

# DPS Schedule 6 (Order Form Template and Order Schedules)

# **Order Form**

ORDER REFERENCE:	DFERPPU/ 23-24/021
THE BUYER:	The Department for Education
BUYER ADDRESS	Sanctuary Buildings, Great Smith Street, London, SW1P 3BT
THE SUPPLIER:	Kantar Public UK Ltd trading as Verian
SUPPLIER ADDRESS:	4 Millbank, London, SW1P 3JA
REGISTRATION NUMBER:	13663077
DUNS NUMBER:	228340905
DPS SUPPLIER REGISTRATION	N SERVICE ID: SQ-a7eb6n8

APPLICABLE DPS CONTRACT

This Order Form is for the provision of the Deliverables and dated **25<sup>th</sup> April 2024**. It's issued under the DPS Contract with the reference number **RM6126 CCS Research & Insights Marketplace DPS** for the provision of **Evaluation of pilots to reduce unnecessary family court delays**.

DPS FILTER CATEGORY(IES): Children's social care, Mixed method (qualitative and quantitative), Impact evaluation, Process evaluation, Value-for-money evaluation, England

Bid pack for Evaluation of pilots to reduce unnecessary family court delays.



#### ORDER INCORPORATED TERMS

The following documents are incorporated into this Order Contract. Where numbers are missing we are not using those schedules. If the documents conflict, the following order of precedence applies: The following documents are incorporated into this Order Contract. Where numbers are missing we are not using those schedules. If the documents conflict, the following order of precedence applies:

- 1. This Order Form including the Order Special Terms and Order Special Schedules.
- 2. Joint Schedule 1(Definitions and Interpretation) RM6126 CCS Research & Insights Marketplace DPS



- 3. DPS Special Terms
- 4. The following Schedules in equal order of precedence:
- 5. Joint Schedules for RM6126 CCS Research & Insights Marketplace DPS
  - o [Joint Schedule 1 is covered in '2.' above, and *must* be included]
  - Joint Schedule 2 (Variation Form) to be used where necessary for future variations post-date of contract issue.



DPS Joint Schedule 2 - Variation Form v.

o Joint Schedule 3 (Insurance Requirements)



DPS Joint Schedule 3 - Insurance Requir

Joint Schedule 4 (Commercially Sensitive Information)



DPS Joint Schedule 4

- Commercially Sensit
- o [Joint Schedule 5 is covered in '6.' Below, and *must* be included]
- o [Joint Schedule 6 (Key Subcontractors)



DPS Joint Schedule 6 - Key Subcontractors •

• Joint Schedule 10 (Rectification Plan)



DPS Joint Schedule 10 - Rectification Plan

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 Joint Schedule 11 (Processing Data) (to be completed between buyer/supplier)



11 - Processing Data v

#### Order Schedules for DFERPPU/ 23-24/021

o Order Schedule 1 (Transparency Reports)



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C	[Order Schedule 10 (Exit Management)]
	DPS Order Schedule
	10 - Exit Management
C	[Order Schedule 20 (Order Specification)
	DPS Order Schedule
	20 - Specification v1.0
6.	CCS Core Terms (DPS version) v1.0.3

RM6126 DPS Core Terms v1.0.pdf

7. Joint Schedule 5 (Corporate Social Responsibility)



No other Supplier terms are part of the Order Contract. That includes any terms written on the back of, added to this Order Form, or presented at the time of delivery.

#### ORDER SPECIAL TERMS

The following Special Terms are incorporated into this Order Contract: Special Term 1. Safeguarding Children and Vulnerable Adults Special Term 2. Project outputs Special Term 3. Departmental Security Standards for Business Services and ICT Contracts



Core terms

ORDER START DATE:

25<sup>th</sup> April 2024

ORDER EXPIRY DATE:

31 March 2026 – notwithstanding enactment of a break clause by the Buyer on 31 March 2025

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ORDER INITIAL PERIOD:

#### 1 year with a break clause on 31 March 2025 upon the Buyer's decision whether to continue with the evaluation.

#### DELIVERABLES

See full details in Order Schedule 20 (Order Specification)]. A summary payment schedule linked to high-level milestone completion is provided below.

#### MAXIMUM LIABILITY

The limitation of liability for this Order Contract is stated in Clause 11.2 of the Core Terms.

The Estimated Year 1 Charges used to calculate liability in the first Contract Year is

Milestone	Description/ Characteristics of outputs	Invoice	Cost
		scheduled	0051
Completion			
		for	
1.Project Inception	Inception meeting	3 <sup>rd</sup> May 2024	
Document (PID)	<ul> <li>Development of PID in line with Buyer</li> </ul>		
	requirements, to include a high-level		
	stage 2 (main stage) plan, summary of		
	approach and key decisions agreed at		
	inception meeting		
2.Theory of change	Delivery of theory of change and/or logic	1 <sup>st</sup> July 2024	
and Logic model	models for each pilot, including		
development and	stakeholder workshops to support		
completion of	development		
familiarisation	<ul> <li>Data assessment conducted</li> </ul>		
phase	Evaluation plan and detailed workplan		
	finalised		
	• Delivered to the Buyer by: 1 <sup>st</sup> July 2024		
3.Y1 mainstage	Delivery of research materials across	4 <sup>th</sup> October	
fieldwork set up	process, impact and economic evaluation	2024	
and delivery	workstreams		
	Data collection across process, impact		
	and economic evaluation workstreams		
4.Y1 mainstage	<ul> <li>Analysis of data across process, impact</li> </ul>	31 <sup>st</sup> January	
analysis –	and economic evaluation workstreams	2025	
Presentations of	Delivery of two presentations presenting		
key findings	interim findings		
(interim)	Delivered to the Buyer in January 2025		
5.Y1 singular	<ul> <li>One report containing findings and</li> </ul>	14 <sup>th</sup> February	
Interim report	progress on the evaluation of all pilots. To	2025	
	include:		

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	<ul> <li>o a summary of each pilot up until this point.</li> <li>o evaluation methods</li> <li>o evaluation findings from the process, impact and economic evaluations to this point (including graphs and tables to make the data accessible)</li> <li>o conclusions about whether the pilots were successful, wherever possible; and;</li> <li>o recommendations.</li> <li>Delivered to the Buyer by 14<sup>th</sup> February 2025</li> </ul>		
6.Y2 mainstage	• Evaluation plan updated and shared as	26 <sup>th</sup> July	
fieldwork set up	required ahead of set up	2025	
and delivery	Delivery of research materials across		
	process, impact and economic evaluation		
	workstreams		
	Data collection across process, impact     and accompany acquisition workstreams		
7 V2 mainstand	and economic evaluation workstreams	30 <sup>th</sup> January	
7.Y2 mainstage	Analysis of data across process, impact     and according evoluation workstrooms	2026	
analysis – presentation of key	and economic evaluation workstreams		
findings (final)	Delivery of presentation, to present final		
Initiangs (Inital)	findings		
8. Final reports	<ul> <li>Final evaluation reports: one report</li> </ul>	20 <sup>th</sup> February	
	written for each pilot,	2026	
	<ul> <li>a summary of each pilot</li> </ul>		
	<ul> <li>evaluation methods</li> <li>evaluation findings from the</li> </ul>		
	<ul> <li>evaluation findings from the process, impact and economic</li> </ul>		
	evaluations (including graphs and		
	tables to make the data accessible)		
	<ul> <li>conclusions about whether the</li> </ul>		
	pilots were successful, wherever		
	possible; and		
	<ul> <li>recommendations on next steps/</li> </ul>		
	wider implementation.		
	Delivered to the Buyer by 20 <sup>th</sup> February		
0 Deet months :	2026.		
9.Best practice	Delivery of best practice guides to provide     practicel advise to local areas about how	13 <sup>™</sup> March	
guides, evaluation plan and data sets	practical advice to local areas about how	2026	
pian and uald Sels	to implement learning from the pilots and contain findings from the evaluations.		
	Delivered to the Buyer by 27 <sup>th</sup> February		
	2026.		
	Delivery of evaluation plans – Information		
	about how impact can be measured		
	beyond the contract period,		
	recommendations for continuing the		
	evaluation and lessons learnt. This item		
	can be provided at break clause instead if		
	required.		
	Anonymised datasets		
	Delivered to the Buyer by end of the		
	contract (13 <sup>th</sup> March 2026)		

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Above schedule repeated in Order Schedule 5 (Pricing Details)

#### ORDER CHARGES

Expenditure for the financial year 2024-25 shall not exceed exclusive of VAT. Expenditure for the financial year 2025-26 shall not exceed exclusive of VAT.

