

Health Scrutiny Committee report

Information for Health Scrutiny Committee: Update on the progress on the transfer of Health Visitor and Family Nurse Partnership (FNP) commissioning responsibilities from NHS England to Nottingham City Council on the 1 st October 2015	
Date of meeting:	23 rd July 2015
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Responsible Director:	Alison Challenger, Director of Public Health (Interim)
Portfolio Holder:	Cllr Alex Norris

Purpose

The purpose of this report is to update Nottingham City Council Overview and Scrutiny on the progress of transferring commissioning responsibilities for Health Visiting & Family Nurse Partnership from NHS England to Nottingham City Council on 1st October 2015.

Background and context

More than a quarter of the population of Nottingham is under the age of twenty. There are an estimated 20,000 infants aged 0-4 years and 57,200 children and young people aged 5-19 years resident in the City. The number of births has risen considerably in recent years and is likely to continue to do so. The projected population (age 0-19 years) in 2020 is 78,500. "There is overwhelming evidence that tells us that the first few years in children's lives shape their future development, and influence how well children do at school, their ongoing health and wellbeing and their achievements later in life. In addition, it is widely acknowledged that a strong focus on the first few years of children's lives leads to huge economic, social and emotional benefits later on, both for individuals and for society as a whole." (Supporting Families in the Foundation Years Department for Education & Department for Health 2011 www.gov.uk/government/publications/supportingfamilies-in-the-foundation-years)

A health visitor (HV) is a qualified nurse or midwife with post-registration experience who has undertaken further training and education in child health, health promotion, public health and education. Health visitors work as part of a multidisciplinary primary healthcare team, assessing the health, educational and social needs of children, families and the wider community. They aim to promote good health, improve educational and social outcomes and prevent illness by offering practical help and advice; ultimately reducing health inequalities.

Further information on the Health Visiting service can be found here: <http://www.england.nhs.uk/wp-content/uploads/2013/06/nati-hlth-vis-pln.pdf>

The Family Nurse Partnership (FNP) is a targeted service for young women under the age of 19 designed to empower and educate them during their first pregnancy through to the early years of their parenthood until their child is 2 years of age. FNP practitioners deliver an individually-adjusted curriculum in frequent one-to-one meetings aimed to improve self-efficacy and mitigate the sociological risks of a young, vulnerable woman having her first child. Further information on the Family Nurse Partnership can be found here: <http://fnp.nhs.uk/fnp-information-pack>

In April 2013 NHS England were charged under the Section 7a agreement of the National Health Service Act 2006 as amended under the Health and Social Care Bill 2012, an agreement between the Secretary of State and NHS England to commission Children's Public Health Services from 0-5 years. The Government has stated an expectation for these responsibilities will transfer to local authorities on 1st October 2015.

The 'Health Visitor Implementation Plan (HVIP) 2011-15 A call to Action (Department of Health 2011)' set out the shift in resources to increase the number of health visitors in order to enhance early identification and intervention by increasing contact and support to families, monitoring child development and health promotion.

Through the 7a agreement NHS England committed to improve health and wellbeing outcomes for children and families which included the Government's commitment to increase the number of health visitors (HVs) nationally by 4,200 against a baseline of 8,092 to transform health visiting services through the implementation of the Healthy Child Programme and increase the number of Family Nurse places nationally to 16,000 by April 2015.

Progress on the transfer of commissioning responsibilities to local authority

Transition Board:

A local transition board is meeting on a monthly basis to actively manage the transfer processes. Novation documentation is in place and NCC is now cosignatory to the existing contract and privy to all contract monitoring information. NCC legal, contractual and finance colleagues are working together to ensure due diligence of the transfer of service commissioning responsibilities.

Service Specification:

A national service specification has been developed for both Health Visiting and Family Nurse Partnership services. Regulation for Mandated Health Visitor functions have also been agreed which includes an 18 month 'Sunset clause' for continuation of these mandated functions post transfer to local authorities. The new mandated functions for Health Visitors are to:

1. Review pregnant women who are more than 28 weeks gestation
2. Review a child who is aged between one day and two weeks
3. Review a child who is aged between six and eight weeks
4. Review a child who is aged between nine and 15 months or
5. Review a child who is aged between 24 months (two years) and 30 months (two years and six months).

