

## Healthy Child Programme (HCP)

To: Children and Young Peoples Committee

Meeting Date: 17<sup>th</sup> January 2023

From: Jyoti Atri, Director of Public Health.

Electoral division(s): All

Key decision: Yes

Forward Plan ref: KD2023/018

Outcome: The Committee is being asked to consider and approve the decision to execute the 12-month extension clause within the Section 75 Agreement between Cambridgeshire County Council (CCC) with Cambridgeshire Community Services and Cambridgeshire & Peterborough Foundation NHS Trust for the provision of the Healthy Child Programme 0-19.

Recommendation: The Committee is recommended to:

Authorise the extension of the current Section 75 agreement with Cambridgeshire Community Services and Cambridgeshire and Peterborough Foundation Trust relating to:

- a) The provision of Health Visiting and Family Nurse Partnership Services, whereby Cambridgeshire Community Services and Cambridgeshire and Peterborough Foundation Trust will exercise the health-related function to the Local Authorities for the duration of 12 months between 1 April 2024 and 31 March 2025; and
- b) The provision of School Nursing Services, whereby Cambridgeshire Community Services and Cambridgeshire and Peterborough Foundation Trust will exercise the health-related function to the Local Authorities for the duration of 12 months.

Voting arrangements: Co-opted members of the committee are eligible to vote on this item.

### Officer contact:

Name: Dr Raj Lakshman

Post: Consultant in Public Health

Email: [raj.lakshman@cambridgeshire.gov.uk](mailto:raj.lakshman@cambridgeshire.gov.uk)

Tel: 07905 989337

Member contacts:

Names: Councillor Bryony Goodliffe / Councillor Maria King

Post: Chair/Vice-Chair

Email: [Bryony.Goodliffe@cambridgeshire.gov.uk](mailto:Bryony.Goodliffe@cambridgeshire.gov.uk) / [Maria.King@cambridgeshire.gov.uk](mailto:Maria.King@cambridgeshire.gov.uk)

Tel: 01223 706398 (office)

## 1. Background

- 1.1 The Healthy Child Programme (HCP) is universal in reach. It sets out a range of public health inputs in local places to build healthy communities for families and children and to reduce inequalities. It includes a schedule of interventions which range from services for all, through to extra help, to intensive support.
- 1.2 The Healthy Child Programme is personalised in response. All services and interventions need to be personalised to respond to families' needs across time. For most families most of this will be met by the universal offer.
- 1.3 The HCP 0-5, led by Health Visitors and their teams, offers every child a schedule of health and development reviews, screening tests, immunisations promotion, health promotion guidance and support for parents tailored to their needs, with additional support when needed and at key times. Children of school age 5-19 are supported by the School Nurses and their teams who are accessible to all school-aged children who are resident in Cambridgeshire and Peterborough, and in maintained schools and colleges including free schools, academies and electively home educated. Where children and young people are not in an educational setting the 5-19 HCP team will work with the local authority and make every effort to ensure that those children, young people and families know how and where to access the service.

## 2. Main Issues

### **Current arrangements**

- 2.1 Provision of the Healthy Child Programme (HCP) is a statutory responsibility of the Director of Public Health, resourced through the Public Health Grant. A single section 75 Agreement has been in effect as of 1<sup>st</sup> October 2019 between Cambridgeshire County Council (CCC), Cambridgeshire Community Services (CCS) and Cambridgeshire and Peterborough Foundation Trust (CPFT) for delivery of an integrated 0-19 service covering Cambridgeshire and Peterborough.
- 2.2 A separate Delegation and Partnership agreement is in place delegating commissioning functions of the HCP by Peterborough City Council to Cambridgeshire County Council to enable this collaboration to work effectively.
- 2.3 The existing arrangements are in place until 31<sup>st</sup> March 2024. The section 75 agreement also includes the following provision at clause 3.0:  
  
*“The Partners may extend this Agreement, on varied terms, in relation to some or all of the services for 12 months beyond the initial terms subject to prior written approval by each of the partners.”*
- 2.4 This enables the Local Authorities to commit to an extension of 1 year within the current contractual arrangements, which would take the agreement up until 31 March 2025.

