

## Mental Health Section 75 Partnership Agreement: Annual Report

To: Adults Committee

Meeting Date: 18 March 2021

From: Wendi Ogle-Welbourn – Executive Director People and Communities

Electoral division(s): All

Key decision: Yes

Forward Plan ref: 2021/010

Outcome: Adults Committee is asked to consider the Mental Health Section 75 Partnership Agreement including service activity, financial performance and the future form of agreement by way of an extension of the existing arrangement to be agreed for a further 4 years enabling the delivery of vital mental health services to those who need it.

Recommendation: Adults Committee is recommended to:

- a) Endorse the report as a full account of service and financial performance, activity and outcomes under the Mental Health Section 75 Partnership Agreement
- b) Approve the continuation of the Mental Health Section 75 Partnership Agreement, including secondment arrangements, commencing from 1<sup>st</sup> April 2021
- c) Approve the amendment to the Mental Health Section 75 Partnership Agreement to revise the term of the agreement to 4 years commencing 1<sup>st</sup> April 2021 for a maximum value of £5.5M

Officer Contact:  
Name: Sarah Bye  
Post: Senior Commissioner  
Email: [sarah.bye@cambridgeshire.gov.uk](mailto:sarah.bye@cambridgeshire.gov.uk)  
Tel: 07468 718793

Member contacts:  
Names: Councillor Bailey  
Post: Chair  
Email: [anna.bailey@cambridgeshire.gov.uk](mailto:anna.bailey@cambridgeshire.gov.uk)  
Tel: 01223 706398

## 1. Background

- 1.1 This report presents an update on the discharge of responsibilities for mental health delegated to Cambridgeshire and Peterborough NHS Foundation Trust (CPFT) through the Mental Health Section 75 Partnership Agreement for the year 2019-20 and an update for the current year 2020-21.

It aims to update the Committee on service and financial performance, activity and outcomes under the Mental Health (MH) Section 75 Partnership Agreement 2019-20 and within the current year (2020-21).

- 1.2 The current Section 75 agreement ends on the 31<sup>st</sup> March 2021 with a provision for the contract to be extended for a further 3 years and then annually thereafter. Committee are asked to approve an amendment to this agreement to revise the length of the agreement to 2 years plus 2 optional extensions of one year (2+1+1). The agreement would therefore begin on the 1<sup>st</sup> April 2021 and should all options to extend be utilised would end on 31<sup>st</sup> March 2025. This would enable commissioners to align a range of Section 75 Agreements with CPFT, which includes the agreements for Occupational Therapy and Mental Health for Peterborough City Council, to the same timeline ensuring most efficient use of resource.

## 2. Main Issues

- 2.1 Cambridgeshire County Council (CCC) has delegated the delivery of mental health services and specified statutory duties for people with mental health needs aged 18 years and over to the Cambridgeshire and Peterborough NHS Foundation Trust (CPFT) through a Partnership Agreement under Section 75 of the National Health Service Act 2006.

The intention is to enable delivery of health and social care functions within a mental health trust so that services users and carers receive the best possible service addressing both clinical and social needs without the need for them to re-tell their story or receive multiple assessments.

The current Section 75 Partnership Agreement for Mental Health is managed through the Section 75 Governance Board which oversees and monitors performance against the agreement and annual work plan.

This report covers the following areas:

- Financial investment and performance
- Service performance, activity and outcomes
- Quality and Feedback
- Impact of Coronavirus
- Future Priorities

### 2.2 **Current Annual Investment for 2019-20 and 2020-21**

The total investment in the delivery of mental health social work services for 2019-20 was £3,361,570. This investment is comprised of two elements:

- Section 75 Agreement for Mental Health - £1,493,554
- Seconded Social work posts - £1,868,016

In the current year (2020-21) the total value of the investment is £3,392,426 comprising of:

- Section 75 Agreement for Mental Health - £1,362,769
- Seconded social work posts - £2,029,567

There is a current forecasted underspend of £195,000 against the Section 75 agreement, mainly due to vacant posts and associated non-staffing costs which are being managed through the regular review of the finance and performance of the Section 75 Agreement.