Total Project expenditure shall not exceed £423,274.28 exclusive of VAT

REIMBURSABLE EXPENSES None

PAYMENT METHOD Via BACS upon submission of valid invoice

BUYER'S INVOICE ADDRESS:

Department for Education, Sanctuary Buildings, Great Smith Street, London SW1P 3BT Invoices must be submitted in pdf format, state the Purchase Order number (provided separately to this form), and sent via email to AccountsPayable.OCR@education.gov.uk

BUYER'S AUTHORISED REPRESENTATIVE

**Evaluation Project Lead** 

DfE Sheffield, 2 St Paul's Place, 125 Norfolk Street, Sheffield, S1 2FJ

BUYER'S ENVIRONMENTAL POLICY

Department for Education Sustainability and Climate Change Strategy, 21 April 2022, available online at: <u>https://www.gov.uk/government/publications/sustainability-and-climate-change-strategy</u>

BUYER'S SECURITY POLICY

Department for Education Personal Information Charter, available online at: <u>https://www.gov.uk/government/organisations/department-for-</u> <u>education/about/personal-information-charter#co</u>

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SUPPLIER'S AUTHORISED REPRESENTATIVE

Director, Evaluation Practice

4 Millbank, London, SW1P 3JA

SUPPLIER'S CONTRACT MANAGER

Head of Evaluation

4 Millbank, London, SW1P 3JA

PROGRESS REPORT FREQUENCY

Weekly updates will be provided to the Buyer via email on an agreed day each week. A template for the content of the weekly update will be agreed in advance. Weekly updates will include tracking of fieldwork progress, and sharing topline findings at key stages of fieldwork delivery.

PROGRESS MEETING FREQUENCY

Weekly with Team Key Staff (see Schedule Order 7) following the introduction meeting with the Buyer (on a schedule to be agreed); with frequency reviewed at the conclusion of the inception stage.

Quarterly with the DfE Advisory Group (incorporating the Supplier's Expert Panel and policy forums) on the first Working Day of each quarter.

Contract management meetings will be held on a quarterly basis.

**KEY STAFF** 

Buyer			
Name	Role	Email	Address
	Senior		DfE Leeds, 7
	Responsible		& 8
	Officer		Wellington
			Place
			Wellington
			Street
			Leeds
			LS1 4AP
	Head of Family		DfE Sheffield,
	Justice, DfE		2 St Paul's
			Place, 125
			Norfolk

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	1		
			Street,
			Sheffield, S1
			2FJ
	SOF Pilots		DfE Sheffield,
	Evaluation Team		2 St Paul's
	Leader		Place, 125
	Leader		Norfolk
			Street,
			Sheffield, S1
			2FJ
	Shared		DfE Sheffield,
	Outcomes Fund		2 St Paul's
	Evaluation		Place, 125
	Project Lead		Norfolk
	Troject Lead		Street,
			Sheffield, S1
			2FJ
	Team Leader,		DfE
	Research and		Sanctuary
	Evaluation,		Buildings,
	Children's		Great Smith
	Social Care		Street
			London
			SW1P 3BT
Supplier and su	ubcontractors		SWIT JET
Supplier and St			4 Mills and
	Head of		4 Millbank,
	evaluation		London,
	(Quality		SW1P 3JA
	assurance)		
	Director,		4 Millbank,
	Methods		London,
	(Methods		SW1P 3JA
	development)		
	Director,		4 Millbank,
	Evaluation		London,
	(Theory based		SW1P 3JA
	eval)		
	Director,		4 Millbank,
	Evaluation		London,
	(Lead Director)		SW1P 3JA
	Associate		4 Millbank,
	Director,		London,
	Evaluation		SW1P 3JA
	(Project		
	manager)		
	Director,		4 Millbank,
	Evaluation		London,
	(Impact eval		SW1P 3JA
	lead)		
	,	1	1

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Alma Economics, Economic evaluation lead	43 Tanner Street, London SE1 3PL
Alma Economics, Economic evaluation support	43 Tanner Street, London SE1 3PL
National Childrens Bureau , Implementation support	23 Mentmore Terrace, London E8 3PN
National Childrens Bureau, Implementation support	23 Mentmore Terrace, London E8 3PN

Repeated at DPS Schedule Order 7.

KEY SUBCONTRACTOR(S) See above; repeated at DPS Schedule Order 7.

E-AUCTIONS Not applicable

COMMERCIALLY SENSITIVE INFORMATION See 'DPS Joint Schedule 4'

SERVICE CREDITS Not applicable

ADDITIONAL INSURANCES Not applicable

GUARANTEE Not applicable

#### SOCIAL VALUE COMMITMENT

The Supplier agrees, in providing the Deliverables and performing its obligations under the Order Contract, that it will comply with the social value commitments in Order Schedule 4 (Order Tender).

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For and on behalf of the Supplier:		For and on behalf of the Buyer:	
Signature:		Signature:	
Name:		Name:	
Role:		Role:	
Date:		Date:	

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# Pack for Call-off Competition

## **Attachment 3 – Statement of Requirements**

Title: Evaluation of pilots to reduce unnecessary family court delays

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FURTHER COMPETITION FROM THE CROWN COMMERICAL SERVICE RM6126 RESEARCH & INSIGHTS DYNAMIC PURCHASING SYSTEM (DPS)

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### 1. Purpose

1.1. The Department for Education (DfE), referred to as 'the Authority' hereafter, is looking for a supplier, or consortium of suppliers, to undertake an evaluation of 3 linked pilot projects all with the same primary aim: to reduce unnecessary delay in family courts.

### 2. Background to the Contracting Authority

- 2.1. The Department for Education (DfE) is a ministerial department responsible for children's services and education, including children's social care, early years, schools, higher and further education policy, apprenticeships, and wider skills in England. The DfE works to provide children's services, education, and skills training that ensures opportunity is equal for all, no matter background, family circumstances, or need. The DfE is supported by 18 agencies and public bodies.
- 2.2. This research opportunity is hosted within the family justice policy area of the Authority, which oversees responsibility for public law care proceedings, including vulnerable children in England who require local authority intervention and care. The family justice system is one of the most complex and cross-system policy areas, with interests and responsibilities shared across the Authority, the Ministry of Justice (MoJ), His Majesty's Courts and Tribunal Service (HMCTS), the Children and Families Court and Advisory Support Service (Cafcass), the judiciary, the Department for Health and Social Care (DHSC), NHS-England, the Department for Work and Pensions (DWP), the Home Office, and the Association for Directors of Children's Services (ADCS).

## 3. Definitions

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Expression or Acronym	Definition	
ADCS	Association for Directors of Children's Services (ADCS) is a membership organisation. Members hold leadership roles in children's services departments in local authorities in England.	
CAFCASS	Children and Family Court Advisory and Support Service advises the family courts about the welfare of children and what is in their best interests.	
Care order	A care order is given by a court. It allows a council to take a child into care. Under the Children Act 1989 a council can apply for a care order if it believes a child is suffering or at risk of suffering significant harm.	
Case duration	Case duration is the length of time a case is in the proceedings stage.	
СМН	Case Management Hearing (CMH) is the first court hearing after children's services apply to the court for a care or supervision order.	
CSC	Children's Social Care.	
DfE	Department for Education; The 'Authority'.	
DFJ	Designated Family Judges (DFJs) are responsible for the administration of Family justice at each major court centre. Designated Family Judges are often responsible for a number of Family Courts in a region, which is referred to as a Designated Family Judge (DFJ) area.	
DHSC	Department for Health and Social Care (DHSC) is a ministerial department supporting ministers in leading the nation's health and social care to help people live more independent, healthier lives for longer.	

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DUUUC	The Department for Levelling United in Communities
DLUHC	The Department for Levelling Up, Housing & Communities
	(DLUHC) is a ministerial department supporting
	communities across the UK to thrive, making them
	great places to live and work.
DWP	The Department for Work and Pensions (DWP) is a
	ministerial department responsible for welfare,
	pensions, and child maintenance policy.
FJ	The family justice (FJ) system exists to help families
	resolve disputes and problems in respect to family
	matters quickly and with minimum of disruption
	to those involved. The family justice system covers
	both public and private law.
НМСТЅ	His Majesty's Courts and Tribunal Service (HMCTS) is
	responsible for the administration of criminal, civil
	and family courts and tribunals in England and
	Wales. HMCTS is an executive agency, sponsored
	by the Ministry of Justice.
НМТ	His Majesty's Treasury (HMT) is the government's
	economic and finance ministry, maintaining control
	over public spending, setting the direction of the
	UK's economic policy and working to achieve
	strong and sustainable economic growth.
Home office	The Home Office is a ministerial department which plays a
	fundamental role in the security and economic
	prosperity of the UK.
IRH	Issue resolution hearings (IRH) take place after the case
	management hearing to resolve outstanding issues
	before the final hearing.
The judiciary	The judiciary is made up of judges, magistrates, tribunal
	members, and coroners. Together, they uphold the
	rule of law.
LA	Local authority

