

<b>Title of Report:</b>	Review of Children's Public Health Commissioning Opportunities
<b>Report to be considered by:</b>	The Health and Wellbeing Board
<b>Date of Meeting:</b>	27 March 2014

**Purpose of Report:**

The West Berkshire Health and Wellbeing Strategy as part of its key principles identifies the need to focus on our children. This paper summaries a practical programme that will allow us to explore and identify these opportunities.

To inform the Board of the outline of the national changes that will be occurring in children's' commissioning for public health services and the proposal of a local approach to support this change.

To outline a local approach to support the change. In consultation with a range of stakeholders to scope out current services, identify levels of need and establish a way forward for commissioning and service delivery.

**Recommended Action:**

To note this approach to children's planning to drive the provision of public health services to children.

<b>Health and Wellbeing Board Chairman details</b>	
<b>Name &amp; Telephone No.:</b>	Gordon Lundie (01488) 73350
<b>E-mail Address:</b>	glundie@westberks.gov.uk

<b>Contact Officer Details</b>	
<b>Name:</b>	Dr Lise Llewellyn
<b>Job Title:</b>	Strategic Director of Public Health
<b>Tel. No.:</b>	01344 355 2749
<b>E-mail Address:</b>	lise.llewellyn@bracknell-forest.gov.uk

# Executive Report

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Children are identified as a key priority group in the Health and Wellbeing Strategy. The review of Children's Public Health Commissioning Opportunities is relevant in terms of encouraging and supporting the integration of services based on the needs of our children. One of the aims is to give every child and young person the best possible start in life; in particular to promote the health of children aged 0 to 19 years.

Two of the principles that underpin the Health and Well-Being strategy are:

- Working collaboratively with neighbouring authorities and partners to ensure effective use of resource and sharing best practice.
- To ensure that we effectively safeguard the most vulnerable children in our district. Enhancing service provision, focusing child protection resources on those children most at risk and providing high quality, evidence based preventative support.

This paper therefore outlines the work to address the priorities identified in the Health and Wellbeing Strategy.

## **1 Introduction - National Context**

- 1.1 The Health and Social Care Act changed the pattern of commissioners for a range of Health Services including those that serve children.
- 1.2 The Local Authority already has established and extensive responsibilities with regards children's care: education, safeguarding and social care services as well as early intervention and prevention services - often delivered through children's centres.
- 1.3 From 2013/2014, Clinical Commissioning Groups (CCGs) have been charged with commissioning the majority of health services (supported by the national NHS England) and are responsible for allocating resources and providing commissioning guidance. This includes children's accident & emergency services, paediatrics in district general hospitals and children & adolescent mental health services (excluding level 4 provision).
- 1.4 The NHS England Local Area Team is responsible for Level 4 Children & Adolescent Mental Health Services (CAMHs). In addition the area team commissions children's immunisation services, newborn screening and routine primary care and health visiting until 1st Oct 2015.
- 1.5 As part of the movement of public health responsibility to the Local Authority, public health services for children and young people aged 5-19 have been transferred though in a staged approach. West Berkshire Council currently has an overview role on immunisation and directly commissions school nursing.
- 1.6 The next stage is the transfer of Health Visiting and Family Nurse Partnership Programme in 2015 following the expansion of the Health Visitor Programme. This expansion is part of a national government commitment to expand the number of Health Visitors by 4200 and ensure sustainability of service. The investment in Health Visiting Services provides a further opportunity to strengthen the support to families through the delivery of the Health Child Programme.

## **2 Public Health Outcomes**

- 2.1 The new role of Local Government is to improve the health of their local population but also to reduce inequalities in health.
- 2.2 Nationally whilst life expectancy is increasing the reduction in health inequalities is not being seen. In the original Marmot report in 2008 the review of the evidence of what works in reducing inequalities and identified that there were six core actions that would lead to reduction in inequalities. However central to a long term solution was a focus on the child - giving every child the best start in life and maximizing their opportunities. School Nursing and Health Visiting are key public health services.
- 2.3 Public Health Outcomes that will be influenced by the School Nursing and Health Visiting programmes include:
- Under 18 conceptions
  - Infant mortality
  - Low birth weight of term babies
  - Smoking status at time of delivery
  - Breastfeeding (initiation and at 6-8 weeks)
  - Vaccination coverage
  - Healthy weight 4-5 years
  - Tooth decay in children age 5
- 2.4 The opportunity of the change in the commissioning of Children's' Universal Public Health services allows each Unitary Authority to examine how best to align the current pattern of care to achieve the best outcomes in this time of financial constraints maximising the impact of the Health Visitor and School Nursing roles and transfer.