There is a variation in value across the two elements from 2019-20 to 2020-21. This was due to a realignment of staffing between the Section 75 funded posts and those which are seconded from Cambridgeshire County Council.

### 2.3 Key Performance Indicators

CPFT performance against reported key performance indicators as of the end December 2020 is as follows;

- The proportion of adults aged 18-69 in contact with secondary mental health services in paid employment – 12.7% against a target of 12.5% (on target)
- The proportion of adults (aged 18-69) in contact with secondary mental health services living independently, with or without support – 81.8% against a target of 75% (on target)
- Delayed Transfer of Care (DTC) – the collection and publication of this data has been suspended nationally to release NHS capacity to support the response to coronavirus (COVID-19). Local reporting will be resumed once the national collection and publication process is resumed.

The Council's Business Intelligence service is working with Mental Health Commissioners and CPFT Operational leads to develop and implement a new reporting framework based on data recorded in the Mosaic case management system. This will give those who manage and commission the service access to a range of self-service performance and management information reports to support operational decision-making and performance monitoring. It is envisaged that the new framework will be implemented and embedded by the end of March 2021.

### 2.4 Staffing

Vacancy levels for Mental Health Social Workers and staffing under the Section 75 Agreement have been challenging in previous years and this continues to be a challenge. However as a result of efforts to tackle recruitment challenges jointly by the Council and CPFT there continues to be an improving picture of fulfilling vacancies across the staffing establishment. Targeted recruitment methods and campaigns such as links with I Love Social Work are now more embedded and this has supported an improvement in filling vacancies.

The vacant Professional Lead for Social Work post within the Trust was successfully recruited to in 2019-20. This post ensures that Social Work practice is Care Act compliant and focusses on the quality of social care interventions across Cambridgeshire and Peterborough Foundation Trust under the Section 75 agreement. This post ensures that the ethos and priorities of adult social care are maintained and consistently reflected through the service delivered by the Trust.

The total number of vacancies under the Section 75 Agreement currently stands at 2 full time equivalents (FTE) Social Worker posts in the Older People's service and 3 FTE Social Worker posts in the Adults service; all are advertised for recruitment. A full-time Approved Mental Health Professional (AMHP) Locum remains engaged at present. AMHP workforce development forms part of the Annual Work Plan.

## 2.5 Care Packages and Financial Performance Summary

### 2.5.1 2019-20 Final Position

#### Overview

The 2019-20 year-end position on Mental Health cost of care was an overspend of £244k, as shown in the table below. The inflation budget is held centrally and the underspend of £318k offsets the costs for Adult Mental Health (AMH) and Older People Mental Health (OPMH).

		Q1	Q2	Q3	Q4	Outturn
	Budget	Forecast	Forecast	Forecast	Actual	Variance
AMH	4,114	4,202	4,130	4,146	4,435	321
OPMH	5,116	5,177	5,650	5,586	5,357	241
<b>Total</b>	<b>9,230</b>	<b>9,379</b>	<b>9,780</b>	<b>9,732</b>	<b>9,792</b>	<b>562</b>
<i>Inflation</i>	318	318	259	206	0	-318
<i>Other Finance Adjustments</i>	0	119	75	75	0	0
<b>Adjusted Total</b>	<b>9,548</b>	<b>9,816</b>	<b>10,114</b>	<b>10,013</b>	<b>9,792</b>	<b>244</b>

#### Adult Mental Health

The detailed year-end position for AMH is shown in the table below. Gross cost of care had an overspend of £243k and there was an under-recovery of £78k against budgeted income targets. The main area of overspend was residential care, with significant pressures emerging in the first half of the year.

