

0-19 JOINT COMMISSIONING OF CHILDREN'S HEALTH AND WELLBEING SERVICES

To: Health Committee

Meeting Date: 14 June 2017

From: Director of Public Health
Interim Executive Director of Children, Families and Adult Services

Electoral division(s): ALL

Forward Plan ref:

Purpose: To respond to the Health Committee's request for a detailed update on the 0-19 Healthy Child Programme (HCP) and the work programme for this area, and the impact this is having through the Joint Commissioning Unit (JCU)

Recommendation: The Committee is asked to:

- Support the work to date
- Note the interdependencies with other transformation work streams

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1. BACKGROUND AND PURPOSE

1.1 The Commissioning of children’s and young people’s health and care services including the 0-19 service in Cambridgeshire and Peterborough is strategically managed by the Children’s Health Joint Commissioning Unit (CHJCU). Membership of the CHJCU consists of senior commissioners from Cambridgeshire County Council (CCC) Peterborough City Council (PCC) and Cambridgeshire and Peterborough clinical commissioning group (CPCCG) The CHJCU was set up in September 2015 with the following vision.

“That all children and families in Cambridgeshire and Peterborough have the right to be kept safe and healthy, have excellent health services, enjoy school, play and family, help to help themselves and are part of strong and inclusive networks of support.”

1.2 To fulfil this vision, the aim and outcomes for this joint approach to commissioning was to:

- Truly integrate health and care services
- Better outcomes for children and their families in Cambridgeshire and Peterborough
- High quality experiences when children and families access the service
- Investment in prevention and moving care to lower cost settings
- Where possible integrate and rationalise contracts for children
- Having the right service, in the right place, at the right time

1.3 It is driven by the understanding that better integration between different types of health and care services is universally accepted as the right direction of travel for meeting the changing and growing needs of the population. Recognising that fragmented and disjointed services and poor alignment of care and intervention can have a negative impact on children and families and lead to poor outcomes.

1.4 The role of the Children’s Health Joint Commissioning Unit (CHJCU) involves bringing together a range of existing contracts across the three commissioning organisations which equates to 41 services and more than 20 contracts (see below) and total contract value exceeding £50m. It is acknowledged that delivering a project of this size and complexity needs careful planning and time required to ensure that the appropriate specifications drawn up as well as robust procurements routes confirmed.

CCG	CCC	PCC
Child and Adolescent Mental Health Services	Children's Occupational Therapy + Section 75	Community Breastfeeding Peer Support
Chronic Fatigue Syndrome & myalgic encephalomyelitis Service for children and Young People	Family Nurse Partnership (Cambs)	Children's Centre - Central Locality
Special School Nursing	Health Visiting (Cambs)	Children's Centres - South and NWR Locality
Children Looked After (CLA)	School Nursing + S75 (Cambs)	Connecting Mums
Children's Continuing Care	Bereavement Support for CYP	Family Voice / Pinpoint – parenting support

CCG	CCC	PCC
Children's physiotherapy and MSK	Youth Counselling Services	Family Nurse Partnership (P'boro)
Children's Dietetics	PHSE mental health PHSE Anti- bullying Mental health training for social care, school staff	Health Visiting (P'boro)
Children's Occupational Therapy Service	Vision Screening	Looked After Children Psychology Service
Community Children's Nursing Service	Children's Centres	Medical Advisor Service to Adoption and Fostering Services
Speech and Language Therapy (Children)	Short Breaks (residential)	School Nursing (P'boro) includes National Child Measuring Programme and Vision Screening
Community Paediatric Audiology	Looked after children Health Admin	Targeted (Tier 2) support in education settings
Community Paediatrics x 2 (Cams & P'boro)		
Community Paediatrics, including Child Protection Clinics		
Paediatric Occupational Therapy Peterborough		
Paediatric Outpatients		
Safeguarding children and young people		

- 1.5 The 0 – 19 Healthy Child & Families Programme (0-19 HCP) is the foundation of Children and young people services (CYP) it is therefore essential that this core offer is robust, comprehensive and outcomes can be evidenced for young people and their families.