## **3 Proposal for Children's Services Review**

- 3.1 Nationally there is work underway to ensure the smooth and sustainable transfer of Health Visiting services to Local Government and ensure the leadership role of Health Visitors is continued within the new commissioning arrangements.
- 3.2 However we also wish to review the 0-19 year old offer across our services to ensure that they are focused on the existing and emerging needs of our children, since School Nursing is now already commissioned through Public Health in West Berkshire Council.
- 3.3 The approach therefore begin with a through review of existing services for our children, reflecting these against needs and best practice to develop a 5 year plan to support our health and well being strategic goals. The work will be managed to ensure that the needs of the various age groups are addressed and allow us to re- specify and commission the School Nursing and Health Visiting roles.

- 3.4 The work will describe in detail the current pattern of services for our children within each Unitary Authority area, to review whether these services best serve the needs of our local children now and going forward and then to re design the services, to allow the services to be re-commissioned to achieve the best outcomes and alignment. A more detailed description of these stages of work is in Appendix A.
- 3.5 This work will involve all key stakeholders including Local Government staff in Children's' Social Care, Education representatives from schools, voluntary sector representatives / users, Healthcare provider services, Public Health, Local Political Leaders, local area NHS England team and Clinical Commissioning Groups.
- 3.6 Nationally, part of the Health Visitor Transition work has made available a small amount transition funding - approximately £20k for Berkshire to support this process. The fund was announced on 6th November 2013 with applications submitted by November 13.

The approach we submitted was built on work which is summarised above and previously discussed with the Director of Children's Services and leaders. In summary the focus of this bid for funding was to review the approach to 0-5 year's service delivery and develop a new strategy for this area for West Berkshire Council. This bid was successful and an allocation of £6k has been identified to support the stage one detailed in Appendix A.

This approach will be repeated for older school age children to maximize the integration and impact of services.

# Appendices

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## Appendix A

### Health Visitor Transformation Proposal

#### **Stage one** - *What is currently available to our children and families?*

Recent powerful experience has shown that there is not a full understanding of the range of services provided by others within the local economy. Therefore the first stage of this work will be a workshop whereby each area presents the full range of services they provide; this allows each stakeholder to understand the full range of services in their area. This will allow immediately a greater understanding and potentially an immediate impact on care.

In addition with the funding available we will undertake parent and user experience surveys, asking for ways in which services could be improved. Professionals working in the children's services will also be invited to give feedback on how they think services could be improved. This will feed into services redesign.

Opportunity to share and understand review the services / patterns in the neighbouring authorities so we can share experience / best practice / outside of the UA boundary.

#### **Stage 2**

Review of needs assessment for children 0-5 in each LA, which will allow working in local groups to identify goals and outcomes to be delivered in the new environment. This will focus on universal and hard to reach groups to ensure both an improvement in health and a reduction in inequalities.

The services will then be challenged to review how going forward, using the new evidence of effective service provision, and addressing the issues raised by users and providers their services can deliver these outcomes effectively maximizing the increase in health visitor capacity.

#### **Stage 3**

Service re design and implementation, which may involve:

- I. additional support for existing professionals with in services to embed new ways of working - support may be sought from the Thames Valley Local Education and Training Boards (LETBs)
- II. workforce development of new roles and skills
- III. new contract formats supporting an outcomes based approach/delivering pooled/integrated budgets

#### *Provider support*

The bid also includes immediate support to the provider to implement some key evidence based tools that maximise the outcomes for our children.

#### *Ages and Stages tool kit*

The provider has been with others developing a HV Service improvement plan. Part of this is the introduction of the Ages and Stages Child Health Review Tools for the 9 month and 2 year universal reviews from January 2014.

The expectation is that this tool will allow earlier detection of children requiring support. The strategy development phase of this work will establish how these connections can be improved linking the child and family to the full range of services.

### ***Solihull Approach***

The Berkshire Health Foundation Trust (BHFT) Health Visiting Service will introduce the 'Solihull Approach to understanding children's behaviour'. This is an evidence based integrated theoretical model, that can be used in practice, to provide a way of thinking about relationships. It supports professionals in their work with families and it has been proven to improve children's and parents' emotional relationship and wellbeing.

The approach is known to support the parent-child relationship. Service within children's centres and more widely also have this underpinning principle.

The review of services will allow us to explore this tool and its application within the boarder framework of children's services in each LA to ensure consistency of approach for families irrespective of provider.

The national resources available will be used to deliver the workshops, venues, facilitation and write up of events (cartoonists will be used to capture the details and develop new models - an effective and engaging method to ensure clarity of outputs). In addition the resources will support professional and user experience capture through a variety of routes.

### ***Governance***

#### *Engagement*

The work will be coordinated across Berkshire with Directors of children's services as key leaders and designers of this work - the events will be co chaired Public and Health and Children's services.

The major provider for health visitor provision has been a part of the early discussions on this work as part of regular Public health and commissioner service development meetings

#### *Programme oversight*

In the West of Berkshire there is a strategic Children's Commissioning group this group will act as the overarching group for this work.

A Health Visitor Transition Board (with children's services and public health involvement) working with providers will be established across Berkshire and link into both the strategic children's commissioning group and with regular reports to the Health and Well-being board.