AMH Activity	Budget	Q1 Forecast	Q2 Forecast	Q3 Forecast	Q4 Actual	Outturn Variance
Residential	2,178	2,212	2,331	2,327	2,361	183
Nursing	544	486	509	529	589	44
Dom Care	586	618	548	549	589	4
Live In	0	0	26	58	56	56
Supp Living	1,041	1,044	860	827	899	-142
Day Care	8	12	9	10	11	3
Dir Payments	167	218	220	235	256	89
Other	8	8	19	17	15	7
<b>Expenditure Total</b>	<b>4,532</b>	<b>4,598</b>	<b>4,522</b>	<b>4,552</b>	<b>4,776</b>	<b>243</b>
Health Cont	-22	0	0	0	0	21
Client Conts	-396	-396	-392	-406	-340	57
<b>Income Total</b>	<b>-418</b>	<b>-396</b>	<b>-392</b>	<b>-406</b>	<b>-340</b>	<b>78</b>
<b>Total</b>	<b>4,114</b>	<b>4,202</b>	<b>4,130</b>	<b>4,146</b>	<b>4,436</b>	<b>321</b>

The table below details the opening and closing numbers for packages of care commissioned by Adult Mental Health teams. However, there was an overall reduction of 86 packages of care and this can be attributed to the commencement of the Good Life Service, which is the community based mental health recovery and social inclusion service delivered by CPSL Mind, which resulted in a significant number of service users transferring to block provision which is not included in these figures.

Care Type	Care Packages 01/04/19	Care Packages 31/03/20	Movement In-year
Residential	58	56	-2
Residential Dementia	5	6	1
Nursing	16	13	-3
Nursing Dementia	1	2	1
Supported Living	122	115	-7
Direct Payments	9	14	5
Live-in Care	0	2	2
Day Care	2	3	1
Domiciliary Care*	139	55	-84
<b>Total</b>	<b>352</b>	<b>266</b>	<b>-86</b>

\*Good Life Service transfer

### Older People Mental Health

The detailed year-end position for OPMH is shown in the table below. Gross cost of care had an overspend of £344k and this was partially offset by an over-recovery of -£102k against budgeted income targets. The main areas of overspend were residential care and live-in care, partially offset by an underspend on nursing care.

OPMH Activity	Budget	Q1	Q2	Q3	Q4	Outturn
		Forecast	Forecast	Forecast	Actual	Forecast
Residential	1,339	1,428	1,593	1,665	1,656	317
Nursing	3,912	3,785	3,958	3,913	3,764	-148
Dom Care	406	387	397	406	371	-35
Live In	95	229	263	278	255	159
Supp Living	55	55	102	104	103	48
Day Care	4	4	4	3	4	0
Dir Payments	149	142	144	124	113	-36
Other	7	0	25	19	45	38
<b>Expenditure Total</b>	<b>5,968</b>	<b>6,030</b>	<b>6,486</b>	<b>6,513</b>	<b>6,311</b>	<b>344</b>
Health Cont	0	0	0	0	-97	-97
Client Conts	-852	-852	-837	-927	-857	-5
<b>Income Total</b>	<b>-852</b>	<b>-852</b>	<b>-837</b>	<b>-927</b>	<b>-954</b>	<b>-102</b>
<b>Total</b>	<b>5,116</b>	<b>5,178</b>	<b>5,649</b>	<b>5,586</b>	<b>5,357</b>	<b>241</b>

The table below details the opening and closing numbers of packages of care commissioned by Older People Mental Health teams. There was an overall reduction of 12 packages of care.