Work to Date

- 1.6 Over the past 18 months work on the HCP has been mainly around getting a robust service specification and a core offer for Health visitors, School Nurses and a review of the family nurse partnership. This work has connected to other work stream such as maternity and emotional health and wellbeing, and the offer for early support and children's centres.

Public Health directorate staff work as an integral part of the CHJCU, and have supported the programme by ensuring the work is evidenced based with good key performance indicators for the HCP, developing a core outcomes framework for a future model for children's services, and providing the link to Health Committee governance of public health grant funded services included in the model. This work has involved children families and parent participation groups. There have also been several workshops with partners and stakeholders.

0-19 Work Going Forward

- 1.7 Over the past 18 months the children and families joint commissioning board have looked at opportunities to work closer together and join services when it has been beneficial for children and families to do so i.e. around Early Support, Emotional Health and Wellbeing Family Nurse partnership and Speech and Language Therapy. To build on this work it was felt that a county wide 0-19 programme board would be the most effective way for the organisations to work together as a system. This board had been in operation for the past 6 months.
- 1.8 There is also a need to consider the transformational work currently being designed under the Cambridgeshire and Peterborough Sustainability and Transformation Plan (STP). This is a national policy driven programme which aims to create resilient, affordable system wide services and implement new models of provision as described in the NHS Five -year forward view.
- 1.9 The STP maternity and children's work is organised into seven (including six other) work-streams, and has responsibility across the same geographical footprint as the CHJCU. The 0-19 programme will link to most of the areas and is the connecting cornerstone to the other work streams:
- Mental Health Support for Children: Health Visitors and School Nursing integration with Emotional Health & Wellbeing service providing an equitable, evidence based offer linked to outcomes; provision of a robust offer to teenage parents including from the Family Nurse Partnership (FNP) and from Health Visitors, where FNP threshold is not attained.
 - Specialist Disability: Robust Early Help Service, Neurodisability, Speech & Language Therapy drop ins
 - Perinatal Care: Joining up pathways with midwifery services.
 - Specific Disease Pathways: Early provision of information and knowledge e.g asthma and incontinence
 - Urgent Care: Increasing self-efficacy of families through sharing of information and knowledge
 - Maternity by ensuring midwives are a core part of the 0-19 offer and work in partnership to identify and support vulnerable women, children and families.
- 1.10 This co-dependency with other work streams adds further to the impetus that the Healthy Child Programme 0 – 19 pathway meets the needs of children and young people equitably throughout the county, therefore particularly in areas of deprivation.
- To ensure a joined up core offer with Local Authority children's centres and family workers is designed and implemented (based on iThrive model) (Spring 2018)
 - Clear links and pathways in place within the 0 – 19 Healthy Child & Families Programme across Peterborough and Cambridgeshire
 - The project will support the integrated front door initiative providing ease of access to services, a streamlining of services and appropriate signposting and onward referral
 - View towards creation of Dedicated Children's and Family Centres linked to a District Model
 - Coproduction with CYP and their families

- Development of innovative approaches to commissioning and delivering the 0 – 19 Healthy Child & Families model in line with 5 year forward view, for example Section 75, prime contracting models, joint procurement
- To gather children, young people and their families' voices on the 0 – 19 Healthy Child & Families pathway coproduction, at baseline (Spring 2017) and after 2 years (Spring 2019) and 5 years (Autumn 2021); combining information gathering with that of other work streams, where appropriate
- Alignment with all other relevant projects within the programme.

