes - ICS \(surreyheartlands.org\)](https://www.surreyheartlands.org)

- Director of Children’s and Learning Disabilities
- Assistant Director for Children’s Resources
- Service Manager for Extended HOPE and HOPE
- Assistant Director Children with Disability
- Programme Director for Learning Disabilities, Autism & Children’s Complex Health Needs

The service co-design involved the following stakeholders over the course of three workshops and various individual sessions:

- Family Voice Surrey
- Experts by Experience
- Surrey Youth Focus
- Surrey and Borders Mental Health Foundation Trust

Annexes:

- Annex A - Full list of hosting options considered for the Keyworking service

Sources/background papers:

- Surrey Keyworking service specification
 - EQIA for Surrey Keyworking (in development as part of mobilisation)
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Annex A – Surrey LDA Keyworking full hosting options appraisal

Option	Option Description	Relative Advantages	Relative Disadvantages
<p>Section 75 Agreement Deed of Variation (Recommended)</p>	<p>Hosting service alongside Children with Disability (CWD) team, requires DoV to the Emotional Wellbeing and Mental Health Section 75</p>	<p>CWD service has close working relationships with the preparing for adulthood transitions social care team, enabling mobilisation up to the age of 25 (requirement of the NHSE funding). There is already active consideration across Children and adult services to create a 16-25 service within the local authority and an options paper is in development.</p> <p>The CWD workforce has existing relationships with all key health and education partners as part of the multidisciplinary teams that work with disabled children.</p> <p>CWD would be able to identify CYP who do not currently meet the criteria for social work and pass to relevant social care team where appropriate. If risk of crisis, CYP would be placed on Dynamic Risk Register (assuming consent) and assigned a keyworker to prevent further escalation.</p> <p>The CWD service can refer into the family safeguarding service children who require social care support but do not meet the criteria for the more specialised CWD service</p> <p>The CWD service has significant numbers of children and young people who have multiple diagnoses. The service is familiar specifically with the issues that relate to ASD and learning disability and mental health. The challenges that sit across CAMHS/ Social Care and Tier 4 are well understood .</p> <p>CWD is on an improvement journey partnering with Essex who in the same Keyworking wave as Surrey – enabling further</p>	<p>A proportion of the children supported by the programme would not be eligible for CWD social care support. It therefore maybe confusing if the service is “within CWD.” The service would need clear communications regarding referral pathways and inclusion criteria to ensure understanding across the system.</p> <p>Keyworking would require its own referral criteria and flexible intervention length.</p> <p>CWD currently has limited connectivity and escalation pathways to mental health services and tier four provisions, this would need to be strengthened as part of mobilization.</p>

		<p>learning / buddying as the services develop. Keyworking would be integrated into the improvement journey.</p> <p>CWD has good connections with education and SEND local developments, the improvement plan intends to increase integration with these service areas. There is a joint commissioning strategy currently being finalised and this is proposing that integrated working across education, health and social care for children who are disabled is prioritised. This will include links with the community and voluntary sector. The CWD service is currently applying for transformation funding to support this progression.</p> <p>CWD Assistant Director has capacity to mobilise a new service with parity to other existing services, the AD is skilled in leading and developing MDTs. This increases chances of maintaining the integrity and independence of the keyworking model and bringing additionality to the system rather than embedding with pre-existing services</p> <p>Placing within the council enables grant agreements with the VCSE to support partnership delivery of the programme. There are existing commissioning arrangements with the VCSE which could provide useful learning, should a partnership with the VCSE be considered suitable in the future.</p>	
<p>Section 75 agreement with the Council</p>	<p>Host service in SCC's section 75 agreement alongside existing crisis services</p>	<p>The Section 75 arrangement already supports the provision of crisis intervention services. These services provide specialist interventions, short term support, and follow up in the community to prevent admission to a Tier 4 hospital. The services already work with those who have learning disabilities and / or autism with a mental health need.</p> <p>The teams are already multi-disciplinary with close working relationships between social care, SABP and education services. Existing escalation pathways with health/social care/education</p>	<p>The service area is facing significant challenges in current recruitment to existing services. The fragility of these services should be recognized and the team's ability to manage another large change programme. The focus on re-opening and stabilizing services should be maintained, keyworker mobilisation risks destabilisation</p> <p>Similarity of the crisis services and keyworking roles may impact on the ability of the keyworking programme to bring additionality into the system. A key requirement of the NHSE funding.</p>

		<p>Associate Director of Resources leads these services including Ruth House and other respite settings. Demonstrating clear links to those who could be assigned a keyworker.</p> <p>The leadership team is skilled in mobilizing services at pace, consulting with other teams to integrate and allow independent working.</p> <p>Placing within the council enables grant agreements with the VCSE to support partnership delivery of the programme</p>	<p>These services do not currently deliver up to the age of 25</p> <p>Criteria is such that CYP must have a social worker and support offer from these services is short term. Keyworking would require its own referral criteria and flexible intervention length.</p> <p>Further the s75 reflects services that are delivered through a pooled budget, this service is entirely funded by NHSE allocations.</p>
External procurement	Publish ITT for single provider to deliver service	<p>Allows a dedicated provider to mobilise, deliver, and manage the service for Surrey ICB</p> <p>Would not limit capacity within the system</p> <p>Competitive procurement process could identify best fit for VCSE delivery in Surrey ICB</p>	<p>External procurement timelines are lengthy and would delay service go-live.</p> <p>Co-design principles highlight preference for service to be managed within ICB to enact system change</p> <p>Service delivery is still nationally in a pilot phase and therefore service specifications, employment models and delivery outcomes are still in design. Procurement limits flexibility throughout the remaining pilot period (due to end April 2024) and therefore risks achieving effective delivery and value for money.</p>
Tier 4 Provider Collaborative (SABP)	Single tender waiver to host service in SABP's Tier 4 collaborative	<p>The priority group for Manage Tier 4 inpatient discharge process</p> <p>Liaises closely with all crisis management services within Surrey</p> <p>MDT skill mix allows for flexibility in recruitment</p> <p>Hosted by SABP would provide clear links to Mindworks as they are the lead provider for the CYP Alliance.</p>	<p>Autism cohort underrepresented in access to Tier 4 beds.</p> <p>Highly clinical and medicalized model of provision, which does not suit the delivery of the Keyworker programme</p> <p>Tier 4 Hub / Provider Collaborative is still in development, including the setup of an inpatient setting for Surrey.</p> <p>Mindworks is also still in development. Capacity for a further change / mobilization programme may be limited.</p> <p>These services do not currently deliver up to the age of 25</p>