Care Type	Care Packages 01/04/19	Care Packages 31/03/20	Movement In-year
Residential	24	25	1
Residential Dementia	21	18	-3
Nursing	24	20	-4
Nursing Dementia	74	72	-2
Supported Living	5	4	-1
Direct Payments	7	6	-1
Live-in Care	2	5	3
Day Care	2	2	0
Domiciliary Care	41	36	-5
<b>Total</b>	<b>200</b>	<b>188</b>	<b>-12</b>

The financial trends identified during 2019-20 for both Adult Mental Health and Older People Mental Health resulted in a Deep Dive into the costs of care to ensure that all relevant actions were being taken to manage this trend and any learning could be applied to deliver the most effective service through both operational and commissioning efficiencies. The outcomes of the Mental Health Deep Dive are referenced in this report in section 2.8.

## 2.5.2 2020/21 – December Financial Position

### Overview

The December snapshot of Mental Health cost of care shows that net commitments are £664k under budget overall, with a forecast variance (taking into account expected impact of forecast adjustments) of -£881k underspend:

	Budget	Q1 Forecast	Q2 Forecast	Q3 Forecast	Outturn Forecast
AMH	4,269	4,229	4,395	4,268	-1
OPMH	5,768	4,927	4,979	4,738	-1,030
<b>Total</b>	<b>10,037</b>	<b>9,156</b>	<b>9,374</b>	<b>9,006</b>	<b>-1,031</b>
<b>Other Finance Adjustments</b>					
<i>Discharge Pool Contribution</i>	0	121	129	150	150
<b>Adjusted Total</b>	<b>10,037</b>	<b>9,277</b>	<b>9,502</b>	<b>9,156</b>	<b>-881</b>

The Covid pandemic has had a significant impact on existing elderly clients with the most acute mental health needs, and this is reflected in the forecast position. Conversely, the service has provided increased volumes of community-based support to clients since the start of the financial year.

New placements out of hospital or to facilitate avoidance of admission into hospital were funded through NHS England as continuing health care in the short term. The financial impact of clients with assessed mental health social care needs returning to local authority funding streams is included in the forecast.

## 2.6 Impact of Covid-19

The CCC Adult Social Care Social Work services based within CPFT under the S75 Partnership Agreement have maintained full operational activity throughout the COVID-19 pandemic. The impacts of the virus have necessitated a reduction in “face to face” meetings for all Social Work staff, with an emphasis upon working from home wherever possible. The “Attend Anywhere” secure virtual platform has been utilised by Social Work staff wherever possible and appropriate. The AMHP service, which carries out duties under the Mental Health Act 1983 and is responsible for co-ordinating assessment and admission to hospital if an individual is being considered for detention under the Act, has continued to undertake assessment in person rather than via virtual platforms.

All direct contacts follow COVID-19 Infection Prevention and Control (IPC) measures, the use of Personal Protective Equipment (PPE) and completion of personal risk assessments. The Social Work teams have been required to respond to rapid changes in usual practice and have shown dedication and commitment during such challenging times.

In order to support and ensure the effective and safe operation of the Social Work services in CCC, a programme of daily management calls was implemented at the start of the “lockdown” period. To date this arrangement has enabled all services to operate safely, including the Approved Mental Health Professional (AMHP) service; this is supported by a Locum AMHP and a Fixed Term Contract AMHP.

Whilst the demand for Adult Mental Health Services was mainly managed within existing provision, the Council did commission additional block care home bed capacity under Discharge to Assess arrangements to support Older People Mental Health as well as the wider Older People cohort. This block arrangement was funded up until August 2020 through the national government initiative through Cambridgeshire and Peterborough CCG, and has now been absorbed into the new Discharge to Assess provision being commissioned from within existing arrangements.