### **Direction of travel**

- 2.5 Officers are recommending that the provision within the existing Section 75 agreement to

extend the agreement for 12 months to March 2025 is exercised for the following reasons:

- 2.6 The pandemic meant a pause to the usual annual development cycle for the programme whilst the service concentrated on maintaining and redesigning service delivery to fit the changing circumstances. The 2022/23 Annual Development Plan (ADP) is the first full year of service development activity since the start of the contract and the in-contract learning that can be achieved from this work is vital for understanding what future service improvements could be possible. An additional year of ADP activity with the current providers would enhance the service specification review.
- 2.7 There are significant local system changes that are currently being embedded and may have an impact on the scope of any recommissioned HCP and procurement decisions. These include:
- Development of the local Integrated Care System (ICS) and the Child and Maternity Partnership to include new conversations about whole system responses and joint commissioning approaches to shared areas of responsibility including safeguarding and SEND support for children and young people
  - A new and evolving set of services supporting Child and Young People's mental health, including the YOUUnited service and the Mental health support teams in schools. The relationship between these services and the Healthy Child Programme, and the role of the workforces across services in supporting emotional health and wellbeing (EHWB) needs to be developed and agreed.
  - A commitment to move to a more outcomes focused approach to this Section 75 agreement and need to ensure that the correct outcome measures and reporting tools are available for that ambition.
  - Supporting the delivery of the Health and Wellbeing Strategy which has achieving better outcomes for children and young people as one of its three ambitions.
  - Supporting the delivery of corporate priorities relating to Health & Care and Children & Young people.
  - Reviews underway to explore the interfaces between the HCP and other Public Health commissioned services for children & young people e.g. the National Child Measurement Programme (NCMP), Child weight management services, substance misuse services, and the Healthy Schools service etc.
- 2.8 There are also significant changes to the national guidance and ambitions for whole family support including the modernised Healthy Child programme framework and the Family Hubs programmes (delivery to be launched in Peterborough from April 2023 but will be aligned across Cambridgeshire). It will be important to ensure that any re-commissioning activity embeds the guidance and learning from these programmes.

### **The Modernised Healthy Child Programme**

- 2.9 In March 2021, what was then Public Health England launched [the first guidance documents for the new vision for a modernised Healthy Child Programme](#).

# Health visitors and school nurses leading the Healthy Child Programme: Universal in Reach – Personalised in Response Delivery model



- Health & wellbeing reviews
- Identification of need
- High Impact Areas

## Health visitors and school nurses: Searching and identifying health & wellbeing needs



Health visitors and school nurses utilise their clinical judgment and public health expertise to:

- identify health needs early, determining potential risk including hidden harm
- provide evidence-based interventions or early support to prevent issues escalating
- maximize the benefits for parents, children and young people
- provide a return on investment including effectiveness and cost efficiencies

2.10 Modernising the Healthy Child Programme is intended to ‘enable effective, focused services where additional needs are identified along with use of the latest evidence on effective practice and helping to bring councils, the NHS and partners together to achieve priority outcomes for children and families.’ Guidance and an updated digital toolkit to support the new framework are still in development nationally with the expectation that these will be available across local authorities in the near future. This toolkit will bring together guidance on core universal elements for all families plus additional information, evidence, links to current outcome measures.