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LFJB Logic model	Local Family Justice Boards (LFJBs) were established to support the work of the Family Justice Board by bringing together the key local agencies, including decision makers and front-line staff, to achieve significant improvement in the performance of the family justice system in their local areas. Visually articulates how the inputs, activities, and outputs	
	of a programme or intervention will lead to intended outcomes and impacts.	
MDT	Multi-disciplinary expert team (MDT) is the team that will be set up in Pilot 3.	
МоЈ	The Ministry of Justice (MoJ) is a government department, at the heart of the justice system. They work to protect and advance the principles of justice.	
Multi-agency working	Working across organisations, such as the courts, health, education, to meet children's needs.	and
NHS England	NHS England leads the National Health Service (NHS) in England. They promote high quality health and care for all.	
NHS Trust	National Health Service Trust (NHS Trust) is a legal entity, set up by order of the Secretary of State under section 25 of, and Schedule 4, to the National Health Service Act 2006, to provide goods and services for the purposes of the health service. They serve healthcare to the local population or geographical area.	
Public Law	Public Law cases are those brought by local authorities or an authorised person to protect the child and ensure they get the care they need. This may lead to local authority care orders, emergency protection orders, supervision orders or adoption orders.	
Pre-proceedings	The stage where children's services consider what should happen before the initiation of public law proceedings under section 31 of the Children Act 1989 to apply for a care or supervision order. Pre- proceedings is the last opportunity for parents to	

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	make improvements to their parenting before care		
	proceedings are issued.		
Private Law	Private Law cases are those court cases between two or		
	more private individuals who are trying to resolve a		
	dispute. This is generally where parents have split		
	up and there is a disagreement about who the		
	children should live with and have contact or		
	otherwise spend time with.		
Proceedings	Proceedings involves cases when a social worker		
	determines that a child is at significant risk of harm,		
	so applies for a court order to intervene and/or		
	remove a child from the family home.		
PLO	The Public Law Outline (PLO) provides a template for		
	case management of proceedings with a view to		
	reducing delay and bringing cases within the		
	statutory 26-week time limit.		
Section 31 (s31)	Section 31 of the Children Act 1989 sets out the		
	circumstances in which a court may order that a		
	child who is suffering or is likely to suffer significant		
	harm be placed in the care, or under the		
	supervision of a local authority.		
Supervision order	A supervision order is a court order that places a duty on		
	children's services to 'advise, assist and befriend' a		
	child and their family for a specified time.		
SW	Social worker (SWs) help to protect vulnerable children and		
	adults from harm or abuse, and support people to live		
	independently.		
Theory of Change	Articulates how and why a change is expected to happen.		
(ТоС)			

### 4. Summary

4.1 The family justice system is one of the most complex and cross-system policy areas in children's services. The DfE holds responsibility for public law, which covers vulnerable children in England who require local authority (LA) intervention and care. Designated Family Judges (DFJs) are responsible for the administration of family justice at each major court centre. Designated Family Judges are often responsible for a number of Family Courts in a region, this is referred to

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as a Designated Family Judge (DFJ) area. These areas vary in size, with some having 1 LA within them and others having over 10 LAs.

- 4.2 Unacceptable delays in the family courts have been a long-standing issue for over 10 years. The Family Justice Review of 2011<sup>1</sup> found that between January and June, average case duration was at 56 weeks, with some cases taking more than 2 years to conclude.
- 4.3 Following the 2011 review, the Children and Families Act 2014<sup>2</sup> established a statutory requirement of 26 weeks for a family case to conclude, using a new process called the Public Law Outline (PLO). This covered from when a social worker (SW) makes the decision to take a child's case to court, to when an Order is made by the Judge. This system wide push to follow the PLO principles supported a successful decrease in case duration, achieving an average of 27 weeks in 2016<sup>3</sup>.
- 4.4 However, this was not sustainable and an increase in demand, in parallel with behavioural changes due to lack of resource, created less trust and more risk-aversion across the system<sup>4</sup>. This, exacerbated by the COVID-19 pandemic, led to case duration increasing again, reaching an average of 46 weeks in 2022<sup>5</sup>.
- 4.5 In April 2022, the DfE commissioned Cafcass and ADCS to undertake a snapshot survey, focussing on public law cases where children experience the longest delay (48+ weeks). Based on the returns from 106 LAs (representing a 72% response rate from eligible LAs), stakeholders were able to determine the key drivers of delay. These drivers are:
  - Ordering of new assessments.
  - Number of additional expert assessments required.
  - Changes to care plans.
  - Lack of Judge availability.
- 4.6 To attempt to tackle identified drivers of delay, the DfE has developed 3 pilot programmes aiming to reduce unnecessary family court delays. £5.8 million funding will be allocated to areas to implement pilots. These will all attempt to tackle different root causes of delays:
  - **Pilot 1 (£2.5m)** Designated Family Judge (DFJ) trailblazer areas will implement tailored solutions addressing their main drivers of delay, these will be identified following deep dives in conjunction with DfEs appointed Delivery Partner. Funding

<sup>&</sup>lt;sup>1</sup> Family Justice Review reports - GOV.UK (www.gov.uk)

<sup>&</sup>lt;sup>2</sup> Children and Families Act 2014 (legislation.gov.uk)

<sup>&</sup>lt;sup>3</sup> <u>Court delays report (mutualventures.co.uk)</u>

<sup>&</sup>lt;sup>4</sup> Children and Families Act 2014: an example of inadequate implementation - Committees - UK Parliament

<sup>&</sup>lt;sup>5</sup> Annual data summaries | Cafcass

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has been allocated to selected DFJ areas and distributed based on the size of the DFJ and number of LAs within it.

- Pilot 2 Pre-Case Management Hearings, in conjunction with Cafcass to improve case preparation between the Cafcass Guardian and the LA social worker. Introduction of a formal meeting should improve understanding of the issues and in turn improve the effectiveness of the Case-Management Hearing reducing the need for additional hearings. This will aim to address the key drivers identified: ordering of new assessments, number of additional expert assessments required and changes to care plans.
- **Pilot 3 (£3.4m)** Multi-Disciplinary Expert Teams (MDT) in conjunction with NHS-England, to improve expert assessment quality and reduce the need to request additional expert opinion. Funding will be allocated between selected NHS Trusts to deliver the MDTs. This will aim to address the key drivers identified: number of additional expert assessments required and changes to care plans.
- 4.7 The DfE recognises that delay is not always negative for children and young people and is sometimes in the best interest of the child. These pilots are looking to address unnecessary delays caused by the system.
- 4.8 The Authority would like to commission one evaluation covering these pilots up until March
   2026 to the value of up to £425,000 (excluding VAT). This will include a break clause in March
   2025. The break clause is to review the outcome of the next Spending Review settlement.
- 4.9 We invite bidders to suggest the most robust and cost-effective methodological approaches within the budget. Bidders should propose methods for the entire period (until March 2026), including what will be achieved and provided to the DfE by March 2025. We expect process and implementation evaluations for all pilots and early impact and economic evaluations, where feasible.

4.10 The broad research objectives that the DfE have identified are as follows:

- to understand, refine and monitor the development and delivery of the pilots, including through logic models and theory of changes,
- to understand the early impacts of the pilots including on the intended primary outcome: reducing the length of proceedings; and
- to assess the costs and potential benefits of the pilots.

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- 4.11 Cafcass and HMCTS currently collect data about the family courts. Some data is published, some is unpublished. The Authority has good relationships with Cafcass and the MoJ (who have access to HMCTS data) and will strive to provide the successful supplier with access to unpublished data for use in the evaluation.
- 4.12 An Advisory Group for the evaluation will be convened, consisting of representatives from the Authority, the supplier, and any other key organisations, experts, and academics. This will include representatives from other government departments such as the MoJ and Cafcass. The DfE will have responsibility for setting up and managing the advisory group, with close support from the supplier.
- 4.13 The DfE's commitment to independent evaluation of the pilots addresses a HM Treasury core requirement for funding this programme of work.
- 4.14 The customer for this work is the family justice policy team within the DfE. Evaluation of the pilots will inform:
  - **Pilot 1** Whether to roll-out to additional DFJ areas. This will be based on the success of early tailored solutions delivered.
  - **Pilot 2** Whether to change statutory guidance and regulations to include the pre-CMH meeting as part of the Public Law Outline (PLO) process, making it a statutory duty for all LAs to hold this meeting.
  - **Pilot 3** Future decisions around the feasibility and appetite for wider adoption of this approach, including funding to scale-up this approach more regionally or nationally.

### 5. Background to the Requirement

#### 5.1 POLICY BACKGROUND

5.1.1 As mentioned in Section 4 above, following the Family Justice Review in 2011, the Children and Families Act 2014 established a statutory requirement of 26 weeks for a family public law case to conclude, using a process called the Public Law Outline (PLO). This is the process from when a children's social worker makes the decision to take a child's case to court, to when an Order is made by the Judge. This system wide push to follow the PLO principles supported a successful decrease in case duration, achieving an average of 27 weeks in

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2016<sup>3</sup>. However, this was not sustainable and an increase in demand, led to average case duration increasing again, reaching 46 weeks in  $2022/23^5$ .



5.1.2 Figure 1 below shows the mean duration of care proceedings from 2011 to 2021<sup>3</sup>, highlighted by the black line.

Figure 1. Summary statistics on the time to first definitive disposal for care proceedings in the Family courts of England and Wales, annually 2011–2021.