## 2.7 Annual Work Plan 19/20 and overview for 20/21

The Mental Health S75 Partnership Agreement includes an Annual Work Plan which during the 2019-20 period addressed the areas listed below as priorities to ensure ongoing improvement in outcomes for people with mental health problems and their families/ carers, effective discharge of the delegated responsibilities and effective use of the Council’s investment. Ongoing work within the 2020-21 period is highlighted where applicable:

### 2.7.1 **1. Social Care Delivery Model:** *Variation in social work practice across Cambridgeshire and Peterborough addressed.*

The alignment of Adult Social Care Workers, based within CPFT, with line management and professional supervision from a registered Social Work Manager was fully confirmed across Cambridgeshire in the Older People’s service during the 2019-20 period. The

configuration of the Adult Mental Health Service team remains ongoing at present with the conclusion of a formal HR Consultation process on 15/02/2021. This will establish all Social Workers aligned with a registered Social Work Manager for the allocation, authorisation and quality assurance of all work undertaken. The new aligned structures will ensure that professional supervision and oversight of statutory responsibilities remain consistent and are delivered to a high standard.

#### **2.7.2 2. Management Arrangements:** *Strong management and leadership for social care staff.*

The Professional Lead for Social Work post was appointed to during 2019/20. This post has led and coordinated activity in each of the Annual Work Plan areas during 2019/20 and continues to provide professional leadership across the Adult Social Care Social Work services based within CPFT to achieve 2020/21 priorities.

The existing Social Care Forum has been further developed to become the Social Work Forum as a support to meet continuous professional development standards. Input has included presentations by Social Work England, as well as practice topic-based sessions. The Director of Adult Social Services and Principal Social Worker also attend to provide updates to staff. This participation ensures greater connectivity between the local authority and its social care staff based with the Trust.

#### **2.7.3 3. Carers:** *A consistent approach to carers assessment with assessments being completed by CPFT MH practitioners for those whose cared for person is supported by CPFT*

This Annual Work Plan element was achieved during 2019-20 with clear guidance and Flowchart confirmed for all colleagues across CPFT which ensures that all health and social care staff are clear on their responsibilities towards Carers. Ongoing development is maintained by Social Work participation in the “Carers Huddles” and Carers Operational Group as part of the Adults Positive Challenge programme and ensures support for Carers maintains a high profile within CPFT as a whole. This has resulted in clearer information provided to all CPFT staff about the range of commissioned organisations who can support Carers, that there is more effective identification and support for carers at an earlier stage and that Statutory Carer Assessments, undertaken by the Social Work teams are now recorded on MOSAIC in line with Care Act responsibilities.

#### **2.7.4 4. Complaints:** *Complaints are managed effectively and within the timescales and requirements set for Local Authorities and Members/MP Enquiries and Freedom of Information Requests are managed effectively and within the timescales and requirements set for Local Authorities.*

This Annual Work Plan element was achieved during 2019-20 with a specific schedule confirmed within the S75 Partnership Agreement to ensure this was effectively managed. Processes are in place which align with the Local Authority and all complaints and requests for information are thoroughly investigated and/or appropriate details provided to ensure that responses by CPFT satisfy Cambridgeshire County Council requirements and timescales.

2.7.5 **5. Financial Quality Assurance (Panel):** *Processes are consistent with standards in Adult Social Care and ensure the best outcomes for clients.*

All commissioned care and support is submitted to and monitored by CPFT based Adult Social Care colleagues in order to maintain required practice standards. Quality assurance is monitored by a Managerial Audit process managed by the local authorities Quality and Standards Team.

This work is continuing during 2020-21 and will continue to be included in Annual Work Plans going forward to support continuous development to meet local authority standards and requirements.

Included within measures to quality assure outcomes is a current priority to work with health colleagues to review existing S117 (Mental Health Act 1983) after care arrangements which are required following a section under the Mental Health Act and where there are subsequent joint funding responsibilities.

2.7.6 **6. Information Sharing:** *An information sharing agreement which ensures compliance with the law and facilitates information sharing to improve outcomes at an individual and service level.*

This Annual Work Plan element was achieved during 2019-20 with a schedule confirmed for addition to the S75 Partnership Agreement which ensures that there is a clear, compliant agreement to enable information to be shared across organisational boundaries between CPFT and the Council, enhancing the delivery of joined up care and support for individuals.