2.11 The new guidance has updated the high impact areas for the modernised HCP as shown below:

Early years high impact areas are:	School-aged high impact areas are:
<ul style="list-style-type: none"> <li>• supporting transition to parenthood and the early weeks</li> </ul>	<ul style="list-style-type: none"> <li>• supporting resilience and wellbeing</li> <li>• improving health behaviours and reducing risk taking</li> </ul>

<ul style="list-style-type: none"> <li>• supporting maternal and infant mental health</li> <li>• supporting breastfeeding (initiation and duration)</li> <li>• supporting healthy weight and healthy nutrition</li> <li>• improving health literacy; reducing accidents and minor illnesses</li> <li>• supporting health, wellbeing and development. Ready to learn, narrowing the 'word gap'</li> </ul>	<ul style="list-style-type: none"> <li>• supporting healthy lifestyles</li> <li>• supporting vulnerable young people and improving health inequalities</li> <li>• supporting complex and additional health and wellbeing needs</li> <li>• supporting self-care and improving health literacy</li> </ul>
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[Health visiting and school nursing service delivery model - GOV.UK \(www.gov.uk\)](http://www.gov.uk)

### **Family Hubs programme**

- 2.12 Earlier this year 75 Local Authorities were identified for Family Hubs funding, which included five Local Authorities across the Eastern region of which Peterborough is one but doesn't include Cambridgeshire. However, following earlier funding to complete feasibility studies in both local authorities, a decision has been made at Cambridgeshire's Children and Young People's committee to start to work towards a Family Hubs offer there as well as funding allows.
- 2.13 Key elements of the model include:
- A Family Hub supports families from conception, through the child's early years, to later childhood, up to the age of 19 (or 25 for young people with special educational needs and disabilities).
  - Family Hubs use a whole family approach to provide a single access point to family support services that is integrated across health (physical and mental health) and social care as well as voluntary and community organisations and education settings.
  - Family Hubs provide family support services early, when families need them. These include universal and targeted services.
  - Family Hubs can support all families, particularly in the first 1,001 days, but they are designed to be particularly accessible to families from lower socio-economic groups, families who have special education needs or a disability, or those from minority groups who are experiencing exclusion.
  - Family Hubs are not necessarily about creating new buildings but more of a focus on bringing services together and changing the way family help and support is delivered locally.
- 2.14 Funding for the Family Hubs programme runs until March 2025, and sustainability planning for new ways of integrated working that emerge from the evaluation of this programme will need to be built into the updated service specification for the HCP.

## Value

2.15 The current contract value is set out below:

	<b>CCC</b>	<b>PCC</b>
0-5 HCP (Health Visiting provision including Family Nurse Partnership)	£7,270,648 pa	£3,253,887 pa
5-19 HCP (School Nursing provision including Vision Screening)	£1,705,460 pa	£763,257 pa
Total 0-19 HCP	£8,976,108 pa	£4,017,144 pa

Grand Total: **£12,993,252 pa**

2.16 From 2023/24 there is an Annual NHS pay award that will be added to the contract (the provider asked to waive the receipt of this for 2022/23 due to concerns about managing a potential underspend as staffing capacity challenges continued. The revised table from 2023/24 is below:

Annual amount from 1 April 2023 (After additional NHS pay award)

	<b>CCC</b>	<b>PCC</b>
0-5 HCP (Health Visiting provision including Family Nurse Partnership)	£7,392,148 pa	£3,314,637 pa
5-19 HCP (School Nursing provision including Vision Screening)	£1,733,960 pa	£777,507 pa
Total 0-19 HCP	£9,126,108 pa	£4,092,144 pa

Grand Total: **£13,218,252 pa**

2.17 The extension clause within the section 75 Agreement, enables the Partners to vary the terms and services within the contract, which includes the financial budget. If, during the activities outlined in sections 3.2 and 3.3 financial efficiencies are identified or relevant opportunities to allocate resource to other areas within the system, then this can be reflected in any future financial envelope. Committee members will be informed of any financial changes that may arise through this work.