- 5.1.3 Many children go through court proceedings. Between 1<sup>st</sup> April 2023 and 31<sup>st</sup> December 2023, Cafcass received 11,923 new public law children's cases, involving 19,170 children<sup>6</sup>. Numbers vary significantly by DFJ area, a DFJ area may have between 25 to over 250 cases every 3 months<sup>7</sup>.
- 5.1.4 Recent research included causes of care proceeding delays across nearly 60 LAs, representatives of Cafcass, Designated Family Judges (DFJs), and young people with lived experience of the FJ system<sup>3</sup>. The overriding message is that to achieve substantial reduction in court delays, a whole system approach is needed. For example, addressing judiciary capacity issues and children's social workers workforce pressures. To create such sustainable cross-system changes needed to bring down unnecessary family court delays, we need to test changes to create efficiencies in the FJ system to enable quicker decisions, ensuring the right children enter the court system, at the right time and concluded in a timely manner.

- <sup>7</sup> <u>Family Court Statistics Quarterly: July to September 2023 GOV.UK (www.gov.uk)</u> Bid pack for Evaluation of pilots to reduce unnecessary family court delays.
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<sup>&</sup>lt;sup>6</sup> <u>https://www.cafcass.gov.uk/about-us/our-data</u>



- 5.1.5 Evidence shows that delayed decisions can have adverse outcomes on children<sup>8</sup>.
   Additionally, it causes huge additional costs to LAs and the taxpayer<sup>9</sup>. The independent review of children's social care estimated that the FJ system costs £1.2bn annually<sup>10</sup>, which equates to over 10% of all direct local authority expenditure of the children's social care (CSC) system (2019/20).
- 5.1.6 Further research has found the average lifetime social cost of adverse outcomes per child who need a social worker is estimated to be £720,000<sup>9</sup>. The estimated social cost of adverse outcomes for all children with a social worker per year is approximately £23bn<sup>9</sup>. Recent independent modelling suggests that each one-week reduction in average proceedings duration could generate a financial cost avoidance of approximately £24 million annually when projected across all English LA CSC budgets<sup>3</sup>. This modelling was based on the average duration of proceedings, the average number of hearings per proceeding and, the average number of non-LA assessments per proceeding. Estimated cost savings are written below.

Estimated average impacts of reducing proceeding duration by one week:

- Placement cost saving per proceeding per week = £919
- Legal staffing cost impact per proceeding per week = £227

Estimated average impacts per hearing avoided:

- Legal staffing cost impact per hearing = £622
- Social work staffing cost impact per hearing = £467
- Barrister cost saving per hearing = £2,500

Estimated average impacts per non-LA assessment:

- External expert cost saving per assessment = £844
- 5.1.7 As mentioned in Section 4 above, the DfE commissioned Cafcass and ADCS to undertake a snapshot survey, focussing on public law cases where children experience the longest delay. Stakeholders were able to determine the key drivers of delay as:
  - Ordering of new assessments.
  - Number of additional expert assessments required.
  - Changes to care plans.
  - Lack of Judge availability.

<sup>&</sup>lt;sup>8</sup><u>https://assets.publishing.service.gov.uk/media/5a7c0870ed915d01ba1cab6e/Decision-making\_within\_a\_child\_s\_timeframe.pdf</u>

<sup>&</sup>lt;sup>9</sup> Paying-the-Price.pdf (nationalarchives.gov.uk)

<sup>&</sup>lt;sup>10</sup> Independent review of children's social care - GOV.UK (www.gov.uk)

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5.1.8 To attempt to tackle identified drivers of delay, the Authority has developed 3 pilot programmes aiming to reduce unnecessary family court delays. Further details about each pilot are written below:

Pilot	Intervention	Implementation	Delivery
Pilot 1 – DFJ Trailblazers	Intervention This pilot will involve 5 DFJ areas, where areas will develop tailored solutions based on issues that have come from the deep dives. The Delivery Partner will work with areas to run deep dives, and to develop and implement solutions. Solutions will be decided based on what areas can feasibly implement that is within their area of responsibility. Solutions will be tailored to DFJ areas. LAs within a DFJ are expected to implement similar solutions.	ImplementationThe Authority identified 23 DFJ areas as eligible to bid for the pilot. This is based on areas that were struggling the most with delays e.g., those whose case duration was higher than the national average in 2022/23. £2.5 million has been allocated to fund all areas and funding will be distributed based on the size of the DFJ and the number of LAs within it. Lead LAs have sent expressions of interest to the Authority and successful LAs will be notified in January 2024. Criteria for selection were:• Ability to work with a Delivery Partner.	Delivery The Authority are procuring a Delivery Partner to run the deep dives and to develop and implement solutions. The Delivery Partner will be in place from January 2024. Deep dives are expected to finish in April 2024 when solutions will begin to be implemented. Local authorities and the Delivery Partner have been informed that they will be expected to work with the Evaluation Partner including to share relevant data and agree a data collection strategy. Roles of the Delivery Partner and Evaluation Partner have been shared and we have included a summary of

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		<ul> <li>Stakeholder engagement and how areas will engage with their local partners.</li> <li>Governance and leadership.</li> <li>Resource / capacity.</li> <li>Financial monitoring / assurance.</li> </ul>	
PILOT 2 – Cafcass pre- CMH Meeting	<ul> <li>This pilot will introduce a pre-Case</li> <li>Management Hearing (CMH) meeting between</li> <li>the Cafcass Guardian and the LA social worker.</li> <li>This meeting should improve understanding of</li> <li>the issues and in turn improve the</li> <li>effectiveness of the Case-Management</li> <li>Hearing by reducing the need for additional</li> <li>hearings.</li> <li>Proof of concept phase</li> <li>An initial proof-of-concept phase with 22 LAs</li> <li>concluded in December 2023. This tested the</li> <li>practicalities of the meeting on a small scale,</li> <li>refining the meeting terms of reference and</li> <li>providing recommendations for the</li> <li>substantive roll-out of the pilot. This included</li> </ul>	There will be no selection process for this phase of the pilot, all LAs will be encouraged to participate in the pilot with the aim to achieve close to national rollout. We will be launching an expression of interest in January 2024 and asking LAs to confirm participation. We expect that LAs who participated in the proof-of-concept phase will participate in the wider roll out and there was substantial interest in participation for the proof-of-concept phase. However, DfE cannot confirm scale of take up at this stage. LAs will not receive funding to take part in this pilot.	The process has begun to recruit a Delivery Partner, with the procurement process starting in January 2024. They will facilitate feasibility and scalability of the pilot for wider rollout from April 2024. The Delivery Partner will be required to work with the Evaluation Partner as per the roles highlighted in Annex A.

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	considerations such as organising the meeting, facilitating the meeting, minutes and note- taking, and how to involve the voice of the parent, child and wider family. We will share the proof-of-concept findings with the successful supplier.		
PILOT 3 – MDT Team	<ul> <li>This pilot will bring together a team of</li> <li>paediatric medical experts to provide a</li> <li>Suspected Inflicted Injury Service focussing</li> <li>primarily on abusive head and spine trauma.</li> <li>This will create a formalised pathway by a</li> <li>multi-disciplinary expert team (MDT) to</li> <li>provide expert reports and witness testimony</li> <li>in court. The MDT will seek to address</li> <li>required improvements in both the quality of</li> <li>reporting, and capacity of experts in public law</li> <li>to enable more effective evidence</li> <li>presentation, therefore allowing more timely</li> <li>decision-making and reducing unnecessary</li> <li>delay.</li> </ul> Figure 2 below is a high-level flow chart of how the MDT pilot may run in practice. Although	<ul> <li>There will be up to three MDTs created (this is to be decided). This may include a consortium of NHS Trusts to deliver a single MDT. Criteria for selection of NHS- Trusts will include:</li> <li>Minimum number of 10 cases processed annually.</li> <li>The ability to provide the minimum medical expertise of the core members of the MDT: safeguarding paediatrician, paediatric radiologist, neurosurgeon, neuroradiologist working in paediatrics, paediatric ophthalmologist, genetics and haematology.</li> </ul>	There will be no Delivery Partner for this pilot. NHS-Trusts will be responsible for their delivery. The DfE will have support from NHS England throughout the bidding process. A procurement process is planned to commence in late January 2024, with NHS partners secured and ready to deliver from April 2024. £3.378 million will be allocated between the successful NHS Trusts to deliver the MDTs. The NHS Trusts will be required to work with the Evaluation Partner to enable effective evaluation of the pilot.

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this diagram gives an idea of how the process will be administered, there will be more detailed and further information once we have agreed the successful NHS Trusts who will deliver the pilot.	<ul> <li>The safeguarding paediatrician must have experience at expert witness level; and,</li> <li>The NHS Trust must have at least a "Good" CQC rating for their</li> </ul>
	service.

Figure 2. A flow chart containing information about how the Multi-Disciplinary Teams are expected to run in practice for Pilot 3 (subject to change).