2.7.7 **7. Safeguarding:** *Safeguarding processes are effective and delivered to the standards/ requirements set for Local Authorities.*

The Multi-agency Safeguarding Hub (MASH) arrangements have been reviewed and streamlined during 2020-21. This piece of work has supported the full transfer of MASH responsibilities to the County Council's MASH Team from 01/01/2021. This ensures the safe and effective discharge of statutory safeguarding adults' duties to be achieved.

Further work is currently ongoing during 2020-21 within the Trust to establish clear and robust structures for the delivery of safeguarding duties and regulatory requirements.

2.7.8 **8. Care Act Assessments:** Care Act assessments are carried out consistently.

All Social Work staff based within the Trust under the S75 Partnership Agreement have undertaken training in the full use of the MOSAIC case management system. The full use of available functionality enables the collation of practice activity and performance data to ensure legal compliance with the Care Act.

Professional practice is monitored by the completion of Managerial Audits (as referred to above) and "thematic audits" completed by the local authority Quality and Practice Team. Thematic audits have included compliance with the Mental Capacity Act (2005) and Best Interests Decision Making – this was supported by work sessions at the Social Work Forum.

Legal literacy in the Care Act training is currently underway during 2020-21 with both registered Social Workers and staff in support roles. It is anticipated that this will continue to be built upon during the remainder of 2020-21 and 2021-22.

**2.7.9 9. Approved Mental Health Professional Service (AMHP):** *Robust, cost effective AMHP service and cost-effective arrangements for 2019 Christmas period are effective.*

The AMHP service carries out duties under the Mental Health Act 1983 and is responsible for co-ordinating assessment and admission to hospital if an individual is being considered for detention under the Act. The Cambridgeshire AMPH service, delivered by CPFT, has maintained full operational capacity during 2020/21 including the delivery of required activity over the Christmas period.

Work to complete a “workforce plan” for the AMHP service has commenced; this will be finalised during 2021. This analysis is aimed at identifying the level and type of workforce required to meet activity and to future proof arrangements for the training and retention of AMHPs. This work includes actions to remove the need for the retention of a full-time Locum post within the service. Currently 3 candidates are finishing their training, with anticipated warranting by May 2021. Further applicants are in the process of being identified to undertake AMHP training.

**2.7.10 10. Proactively plan for Life-time Transitions across pathways:** *There is a clear pathway between Children and Adults services to manage the transitional cases and operational and financial expectations of transitional cases are included in annual planning.*

During 2019-20 work has commenced to identify a “Transitions Pathway” with Children’s Social Care Colleagues, and the Mental Health Social Work service in the Trust. The aim of this work is to achieve a clear and simple “tracking” and joint working process that enables clear forward planning for the people who use the service, their family/carers, and the local authority.

This work will continue through 2021/22

## **2.8 Mental Health Deep Dive Update**

During 2019 a Deep Dive was conducted into the cost of care for Mental Health, which had been increasing significantly. An in-depth analysis was carried out to interrogate the financial commitments and commissioning arrangements. This resulted in a number of actions being explored during 2020-21 and the following outcomes have been achieved:

- Engagement in operational review of quality assurance panel processes
- Improved access to block bed capacity for mental health including the market pressures identified through wider Older People Commissioning reviews
- A review of the financial and practice implications where Live-In support is commissioned
- Improved integration of operational and commissioning models for Accommodation based placements

Further actions to ensure that this work and a focus on financial commitments and commissioning arrangements is maintained will be included in the 2021-22 Annual Work Plan.

## 2.9 Quality and Feedback

Mental Health services are committed to enabling people to have control over their lives and illness, to work in a strength-based approach to enable people, utilising the philosophy and the model of recovery. The co-location and close partnership working between social work and health care services provides a holistic response for the people of Cambridgeshire and their carers to enable people to live healthy and independent lives.