## Timescale

2.18 Subject to Committee approval, the Children's Public Health team plan to use the next 18 months on the below tasks:

- Complete the mapping of pathways, current specification detail and practice to scope the work needed for the service specification review (Oct 2022)
- Develop a project plan with key milestones to review and update the service specification. (Plan to be completed by December 2022. Workstreams will continue throughout 2023)

2.19 This will include:

- Analysis of impact and effectiveness of existing provision
- Evidence review from national (including modernised HCP toolkit) and local sources (including evaluations from Family Hubs)
- Review of the impact of current provider development work from the ADP's for 2022/23 and 2023/24 on performance and outcomes
- Research into other local and statistically similar local authority approaches and specifications. The Cambridgeshire and Peterborough Children's Public Health Team are leading on an East of England think tank with other HCP commissioners in the region to share practice and learning across Authorities that are also commencing or in the process of recommissioning their service provision.
- Workforce capacity reviews using both internal trust tools and engagement with wider system partners to investigate skill mix and partnership staffing options.
- Co-production work with service users and relevant stakeholders.
- Updating the service specification in line with outcomes of the work described above and the learning from the first full year of Family Hubs delivery. First draft of renewed service specification to be available for consultation March 2024.
- Governance, procurement options, and financial envelopes to be agreed by early summer 2024.
- Exploring the Equality Diversity & Inclusion Impact Assessment for the new procurement
- Exploring the Climate Impact Assessment of the new procurement

### 3. Alignment with corporate priorities

#### 3.1 Environment and Sustainability

There are no significant implications for this priority.

#### 3.2 Health and Care

The service is provided jointly by our two local community NHS Trusts and links with the specialist services provided in the community.

#### 3.3 Places and Communities

There are no significant implications for this priority.



### 3.4 Children and Young People

The Healthy Child Programme supports children and young people from prebirth to age 19.

### 3.5 Transport

There are no significant implications for this priority.

## 4. Significant Implications

### 4.1 Resource Implications

There are no significant implications within this category.

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

There are no significant implications within this category.

### 4.3 Statutory, Legal and Risk Implications

There are no significant implications within this category.

### 4.4 Equality and Diversity Implications

There are no significant implications within this category.

### 4.5 Engagement and Communications Implications

There are no significant implications within this category.

### 4.6 Localism and Local Member Involvement

There are no significant implications within this category.

### 4.7 Public Health Implications

This is a mandated Public health service. Improving outcomes for children is a key component of the Health and Wellbeing Strategy.

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

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

Neutral Status:

Explanation: The decision being recommended is to exist with current provisions, therefore no change to current services.

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

Neutral Status:

Explanation: The decision being recommended is to exist with current provisions, therefore no change to current services.

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

Neutral Status:

Explanation: The decision being recommended is to exist with current provisions, therefore no change to current services.

4.8.4 Implication 4: Waste Management and Tackling Plastic Pollution.

Neutral Status:

Explanation: The decision being recommended is to exist with current provisions, therefore no change to current services.

4.8.5 Implication 5: Water use, availability and management:

Neutral Status:

Explanation: The decision being recommended is to exist with current provisions, therefore no change to current services.

4.8.6 Implication 6: Air Pollution.

Neutral Status:

Explanation: The decision being recommended is to exist with current provisions, therefore no change to current services.

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

Neutral Status:

Explanation: The decision being recommended is to exist with current provisions, therefore no change to current services.

Have the resource implications been cleared by Finance? Yes

Name of Financial Officer: Justine Hartley

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

Name of Officer: Clare Ellis

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

Name of Legal Officer: Linda Walker

Have the equality and diversity implications been cleared by your EqIA Super User?

Yes

Name of Officer: Jyoti Atri

Have any engagement and communication implications been cleared by Communications?

Yes

Name of Officer: Matthew Hall

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

Name of Officer: Jyoti Atri

Have any Public Health implications been cleared by Public Health?

Yes

Name of Officer: Jyoti Atri

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

Yes

Name of Officer: Emily Bolton

## 5. Source documents

5.1 [Agenda Item 6. Healthy Child Programme Update report 2018 – presented to Health Committee 06/12/2018](#)

5.2 [Agenda Item 6. Recommissioning of the Healthy Child Programme report 2019 – presented to Health Committee 07/02/2019](#)