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#### 5.2 CURRENT TIMELINE FOR PILOTS.



Please note that these timings are subject to change.

#### 5.3 LOGIC MODELS

5.3.1 The Authority has developed logic models for Pilots 2 and 3. This articulates how the pilots are expected to be delivered and lead to short term and medium term outcomes. A logic model for Pilot 1 has not yet been created as the delivery of pilots is still unknown and DFJ areas will be implementing different solutions. Please see logic models for Pilots 2 and 3 in Annex B and C below.

### 6. The Requirement

#### 6.1. RESEARCH OBJECTIVES

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- 6.1.1 The Authority is seeking to contract a supplier, or consortium of suppliers, to undertake an evaluation of all three pilots described in Section 5 above. The broad objectives of the research are:
  - to understand, refine and monitor the development and delivery of the pilots, including through logic models and theory of changes,
  - to understand the early impacts of the pilots including on the intended primary outcome: reducing the length of proceedings; and
  - to assess the costs and potential benefits of the pilots.

Specific research questions for each pilot are written below.

#### 6.1.2 PILOT 1 – DFJ Trailblazers

#### 6.1.2.1 Process and implementation

- How was the pilot designed and implemented?
- What similarities and differences are there between the way LAs and DFJs design and implement solutions?
- What are the barriers and facilitators to implementation and delivery?
- What, if any, are the unintended consequences?
- Is the delivery of the solutions acceptable to key stakeholders?
- What do leaders, practitioners and families perceive as potential impacts of the solutions on their intended outcomes?
- What are the costs of implementing and delivering the pilot?
- What data is already collected? How accurate is available MI data?
- What does the business-as-usual implementation look like after the pilot ends?

#### 6.1.2.2 Impact

- Where feasible, what are the impacts of the pilot on length of proceedings? Including the characteristics of cases with longer proceedings e.g., those involving sibling groups.
- To what extent do impacts vary between local areas?

6.1.2.3 Economic

- What are the social and economic costs and benefits of the pilot?
- To what extent does the pilot represent value for money?

#### 6.1.3 PILOT 2 – Cafcass pre-CMH Meeting

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#### 6.1.3.1 Process and implementation

- Was the pilot implemented as set out in the logic model, and to what extent does it vary?
- How does implementation differ between local authorities?
- What are the barriers and facilitators to implementation and delivery?
- What, if any, are the unintended consequences?
- Is the delivery of the pilot acceptable to key stakeholders?
- What do leaders, practitioners and families perceive as potential impacts of the pilot on its intended outcomes?
- What are the costs of implementing and delivering the pilot?
- What does the business-as-usual implementation look like after the pilot ends?

#### 6.1.3.2 Impact

- Where feasible, what are the impacts of the pilot as outlined in the logic model?
- What are the impacts on the pilot's primary aim: to reduce the length of proceedings? Including the characteristics of cases with longer proceedings e.g., those involving sibling groups.
- To what extent do impacts vary between local areas?

6.1.3.3 Economic

• What are the social and economic costs and benefits of the pilot?

#### 6.1.4 PILOT 3 – MDT Team

#### 6.1.4.1 Process and implementation

- How was the MDT set up and implemented by the NHS Trusts?
- How does implementation differ between each NHS Trust?
- Was the pilot implemented as set out in the logic model, and to what extent does it vary?
- What are the barriers and facilitators to implementation and delivery?
- What, if any, are the unintended consequences?
- Is the delivery of the pilot acceptable to key stakeholders?
- What do leaders and practitioners identify as potential impacts of the pilot on its intended outcomes?
- What are the costs of implementing and delivering the pilot?
- What does the business-as-usual implementation look like after the pilot period ends?

#### 6.1.4.2 Impact

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- Where feasible, what are the impacts of the pilot as outlined in the logic model?
- What are the impacts on the pilot's primary aim: to reduce the length of proceedings? Including the characteristics of cases with longer proceedings e.g., those involving sibling groups.
- To what extent do impacts vary between local areas?

6.1.4.3 Economic

- What are the social and economic costs and benefits of the pilot?
- To what extent does the pilot represent value for money?

#### 6.2 TARGET PARTICIPANT GROUP

6.2.1 The target population in scope for this study will be:

- **Pilot 1** 5 Designated Family Judge (DFJ) areas containing upper-tier local authorities. Sizes of these DFJ areas will vary, as will the number of local authorities within them (for example, ranging from 1 to 11 LAs).
- **Pilot 2** Upper-tier local authorities. The number will depend on how many agree to participate in the pilot.
- **Pilot 3** NHS-Trusts. There will likely be up to 3 MDTs, and NHS-Trusts will be able to bid together to deliver 1 MDT. Sizes will vary but there will be a minimum number of 10 cases needed as per the selection criteria.

6.2.2 The target population group is likely to involve:

- Local authority staff, including but not limited to, social workers and support workers.
- Family court staff, including but not limited to, judges and admin staff.
- Cafcass staff, including but not limited to, Cafcass Guardians.
- Medical staff, including but not limited to, paediatricians.
- Where appropriate, children and families

#### 6.3 SUGGESTED APPROACH AND ANALYSIS

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- 6.3.1 This tender includes three related pilots to be evaluated over 2 years (until March 2026). This includes a break clause in March 2025. The break clause is to review the outcome of the next Spending Review settlement. We will aim to let the supplier know as soon as possible whether the break clause will be activated. At the latest, we will let the supplier know 1 month before the 31<sup>st</sup> of March 2025.
- 6.3.2 We have chosen to procure one supplier, or a consortium of suppliers, to increase information sharing across pilots.
- 6.3.3 We invite bidders to suggest the most robust and cost-effective methodological approaches within the budget. Bidders should propose methods for the entire period (until March 2026), including what will be achieved and provided to the DfE by March 2025. We expect process and implementation evaluations for all pilots and early impact and economic evaluations, where feasible.
- 6.3.4 We ask for bidders to provide an evaluation plan at the end of the contract (either in March 2025 or March 2026) to describe how impact can be assessed using management information and data collection methods after the end of the contract if it has not been possible to fully assess impact within the timeframes.
- 6.3.5 The expectation is that evidence standards for these evaluations will be in line with the Magenta Book<sup>11</sup> and the Green Book<sup>12</sup>.
- 6.3.6 We expect the proposal to include how the methodology will consider ethical issues, especially if including research with children and young people.
- 6.3.7 Suggested sources of evidence

The sources of evidence below are suggested. We do not expect bidders to suggest all of these and welcome alternative sources of evidence. We invite bidders to provide detail about sources of evidence that will be most appropriate to answer research questions and objectives within the timescales and budget.

- **Theory of change workshops** involving internal and external stakeholders to understand the project aims, change mechanics, timings and expected outcomes.
- **Desk research** for example, to contribute to the theory of change.
- Analysis of management information this could include data collected by local authorities/hospitals or data provided by organisations such as Cafcass and HMCTS (please see further information in 'Existing management information' below). This

<sup>&</sup>lt;sup>11</sup> The Magenta Book - GOV.UK (www.gov.uk)

<sup>&</sup>lt;sup>12</sup> The Green Book (2022) - GOV.UK (www.gov.uk)

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could include data to assess outcome measures such as length of proceedings or number of expert assessments requested.

- **Document analysis of relevant materials** for example, for Pilot 3, this could include analysing the reports provided to the judge after the strategy meeting.
- Surveys of staff this could include surveys to head and spine injury experts for Pilot 3, and Cafcass guardians and social workers for Pilot 2. These would enable an understanding of, for example, activities being delivered, barriers and facilitators to implementation and perceptions about outcomes.
- Qualitative fieldwork with staff this could include interviews and/or focus groups with staff (such as those mentioned above). This will aid with developing a more indepth understanding of how pilots are implemented and any perceived impacts (e.g., for Pilot 2, does the meeting increase understanding about cases).
- Analysis of cost data this could include data about the costs of legal staff, social workers, barristers, and external experts.
- Research with young people -
  - **Analysis of participant documentation** for example, any case notes which set out young people's views.
  - Surveys to understand views of interventions. For example, their experience of court proceedings.
  - **Qualitative fieldwork** interviews and/or focus groups with young people to understand their experiences in more depth.

#### 6.3.8 Existing management information

#### 6.3.8.1 'Core Case Data' CCD

HMCTS have launched their Core Case Data (CCD) system which captures a wider array of case detail, offering more granularity and better data quality. HMCTS primarily collect and report data at DFJ level, but it may be possible to determine the LA(s) involved in cases.

Data available includes:

- Length of proceedings.
- Hearings per case including by type of hearings.
- Hearing dates including the date of next hearing by type of hearing.
- Adjournments including reasons for adjournments.
- Expert reports.
- Orders.
- Applications; and
- Disposals.

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The potential for data sharing is being discussed between MoJ (who have access to the CCD database) and the Authority. Access would depend on what data is needed and in what format it is needed in. There may be limitations where data can be joined to other, personally identifiable datasets, however sharing pseudonymised data may be possible.