During the coming months there will be further developments in practise and quality to ensure that social workers maintain compliance to the Care Act, that the use of strengths-based conversations are embedded using Changing the Conversation principles and that the service continues to deliver robust AMHP services to manage delivery of required statutory functions.

Included below are short examples of the positive Social Work that has been achieved throughout the period of the pandemic; these are testaments to the professionalism and dedication of the Social Work services based within CPFT as part of the S75 Partnership Agreement.

**CCC Support Time Recovery Worker**, supporting an older person with dementia and their family. The following feedback was relayed to the Social Work team by a specialist Mental Health Nurse who was also involved:

*“Just wanted to inform you of some lovely feedback I had from a patient’s wife about \*\*\*\*. She stated that \*\*\*\* has been “amazing and very helpful”, \*\*\*\*had to visit several times last week to offer support with paperwork for a direct payment, without this help the family would still be struggling.”*

**CCC Social Worker**, utilizing virtual tools to support family connections and inclusion. The following statement was received from the granddaughter of a person who uses Social Work services:

*“I just wanted to get round to thanking you for organising the family zoom chat and for everything you are doing for our Mamma \*\*\*\* and for us as a family too, we truly appreciate it”*

**CCC Senior Social Worker** worked with someone to return to their own home. The following was received from a family member:

*“I would just like to say a personal thank you for your help and assistance with \*\*\*\*. You have no idea what it means to hopefully get him home and have him settle. I do not anticipate it will be an easy ride, but it’s where he belongs, and I hope we are able to keep him here.*

*If social distancing allowed I would be giving you the biggest hug and no doubt be crying tears of thanks on your shoulder. You have my gratitude forever.*

*I do hope that the following few weeks are kind to you, and I hope at some point we get to meet so I can thank you in person.*

*You are a true angel and \*\*\*\* could do with a few thousand more of you, they are lucky to have you.”*

**Feedback from Doctor to a member of the AMHP service:**

“I am writing to thank you again for all your help with MHA assessment yesterday. I was very touched by your compassion for the person and very impressed by your clinical skills, which I would describe to trainees as falling into the ‘she makes it look so easy’ class. I do also feel that walking the person to the NTC, not just once but twice, falls into the ‘going beyond the call of duty’ category.”

**Feedback from “Nearest Relative”:**

The AMHP involved was complimented on her professional and compassionate approach to both the client and them

**2.10 Future priorities for 20/21 and 21/22 onwards**

There are a number of priorities which will form part of the ongoing development of the functions performed by the Section 75 Agreement and ensuring the arrangement continues to effectively deliver the delegated duties for Cambridgeshire County Council:

- Renew the existing Section 75 agreement
- Review and develop Annual Workplan for 21/22
- Continue to embed MOSAIC as primary casework recording tool
- Embed reporting framework and use of dashboards to monitor ‘live’ data and performance
- Further development of quality assurance processes
- Focus on a TEC first approach where appropriate for Mental Health service users
- Continued engagement with Carers workstreams to ensure Carers receive appropriate assessment and support to meet their needs
- Development of robust transitions pathways from children’s services to support the move into adult services.
- Development of Social Work workforce within CPFT through specific workplans and professional practice lead

There remains a strong focus on the delivery of the Annual Workplan priorities alongside the delegated functions within the Section 75 Partnership Agreement. Any risks associated with delivering against these priorities are managed as part of the governance process to ensure that mitigations are put in place and escalated where appropriate.

Commissioners are also aware of the current White Paper proposals around the development of Integrated Care Systems and the potential for this to impact on current arrangements with partners such as NHS Foundation Trusts and Clinical Commissioning Groups. Any current agreements will contain the ability for the Section 75 to be reviewed in light of any change in legislation which would enable system-wide changes in practice to be accommodated.

### 3. Alignment with corporate priorities

#### 3.1 A good quality of life for everyone

The services delivered through the Section 75 Partnership Agreement provide good quality, specialist assessment, treatment and support for adults living with mental health problems in Cambridgeshire

#### 3.2 Thriving places for people to live

There are no significant implications for this priority.