Final Health Visiting Numbers:

The final figures for the numbers of Health Visitors across Nottingham City on 31st March 2015 were: 126.6 whole time equivalents (WTE) against our original target of 154.7 WTE. This gives us a shortfall of 28.1 WTE. However, we have 12 students in training at the moment and they are due to complete their course by September 2015. There are also 8 students in training who are due to complete by January 2016. Nottingham CityCare will also continue to advertise and recruit qualified Health Visitors as part of normal business.

From a starting point of 61 WTE Health Visitors, Nottingham City have increased their Health Visitor workforce to 126.6 WTE in less than 5 years, more than doubling the team which is a great achievement.

NHS England have agreed with CityCare to continue recruitment activities to help move them closer to their target before commissioning responsibilities transfer to local authorities and in line with local authority financial allocations.

Funding Allocation for Health Visiting and Family Nurse Partnership: Half Year Allocation to be transferred to NCC on 1ST Oct 2015: agreed by DH in January 2015.

NHSE Area Team	Local Authority	Commissioning Costs	Proposed Allocation
North Midlands	Nottingham City	£15,000	£5,319,000

The funding formulae which will decide the allocation from 1st April 2016 has still not been decided by the Department of Health (DH) and the Local Government Association (LGA). Nottingham City Council public health team have already responded to a technical consultation however, we are expecting wider consultation to take place over the summer.

Registered Vs Resident Commissioning of Health Visitor (HV) and Family Nurse Planning (FNP) service: HV and FNP services are currently commissioned across a **GP Registered** population. The new national specification for these services suggests that we should use a **Local Authority Resident** population to commission them from the 1st October 2015. There are clearly challenges involved in changing commissioned populations particularly as GP and midwifery services will continue to be commissioned on a registered basis. The risks associated with this have been raised by Nottingham City Council and NHS England to the DH and the LGA over the past 9 months. NHS England, Public Health England and Local Government Association have now agreed to develop key high level principles to manage the commissioning transfer. The timescales for the change in commissioning populations is likely to be 1st April 2016. The HV and FNP Transition Board have requested legal advice regarding financial and reputational risk to the authority.

Local discussion have commenced to mitigate the risks associated with transferring from a registered commissioning to a resident commissioning population: NCC Legal Team, Nottingham City CCG, Child Health Records, Nottingham CityCare, NHS England Vaccination / Immunisation and Screening team and neighbouring local authority teams are all being consulted.

Overarching planning areas

Communications Plan: An integrated communication plan for Nottingham City Council is being developed and this will dovetail with national LGA and DH communications plans.

Data Sharing: Public Health England is leading on developing an interim data monitoring system for Health Visiting and Family Nurse Partnership

Vitamin D supplementation: Vitamin D is essential for normal growth and development; it is primarily generated through exposure to sunlight therefore, in the UK there is a higher risk of developing a deficiency of this vital vitamin. NHS England has confirmed that funding for Vitamin D (Healthy Start Vitamins for women and children) is included within the overarching funding for HV and FNP. This means that this public health initiative will continue to support vulnerable populations across Nottingham.

Development of 0 to 5 years Area Profiles: Over the past few months public health have been consulting on draft Health and Social outcomes profiles based at a Children's Centre geography. These are now available in Nottingham Insight and will allow everyone involved to develop services in line with the actual health and social needs of the population.

The profiles can be accessed through this link:

<http://www.nottinghaminsight.org.uk/f/123196/Library/Public-Health/0-5-Years-Area-Profiles-2014-15/>

In Summary

We have a growing evidence base which tells us that the first few years of a child's life are extremely important to ensure optimum physical, emotional and social development. The transfer of the Health Visiting and Family Nurse Partnership services' commissioning responsibilities from NHS England to Local Authorities on 1st October 2015 is a real opportunity to ensure all services for 0 to 5 year olds can become more integrated. This will develop more effective, efficient, accessible, acceptable and equitable services across the city. Nottingham City Council, NHS England and other partners are working closely to ensure the transfer of commissioning responsibilities for these vital services is robust and due diligence is adhered to.

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