We expect that this will be the most applicable to Pilots 1 and 2.

#### 6.3.8.2 Cafcass data

Cafcass publish data quarterly showing average duration for care and supervision (s31) applications by DFJ and LA. They also publish data annually about the number of public law cases received, the number of care applications received, and the length of care and supervision cases.

The Authority will work with the successful supplier to request data from Cafcass to assist with analysis. The Authority has received unpublished data from Cafcass in the past. Information about Cafcass' research approval processes can be found on their website - <u>Our research | Cafcass</u>. This includes how to gain access to databases.

We expect that this would be the most applicable to Pilots 1 and 2.

#### 6.3.9 Considerations for Bidders

Bidders should set out clearly:

- The volume and frequency of the proposed research activities, for example, the number of surveys, interviews/focus groups and case-study activities.
- The methods that will be used to collect data. Including sampling strategy, approaches for encouraging participation, expected response rate, and mitigations against low response rate.
- The methods that will be used to analyse data. Including statistical methods for evaluating impact.
- How they will scope data requirements and assess what existing data is available.

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• Where data is not available, how they will develop and administer new data collections, ensuring they minimise burden.

#### 6.3.10 Evaluation methods

#### 6.3.10.1 Process and implementation evaluation

- We suggest a mixed methods approach, including quantitative elements and qualitative elements.
- For Pilot 1, areas may be implementing different solutions, and therefore we suggest that a case study approach may be appropriate to investigate how different DFJs are implementing solutions and how LAs within the same DFJ are implementing solutions.
- For Pilot 3, the process and implementation element of the evaluation will be particularly important as the pilot set up will be developing throughout.
- We suggest that desk analysis and qualitative research will be useful to understand what data LAs collect, the accuracy of this data and interpretation of management information collected by the CCD and Cafcass. We suggest that this information is used to inform the evaluation of all pilots.
- Pilots are planning to end in March 2025, so we expect the supplier to investigate the business-as-usual approach or support options for wider rollout and include this in their final report.
- We ask bidders to suggest the most appropriate methods.

#### 6.3.10.2 Impact evaluation

- Our aim is to measure impact within this contract as much as possible. We recognise the challenges in measuring this given the short timescales and implementation methods. For Pilot 1, there is the additional challenge that areas may be implementing different solutions following the deep dive work. For Pilot 3, there is additional challenge because of the small number of cases involved.
- We suggest a mixed-methods design, incorporating qualitative and quantitative methods, incorporating management information wherever possible. We would like bidders to consider a quasi-experimental design and anticipate the design will be flexible due to the nature of the pilots. Flexibility will be particularly important for Pilot 3 as NHS-Trust selection is ongoing.
- We are interested in exploring proxy measures for outcomes. For example, assessing number of hearing days in a case and the time between hearings to assess the length of proceedings.
- We are open to suggestions of the best ways to assess or monitor outcomes and impacts.

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#### 6.3.10.3 Economic evaluation

• Wherever possible, we suggest a cost-benefit evaluation to investigate the financial and wider economic costs of implementing the pilot vs. the benefits produced due to the outcomes described above (e.g., reduction in length of proceeding). This would look at costs and benefits to local and wider government. This may be using data collected for the impact evaluation and any further data collection e.g., analysis of cost data. For Pilot 2, this would involve an assessment of whether there were any costs involved with implementing the pilots. **We ask bidders to suggest the most appropriate approach.** 

#### 6.4 **RESEARCH OUTPUTS**

- **Primary data collection tools** will be shared with Authority for input, and the Authority will have the final say on outputs. Where appropriate, stakeholders in the advisory group will be sent data collection tools for their input. In these cases, we expect advisory group comments to be fully considered. We expect time for advisory group comments is reflected in timetables.
- Logic models developed for all pilots. For Pilot 2 and 3, this will build on the logic models in Annex B and C. For Pilot 1, we expect the supplier to work with the Delivery Partner to establish how solutions are being delivered and to develop a logic model for this. Logic models will be flexible as they will be developed alongside pilots. We expect a first draft to be shared with the Authority on 1<sup>st</sup> July 2024. We expect final versions to be included in the interim and final reports.
- Theory of changes for Pilots 2 and 3. We do not expect a theory of change for Pilot 1. This will include theory of change workshops and desk research. We expect these to be developed throughout the evaluation and to be flexible. We expect a first draft to be completed and shared with the Authority by the 1<sup>st</sup> of July 2024. We expect final versions to be included in the interim and final reports.
- **2 presentations** (with PowerPoint) will be delivered to the Authority in January 2025 and January 2026 (date to be decided) with findings from the evaluations. They will both be 1 hour long, presented virtually and must be suitable for analytical and policy colleagues. The Authority will be provided with the slides at least 1 week in advance to provide comments.
- Interim report will be produced for 14th February 2025. This will be one report and contain findings and progress on the evaluation of all pilots. Each report will include a summary of each pilot, evaluation findings (including graphs and tables to make the data accessible), evaluation methods, conclusions about whether the pilots were successful, wherever possible, and recommendations. We expect this report to be written to a high quality and publishable standard, adhering to the Department for Education's style guidance and accessibility criteria. The Authority will decide whether to publish the report. We expect that

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the Authority will have at least two rounds of comments and that the advisory group will have one round of comments. We expect the supplier to fully take on board the advisory group comments, however the Authority will have the final say. We expect this to be built into the timetable for delivery by 14<sup>th</sup> February 2025.

- 3 final reports will be delivered by 20<sup>th</sup> February 2026. We expect these reports to build on the interim report. One report will be written for each pilot. Each report will include a summary of each pilot, evaluation findings (including graphs and tables to make the data accessible), evaluation methods, conclusions about whether the pilots were successful, wherever possible, and recommendations. We expect this report to be written to a high quality and publishable standard, adhering to the Department for Education's style guidance and accessibility criteria. We expect the Authority to have at least two rounds of comments and the advisory group to have one round of comments. We expect the supplier to fully take on board the advisory group comments, however DfE will have the final say. We expect these rounds of comments to be written into the timetable for delivery by 20<sup>th</sup> February 2026.
- Best practice guides will be produced by 27<sup>th</sup> February 2026. Alongside the final reports, we expect the evaluator to create best practice guides to be used by LAs, DFJs, the Courts and NHS-Trusts. These will provide practical advice about how to implement the pilots (e.g., the pre-Case Management Hearing) and contain findings from the evaluations. These will be published on gov.uk and will therefore need to adhere to the Department for Education's style guidance and accessibility criteria. We expect the Authority to provide two rounds of comments and for the advisory group to provide one round of comments. We expect this to be built into the timetable. We expect the supplier to fully take on board the advisory group comments, and the Authority to have the final say.
- An evaluation plan will be delivered at the end of the contract (13<sup>th</sup> March 2025/2026) containing information about how impact can be measured beyond the contract period through existing management information or through additional data collections. We expect this to contain recommendations for continuing the evaluation and lessons learnt.
- An **anonymised dataset** will be delivered before the end of the contract (13<sup>th</sup> March 2025/2026). Format to be agreed with the Authority. This may be shared with DHSC, NHS-England and MoJ following a data sharing agreement. The Authority may archive this anonymised dataset to make it available for further analysis.

#### 6.5 LIAISON ARRANGEMENTS

6.5.1 Bidders must propose a project team with demonstrable skills and experience in complex mixed-methods evaluations. The project team must also have relevant experience, such as working on children's social care and/or family justice related projects.

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- 6.5.2 An experienced lead researcher must take overall responsibility for directing this project and liaising with the Authority for the entirety of this project. They must be named in the proposal. Any replacement will need to be a researcher of similar status and experience.
- 6.5.3 All other researchers proposed for work in the project must be named in the tender. This must include daily rates of each grade of research staff specified, relevant policy and methodological experience, and areas of expertise.
- 6.5.4 Where a tender proposes two or more research organisations, the key research managers must be named for all service providers. One of the research managers must be nominated as lead manager.
- 6.5.5 Bidders must demonstrate an understanding of the roles and responsibilities of the Delivery Partner. Bidders must propose how they will work with the Delivery Partner to support the evaluation aims and objectives and the dissemination of evidence. This includes to share relevant data and agree a data collection strategy. The roles and responsibilities of the Delivery Partner are set out in Annex A.
- 6.5.6 The supplier must regularly report to key policy and analytical representatives from the Department for Education on the progress of the project. We also expect progress and findings to be shared with HMT. Frequency, type, and reporting details will be agreed at project inception. We suggest this is weekly. The supplier must create an action log and risk register.
- 6.5.7 The supplier may also need to occasionally report to the Pilot Programme Boards. This Pilot Programme Board consists of senior policy and analytical stakeholders, including the Department for Educatiolon and representatives from other government departments, such as the Ministry of Justice.
- 6.5.8 Additionally, we expect there to be occasional review meetings with wider Department for Education representatives to discuss progress on the evaluation's key aims and research questions. We suggest a meeting in Autumn 2025 and 2026.
- 6.5.9 As mentioned above, an Advisory Group for the evaluation will be convened, consisting of representatives from the Authority, the supplier, and other relevant key organisations, experts, and academics. This will include representatives from other government departments. Terms of reference will be created and agreed by all parties. The function of the group will be to:
  - Provide expertise and independent advice, guidance, and input on challenges with methods, ethics, and evaluation approach.
  - Promote and endorse the research to encourage participation.