2. THE CAMBRIDGESHIRE & PETERBOROUGH 0-19 PROGRAMME BOARD

2.1 It was proposed and agreed by the CHJCU that a county wide 0-19 programme board should be established to oversee this stream of work with the following membership:

- Janet Dullaghan CHJCU (CCC & PCC) Head of commissioning child health and well-being (chair of 0-19 Programme board)
- Christine Richardson CHJCU children and young people transformation director
- John Peberdy Service director children and young people's services Cambridgeshire Community Services NHS Trust (CCS)
- Jo Sollars CCC Head of Family work early help
- Theresa Leavy CCC Interim service director children's social care
- Nick White CPFT Associate director of operations Cambridge and Peterborough Foundation Trust (CPFT)
- Pam Setterfield CHJCU Commissioning Manager CHJCU
- Leesa Murray CHJCU project Support
- Dr Raj Lakshman, CCC and PCC public health specialist
- Finance (to be agreed)
- Lee Miller Head of transformation children's and maternity services (CHJCU)

Alignment with the Children's Change Programme

2.2 This 0-19 programme aligns with the Children's Change Programme (CCP) which will achieve the following 3 corporate priorities and includes the:

- Development of an integrated front door which will be the single point of contact for all notifications regarding safeguarding and early help. This will promote the wellbeing of children bringing together Multi-Agency Safeguarding Hub, the Early Help Hub and First Response.
- The future shape and work of children's centres / family workers will also be developed as part of the CCP and within the wider system of services for young families including the Healthy Child Programme and the opportunities for enhanced community delivery of services.
- Building on the existing Healthy Child Programme Framework to support collaborative work with a view towards creation of Dedicated Children's and Family Centres linked to a District Model.
- Integrated delivery and ensuring services are appropriately accessed throughout the 0 – 19 age range.

3. ALIGNMENT WITH CORPORATE PRIORITIES

3.1 Developing the local economy for the benefit of all

It is proposed this work will achieve better outcomes for children to help them become healthy and productive adults, as well as making the required savings.

3.2 Helping people live healthy and independent lives

The development of a whole systems approach focussing on early identification and support will support children, young people and families to be more resilient with better outcomes

3.3 Supporting and protecting vulnerable people

The 0-19 services currently focus on identifying and targeting vulnerable children and families

4. SIGNIFICANT IMPLICATIONS

4.1 *Resource Implications*

This programme will need to make savings for the next 2 years as identified through public health business planning processes, and the business planning processes of other organisations involved.

4.2 *Statutory, Legal and Risk*

The joint commissioning unit is working with LGSS legal team, who will advise on the potential impact of future options.

4.3 *Equality and Diversity*

A community impact assessment will be collated for any of the future changes or options considered

4.4 *Engagement and Communication*

This work to date has involved children families and parent participation groups. There have also been several workshops with partners and stakeholders. There will be an engagement and communication programme for any future changes or options considered.

4.5 *Are there any localism and local Member involvement issues*

Localism and local Member involvement issues would be considered for any future changes or options.

4.6 *Public health implications*

The 0-19 joint commissioning of children's health services enables the commissioning and delivery of the relevant public health services (health visiting, school nursing, family nurse partnership) to be fully aligned with commissioning of other relevant children's services.

Implications	Officer Clearance
Have the resource implications been cleared by Finance?	Yes Clare Andrews
Has the impact on Statutory, Legal and Risk implications been cleared by LGSS Law?	Yes 31 May 2017 Catherine Wilson
Are there any Equality and Diversity implications?	These will be addressed through community impact assessment at the appropriate point Liz Robin
Have any engagement and communication implications been cleared by Communications?	Yes Christine Birchall
Are there any Localism and Local Member involvement issues?	Not at this point Liz Robin
Have any Public Health implications been cleared by Public Health	Yes Liz Robin

Source Documents	Location
<i>The Health and Wellbeing of Children and Young People in Cambridgeshire and Peterborough</i>	http://cambridgeshireinsight.org.uk/health/groups/cyp/hwb
<i>Service specifications for Health Visiting, School Nursing and Family Nurse Partnership</i>	Public Health Directorate, Room 112, Shire Hall
<i>Children and Young People's Outcomes Framework</i>	Public Health Directorate, Room 112, Shire Hall