#### 3.3 The best start for Cambridgeshire's children

There are no significant implications for this priority.

#### 3.4 Net zero carbon emissions for Cambridgeshire by 2050

There are no significant implications for this priority

### 4. Significant Implications

#### 4.1 Resource Implications

The following bullet points set out details of significant implications identified by officers:

- The secondment of Mental Health Social Works staff as identified in the Mental Health Section 75 Partnership Agreement will continue for the term of the agreement
- The value of the Section 75 Partnership Agreement may be varied in line with increases in salary increases and associated costs for the posts required by the agreement.
- There may be realignment of the staffing costs between the Section 75 funded posts and the seconded County Council posts throughout the term of the agreement

#### 4.2 Procurement/Contractual/Council Contract Procedure Rules Implications

- The recommendation for the continuation of the arrangements established under the 2006 NHS Act of which, Section 75 allows delegation of responsibilities to an NHS body.

#### 4.3 Statutory, Legal and Risk Implications

- Cambridgeshire County Council has delegated the delivery of mental health services and specified statutory duties for people with mental health needs aged 18 years and over to the Cambridgeshire and Peterborough NHS Foundation Trust (CPFT) through a Partnership Agreement under Section 75 of the National Health Service Act 2006.

#### 4.4 Equality and Diversity Implications

There are no significant implications for this priority.

#### 4.5 Engagement and Communications Implications

There are no significant implications for this priority.

#### 4.6 Localism and Local Member Involvement

There are no significant implications for this priority.

#### 4.7 Public Health Implications

There are no significant implications for this priority.

#### 4.8 Environment and Climate Change Implications on Priority Areas

##### 4.8.1 Implication 1: Energy efficient, low carbon buildings.

Positive/neutral/negative Status: Neutral

##### 4.8.2 Implication 2: Low carbon transport.

Positive/neutral/negative Status: Neutral

Explanation: Potential positive impact due to an increase in the number of staff working from home and not using a fixed building base

##### 4.8.3 Implication 3: Green spaces, peatland, afforestation, habitats and land management.

Positive/neutral/negative Status: Neutral

Explanation:

##### 4.8.4 Implication 4: Waste Management and Tackling Plastic Pollution.

Positive/neutral/negative Status: Neutral

Explanation:

##### 4.8.5 Implication 5: Water use, availability and management:

Positive/neutral/negative Status: Neutral

Explanation:

##### 4.8.6 Implication 6: Air Pollution.

Positive/neutral/negative Status: Positive

Explanation: Positive impact due to an increase in the number of staff working from home and not using a fixed building base.

##### 4.8.7 Implication 7: Resilience of our services and infrastructure, and supporting vulnerable people to cope with climate change.

Positive/neutral/negative Status: Positive

Explanation: increased use of virtual platforms for delivering services which has tested and encouraged alternative support methods

Have the resource implications been cleared by Finance? Yes

Name of Financial Officer: Stephen Howarth

Have the procurement/contractual/ Council Contract Procedure Rules implications been cleared by the LGSS Head of Procurement? Yes

Name of Officer: Gus De Silva

Has the impact on statutory, legal and risk implications been cleared by the Council's Monitoring Officer or LGSS Law? Yes

Name of Legal Officer: Fiona McMillian

Have the equality and diversity implications been cleared by your Service Contact?

Yes

Name of Officer: Will Patten

Have any engagement and communication implications been cleared by Communications?

Yes

Name of Officer: No response received

Have any localism and Local Member involvement issues been cleared by your Service Contact? Yes

Name of Officer: Will Patten

Have any Public Health implications been cleared by Public Health?

Yes or No

Name of Officer: No response received

If a Key decision, have any Environment and Climate Change implications been cleared by the Climate Change Officer?

Yes

Name of Officer: Emily Bolton

## 5. Source documents guidance

5.1 None.