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- Provide specialist advice on policy and practice and on recent and relevant evidence relating to the evaluation.
- Review and comment on evaluation outputs, including draft research tools where appropriate (e.g., surveys, topic guides) and reports.
- Advise on and assist with ways to disseminate and utilise findings from the evaluation, including identifying implications for policy and practice.

The DfE will have responsibility for setting up and managing the advisory group, with close support from the supplier. This group will be virtual and likely to be a total of 3 meetings over the duration of the evaluation. Additional ad-hoc meetings or correspondence via emails may be necessary.

We expect the supplier to prepare materials for the meetings (e.g., slide packs) and take feedback from the advisory group on research methods, outputs, and reports. This will need to be built into the timetable.

The Authority will be responsible for organising and taking minutes for the meeting. A note of each meeting will be distributed to the advisory group.

6.7.10 The successful supplier will be responsible for obtaining data sharing agreements. This will be from local authorities, hospitals, courts, and NHS Trusts for the purposes of sharing management information. Data sharing agreements will also be needed with MoJ, HMCTS and Cafcass for access to their management information.

### 6.8 TIMINGS

Activity	Date
Launch of ITT	25.01.2024
Clarification period opens	25.01.2024
Clarification period closes	09.02.2024
Deadline for publication of responses to clarification questions	16.02.2024
Bid submission deadline	06.03.2024

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Proposed award notification	20.03.2024
Contract signed	03.04.2024
Project inception meeting	08.04.2024

### 6.9 BUDGET

6.9.1 The budget for this project, including expenses is £425,000 (excluding VAT). By financial year: £325,000 in 2024/25, £100,000 in 2025/26 subject to Spending Review. Cost breakdowns by financial years are fixed and cannot be changed. A break clause will be built into the contract at the end of March 2025, to review the outcome of the next Spending Review settlement. Cost breakdowns by pilot evaluation are as follows: Pilot 1 £150,000, Pilot 2 £125,000 and Pilot 3 £150,000. This is our suggested allocations; however, we are open to reallocation on these costings. If bidders think the allocations need to be adjusted, please explain reasons. A detailed breakdown of costs is required within Attachment 4 Price Schedule as per the instructions set out in Attachment 2 Instructions to Bidders.

### 6.10 FORMAT OF PROPOSAL

- 6.10.1 Your written proposal should clearly demonstrate how you will deliver the requirements, including whether the services will be delivered solely by your 'in-house' capability or whether you intend to Sub-Contract any element(s) of the Services delivering the proposal, as part of a consortium bid. Details of sub-contractors should also be provided as part of your response to Qualification Criteria 4 Further Information within Attachment 2 Instructions to Bidders.
- 6.10.2 Your proposal should be in the following format:
  - Format: Microsoft Word or PDF
  - Font: Min. font size 12 pt
  - **Page Limit:** 30 A4 Pages and no more than 20,000 words. Anything longer than this will be disregarded and not evaluated. This includes the Additional Proposal Sections

6.10.3 Your proposal should contain the following:

- Section 1: Table of Contents not included in word count.
- Section 2: Summary of Proposal.
- Section 3: Meeting the Requirement:
  - Aims and Objectives.

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- Methodology and Rationale.
- Project Management and Monitoring.
- Staffing (Include CVs of the project team members as an Annex – CVs are not included in word count).
- Outputs and Reporting.
- Timetable of Activities (including time per activity).
- **Section 4:** Risk Management (Including Risk Register). (further details given in 'Proposal Requirements Section 4: Risk Management' below).
- Section 5: Data Security Consideration and Arrangements.
- Section 6: References and Expertise
- Section 7: Social Value: Wellbeing

# 6.11 Proposal Requirements – Section 4: Risk Management

- 6.11.1 You should submit as part of your proposal a one-page summary on what you believe will be the key risks to delivering the project and what contingencies you will put in place to deal with them.
- 6.11.2 A risk is any factor that may delay, disrupt, or prevent the full achievement of a project objective. All risks should be identified. For each risk, the one-page summary should assess its likelihood (high, medium, or low) and specify its possible impact on the project objectives (again rated high, medium, or low). The assessment should also identify appropriate actions that would reduce or eliminate each risk or its impact.
- 6.11.3 Typical areas of risk for a research project might include staffing, resource constraints, technical constraints, data access, timing, management, and operational issues, but this is not an exhaustive list.

# 6.12 Additional Proposal Requirements – Dependencies

6.12.1 You should indicate in your proposal if you are reliant on any third party for the access of information, data or undertaking any of the work. This should be considered in addition to your requirement to outline formal sub-contracting arrangements within your response.

# 6.13 Additional Proposal Requirements – Monitoring Techniques

**6.13.1** You should indicate in your proposal how you will monitor the project to ensure it is delivered in terms of quality, timeliness, and cost.

# 6.14 Additional Proposal Requirements – The Use of Incentives

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- 6.15 With some important exceptions, the Authority believes that the routine use of respondent incentives in surveys is, in general, not justified as they are rarely cost effective in either increasing participation or reducing non-response biases. If you are proposing the use of respondent incentives in your proposal you must set out why you feel they are necessary, why it is not possible to achieve the required sample sizes or response rates without the use of incentives, how and to what extent they will raise the overall response rate, how you will mitigate any specific biases that could be introduced, and provide a cost comparison with non-incentive methods. Your arguments should be supported by empirical evidence from past use.
- 6.16 The exceptions to this are payment for participation in group discussions or in-depth qualitative interviews, payment to cover respondent expenses e.g., travel and childcare costs, and compensation for excessive demand on respondents, e.g., taking basic skills tests, diary keeping, panel maintenance and compensating schools for the respondent's time. If you wish to use a prize draw incentive then you must also set out in your proposal how you will comply with all relevant legislation and codes of practice (e.g.,' the British Code of Advertising and Sales Promotion), state that you shall be solely liable for any breach of these and that you shall indemnify the Authority against any claims that may be made under them.

# 7. Key Milestones and Deliverables

7.1. Detail of research outputs has been written in Section 6.4 above. The following Contract milestones/deliverables shall apply:

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Milestone	Description	Delivery Date or Timeframe
Project inception document (PID)	PID outlining agreed and finalised project scope, roles and responsibilities of the project team, sampling strategy, project timescales/Gantt chart, risk register, and data collection strategy.	3 <sup>rd</sup> May 2024
Logic models and theory of changes	First draft of logic models developed for all pilots. First draft of theory of changes developed for Pilots 2 and 3. Theory of change workshop(s) delivered with internal and external stakeholders.	1st July 2024
Presentation of key findings	Presentation of key findings to internal stakeholders.	31 <sup>st</sup> January 2025
Interim report	Deliver an interim report with evaluation findings, written to a high quality and publishable standard. The Authority and the advisory group to provide comments.	14 <sup>th</sup> February 2025
BREAK CLAUSE		31 <sup>st</sup> March 2025
Presentation of key findings	Presentation of key findings to internal stakeholders.	30 <sup>th</sup> January 2026
Final evaluation reports	3 final signed off reports (1 for each pilot) written to a high quality and publishable standard. The Authority and the advisory group to provide comments.	20 <sup>th</sup> February 2026
Best practice guides	3 best practice guides will be produced, one for each pilot. The Authority and the advisory group to provide comments.	27 <sup>th</sup> February 2026
Evaluation plan	An agreed evaluation plan to be sent to the Authority highlighting how data can be monitored going forward. This will be at the end of the contract (March 2025 or 2026 dependent on activation of the break clause).	13 <sup>th</sup> March 2025/2026

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	An anonymised dataset to be sent to the	
	Department for Education. This will be	
Anonymised dataset	delivered at the end of the contract	13 <sup>th</sup> March 2025/2026
	(March 2025 or 2026 dependent on	
	activation of the break clause).	

# 8. Continuous Improvement

8.1. The successful supplier shall maintain open channels of communication with the Authority to resolve issues, share lessons learned and present new ways of working during project review meetings. Any proposed new ways of delivering the Services shall be brought to the Authority's attention and formally agreed prior to any changes being implemented.

# 9. Social Value and Sustainability

- 9.1. The social value criteria for this project is: Improve health and wellbeing. Bidders will need to demonstrate how they will:
  - Demonstrate action to support the health and wellbeing, including physical and mental health, in the contract workforce.
  - influence staff, suppliers, customers and communities through the delivery of the contract to support health and wellbeing, including physical and mental health.
- 9.3 Bidders must provide a 'method statement' stating how they will achieve the Model Award Criteria, and how their commitment meets the Model Award Criteria.
- 9.4 Bidders must provide a timed project plan and process, including how they will implement their commitment and by when. This includes plans for monitoring, measuring and reporting commitments and the impact of proposals.
- 9.5 Bidders' responses should include, but is not limited to:
  - Timed action plan
  - Use of metrics
  - Tools/processes used to gather data
  - Reporting
  - Feedback and improvement
  - Transparency

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# 10. Quality

- 10.1. Bidders must provide evidence of ability to deliver high quality research, fieldwork, and outputs. This must include details of quality assurance procedures for data, analysis, and reporting.
- **10.2.** Bidders must provide evidence of ability to write good quality reports with clear findings and workable recommendations that are tailored to the audience.

# 11. Price

11.1. Prices are to be submitted within Attachment 4 Price Schedule as per the instructions set out in Attachment 2 Instructions to Bidders excluding VAT and including all other expenses relating to Contract delivery.

# 12. Staff and Customer Service

- 12.1. The Supplier shall provide a sufficient level of resource throughout the duration of the Contract to consistently deliver a quality service.
- **12.2.** The Supplier's staff assigned to the Contract shall have the relevant qualifications and experience to deliver the Contract to the required standard.
- 12.3. The Supplier shall ensure that staff understand the Authority's vision and objectives and will provide excellent customer service to the Authority throughout the duration of the Contract.
- 12.4. The Supplier shall communicate all changes to the Key Personnel as defined in the Call-Off Contract throughout the Term.

# **13.** Security and Confidentiality Requirements

Departmental Security Standards for Business Services and ICT Contracts

13.1. The Authority's security standards clauses are included as the Buyer's Security Policy within Attachment 6a Order Contract Terms & Attachment 6b Order Form.

**Supplier Security Assurance Questionnaire** 

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13.2. Suppliers and any sub-contractors are required to complete Attachment 5 Supplier Security Questionnaire as part of their bid, for the Authority to obtain a level of assurance with regards to our assets throughout the life of the contract.

### 13.3. Data Collection

- 13.4. Suppliers will be expected to clear any data collection tools with the Authority before engaging in field work. Suppliers should include Data Privacy Notices for research participants via respondent documentation and/or interviewer briefing notes, and clearly state what the data is being collected for and on behalf of the Authority and that no reference is made, implied or otherwise, to the data being used solely by or available only to the supplier. Suppliers should establish with the Authority the legal basis for data processing under the General Data Protection Regulation and the Data Protection Act 2018.
- 13.5. The respondent documentation and/or interviewer shall ensure that the respondent clearly understands (before they give their consent to be interviewed) the purpose of the interview, that the information they provide will only be used for research purposes and, in the case of interviews (telephone or face-to-face), that they have the right to withdraw from the interview at any time. Where consent is used as the legal basis for data processing, consent procedures should ensure compliance with the General Data Protection Regulation and the Data Protection Act 2018.

### 13.6. Burden

- 13.7. The Authority seeks to minimise the burdens on schools and Local Authorities (LAs) taking part in surveys. It is therefore important that bids should set out how the proposed methodology will minimise the burden on schools and/or LAs and a justification for the proposed sample size.
- **13.8.** When assessing the relative merits of data collection methods, the following issues should be considered:
  - only data essential to the project shall be collected;
  - data should be collected electronically where appropriate and where schools and/or LAs prefer this;
  - questionnaires should be pre-populated wherever possible and appropriate;
  - schools must be given at least four working weeks to respond to the exercise from the date they receive the request; and
  - LAs should receive at least two weeks, unless they need to approach schools in which case, they too should receive 4 weeks to respond.

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- 13.9. The supplier shall clear any data collection tools with the Authority before engaging in field work.
- **13.10.** Researchers shall check with the Authority whether any of the information that they are requesting from schools can be provided centrally from information already held.

## 13.11. Consent Arrangements

13.12. The Authority and the supplier shall agree in advance of any survey activity taking place the consent arrangements that shall apply for each of the participant groups. All participants should be informed of the purpose of the research, that the supplier is acting on behalf of the Authority and that they have the option to refuse to participate (opt out). Where opt-in consent is used, the approach should be compliant with the General Data Protection Regulation and Data Protection Act 2018. Contact details should be provided including a contact person at the Authority. Children who are 16 or over will usually be able to give their own consent but even where this is so, the supplier, in consultation with the Authority, should consider whether it is also appropriate for parents, guardians or other appropriate gatekeepers (e.g., schools, Local Authorities) to be informed when a child has been invited to participate in research.

# **16. PAYMENT AND INVOICING**

16.1 Details of payment and invoicing requirements are included within Attachment 6a Order Contract Terms and Attachment 6b Order Form.

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### Annex A – Delivery Partner and Evaluation Partner Roles

It is essential that the programme's Delivery Partner (for Pilots 1 and 2) and Evaluation Partner work effectively together to deliver impactful learning and evaluation strategies, which will inform future policy development.

While the two partners are expected to work closely together, the following table differentiates between the functions of the Delivery Partner and the Evaluation Partner. Both partners will work with DfE to collectively agree definitive ways of working and governance across both implementation and evaluation.

Theme	Delivery Partner functions	Both Partners		
Monitoring and data collection	<ul> <li>Collect and analyse monitoring data for delivery reporting purposes.</li> <li>Act as a facilitator to support local areas to submit good quality data for evaluation purposes.</li> <li>Comply with data protection requirements when working with the Evaluation Partner.</li> </ul>	<ul> <li>Collect and analyse monitoring data from local areas for evaluation purposes.</li> </ul>	<ul> <li>Develop a data strategy for delivery and evaluation to prevent duplication of data collection and burden.</li> <li>Clearly articulate the purposes of data collection to local areas.</li> </ul>	
Understanding implementation and delivery	<ul> <li>Communicate any learning on implementation and delivery of the programme to the Evaluation Partner, including the identification of any barriers and facilitators.</li> <li>Participate in evaluation and research activities where required.</li> </ul>	<ul> <li>Analyse how the programme has been implemented and delivered, including barriers and facilitators.</li> </ul>		
Impact evaluation	Where required, communicate any <i>perceptions</i> of early	<ul> <li>Collect and analyse data on <i>perceived</i> and <i>actual</i> impacts of</li> </ul>		

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Cost benefit analysis	<ul> <li>impacts of the programme in its intended outcomes to the evaluator.</li> <li>Where required, support the Evaluation Partner in understanding costs and benefits of the programme.</li> </ul>	<ul> <li>the programme on its intended outcomes.</li> <li>Collect and analyse data on the costs and benefits of the programme.</li> </ul>	
Interpretation of the evidence	Collate <i>intelligence</i> from local areas.	Collate and analyse <i>robust evidence</i> from     local areas.	
Dissemination of evidence	<ul> <li>Work with the Evaluation Partner to identify and share examples of practice/lessons learned across local areas and government.</li> </ul>	<ul> <li>Produce and disseminate reports and other outputs to share analytical findings, including examples of practice and lessons learned across local areas.</li> </ul>	
Communication with local areas	<ul> <li>Ensure clear communication around the purpose of the Delivery Partner and encouraging cooperation from local areas.</li> </ul>	<ul> <li>Ensure clear communication around the purpose of the evaluation and encouraging participation.</li> </ul>	<ul> <li>Agree arrangements for engaging with local areas for both delivery and evaluation purposes that do not place unnecessary burden.</li> </ul>

#### Annex B – Pilot 2 pre-CMH meeting logic model.



### Annex C – Pilot 3 MDT logic model.

#### Assumptions

- Delays caused the system result in worse outcomes for children and families

- The pre CMH meeting does not introduce new financial burdens on  $\ensuremath{\mathsf{LAs}}$ 

**Risks/unintended consequences** 

- Lack of LA take up / participation

### DPS Schedule 6 (Order Form Template and Order Schedules) Crown Copyright 2021

Aims	Inputs	Activities	Outputs	Short term outcomes (6 months to 1 year after pilot starts)
Reduce unnecessary family court delays Increase efficiency and confidence of medical expert assessments in courts. Make senior medical experts more accessible for expert review. Enable cost avoidance and savings to LAs, courts and the NHS.	£3.378 million (until March 2025) grant funding to NHS-Trusts Guidance provided about how to set up MDTs	<text><text><text><text></text></text></text></text>	Initial report with outcome of preliminary case review If the strategy meeting concludes that wider safeguarding assessments need to be implemented, a full report is completed. This will contain the clinical narrative, expert reports and information about further assessments. This report	Number of expert assessments requested reduced Clinicians will have a better understanding of cases throughout the assessment process More senior expertise to provide evidence and inform faster decision making by the court More transparency in the process of producing reports More multi-agency collaboration between the courts, hospitals and local authorities Better quality clinical reports Consistency of medical reporting for those participating in the pilot.

#### Assumptions

- Delays caused by the system result in worse outcomes for children and families - Medical expert capacity in NHS-Trusts

#### Risks/unintended consequences

Service will be overwhelmed with referrals creating a bottleneck
 There will be a focus on severe cases and so the impact will be limited
 Time period is not long enough to create the MDT