

Title of paper:	Moving to a More Integrated World for Children and Families		
Report to:	Children's Partnership Board		
Date:	Wednesday 5 th July 2017		
Relevant Director:	Katy Ball: Director for Commissioning and Procurement	Wards affected: All	
Contact Officer(s) and contact details:	Chris Wallbanks. chris.wallbanks@nottinghamcity.gov.uk . Tel: 011 8764801		
Other officers who have provided input:			
Relevant Children and Young People's Plan (CYPP) priority:			
Safeguarding and supporting children and families: Children, young people and families will benefit from early and effective support and protection to empower them to overcome difficulties and provide a safe environment in which to thrive.			<input checked="" type="checkbox"/>
Promoting the health and wellbeing of babies, children and young people: From pregnancy and throughout life, babies, children, young people and families will be healthier, more emotionally resilient and better able to make informed decisions about their health and wellbeing.			<input checked="" type="checkbox"/>
Supporting achievement and academic attainment: All children and young people will leave school with the best skills and qualifications they can achieve and will be ready for independence, work or further learning.			<input checked="" type="checkbox"/>
Empowering families to be strong and achieve economic wellbeing: More families will be empowered and able to deal with family issues and child poverty will be significantly reduced.			<input checked="" type="checkbox"/>
Summary of issues (including benefits to customers/service users):			
<p>This paper sets out the process that has been undertaken in order to move towards a more integrated approach to delivering services for children and families.</p> <p>It suggests that developing an integrated approach to delivering universal, preventative and early help services for children and families through pregnancy to age 5 creates the opportunity to provide services that are more streamlined and responsive to the needs of children and their families and that make more efficient use of resources. By bringing together services we will be able to drive improvement and create real system change. These benefits ultimately create the opportunity to more effectively prevent the development of later difficulties and provide the best start for children in Nottingham.</p>			
Recommendations:			
1	To note the progress made in moving to a more integrated approach to delivering services for children and families		

1 **BACKGROUND AND PROPOSALS**

1.1 **Context:**

In October 2015 the responsibility for commissioning Health Visitors and the Family Nurse Partnership (FNP) transferred from NHS England to Local Authorities and during the preceding months, discussions took place to consider how these services could be integrated into existing children's delivery teams.

1.2 Discussions lead to an agreement between the Local Authority and the Clinical Commissioning Group (CCG) to undertake a Child Development Strategic Commissioning Review of existing service provision that would provide a clear context for integration and an opportunity to design an updated 'pathway of support' for pregnant women, babies, children and young people;

1.3 Services in scope included Health Visitors, the Family Nurse Partnership, the Breastfeeding Peer Supporters, the children's elements of the Public Health Nutrition Team, Public Health Nurses and Children's Centre Teams (Early Help Service).

1.4 Although the Midwifery Service is commissioned by the CCG, it was acknowledged that elements of this service, particularly relating to where it interfaces with other 0-5 services, would need to be in scope. Similarly, many of our children will come into contact with childcare providers from the Private, Voluntary and Independent (PVI) sector, so they also needed to be in the scope of the Review.

1.5 The analysis phase of the review identified the following key issues in terms of service delivery:

- Each service was working to a different set of outcomes and performance indicators, which meant there was no shared approach to what services were trying to achieve.
- There was some duplication in provision e.g. similar parenting programmes were being run by more than one service but there was no coordination
- There was inconsistent delivery across the city, which meant that if families moved area they could not necessarily access the same provision
- Many programmes and approaches had no evidence of positive impact

1.6 **Proposals for improving what is being delivered: An updated Pathway of Support**

In order to address the issues identified in this element of the analysis, it was agreed that:

- A new shared outcomes framework and indicator set would be developed for all services to work towards
- A new 'pathway' of services and interventions would be developed, based on best practice and the recommendations from the Review, to ensure consistency and avoid duplication.
- An increased number of nationally recognised evidence-based programmes would be delivered and those with a local evidence-base would continue with an evaluation framework supporting them to show evidence of impact.
- The 'pathway of support' would incorporate some of the evidence-based programmes and approaches adopted by the Small Steps Big Changes programme that had been evaluated positively and would be a mechanism for wider rollout of successful interventions.

1.7 Proposals for improving how services are delivered: An integrated approach to service delivery

As the majority of universal 0-5s services were now being commissioned or delivered by the Local Authority, this offered the opportunity to adopt a more integrated and flexible approach, eliminating historic professional boundaries and instead, work innovatively and holistically (with due consideration of the needs and preferences of children and their families) to help children get the best possible start in life.

1.8 The primary rationale for integration is to improve the experience of our children and families by establishing a seamless 'pathway of support' from pregnancy to age 5, informed by the needs of the families and influenced by practitioners.

National research has provided evidence to show that families would like a more joined up system and this is borne out locally through our conversations with families.

1.9 Additional immediate benefits of an integrated approach would include:

- Creating clarity of purpose and approach across organisations and teams through working towards an agreed set of shared outcomes
- Providing more holistic and co-ordinated support to children and families with fewer handovers from one professional to another by removing artificial professional barriers
- Increased efficiency through reduced duplication of activity and smoother transitions between different types of support
- Increased opportunities to share data and information and plan a co-ordinated approach 'around the family'
- A more flexible approach to work force planning, enabling resources to be used more effectively

1.10 Present Position:

The updated 'pathway of support' has been developed in partnership and incorporates statutory provision and provision that is deemed to be best practice or evidence-based. It builds on the Healthy Child Programme (HCP), Early Years Foundation Stage, the requirements of Children's Centre inspections, and the SSBC outcomes framework. Recommendations from the Review, including increasing the number of evidence-based programmes and approaches being delivered, have been incorporated into the pathway, as have programmes being trialled by SSBC and interventions that the City would like to continue into the future, such as the Dolly Parton Imagination Library. This also provides families with a consistent entitlement to advice and support across the city.

1.11 The future integrated delivery model has been developed based on the shared outcomes framework and the 'pathway of support'. The model identifies statutory activity, such as the mother and baby checks including the 2-2½ year review and 'locally mandated activity', such as the Triple P Parenting Programme and the Dolly Parton Imagination Library. In some instances, it identifies which professional is best placed to undertake activity e.g. a trained Health Visitor should undertake the ante-natal check at 28 weeks, but for most activity, the Service Provider will determine who in the integrated team should deliver activity based on the level of skill and competency required.

1.12 Next Steps:

The integrated model will form a key part of the tender documentation which will go to the market later this year. It incorporates activity from the services in scope, including how the Provider will work more closely with the Council's 0-5 work force.

The integrated service will commence from 1st April 2018, although it is anticipated that this will be developed in stages and full integration will not be achieved for a further 12-18 months.

2 RISKS

- 2.1 By not undertaking this activity, there is a risk that services continue to be delivered with inconsistency and some duplication. In a climate of reduced resources, it is essential that the workforce is utilised as effectively as possible and that services are streamlined and consistent.
- 2.2 By not undertaking this activity, there is a risk of continuing to deliver programmes and approaches that have no strong evidence base and therefore are less likely to have positive outcomes for children, young people and families.
- 2.3 By not undertaking this activity there is a risk that a family-centred approach will not be delivered as effectively as it could be as information on a family is not routinely shared through existing systems and therefore a co-ordinated approach is difficult to achieve.
- 2.4 By undertaking this activity there is a risk that some practitioners may feel that their professional status is being undermined as an integrated approach seeks to blur professional boundaries and ensure that activity and responsibility are commensurate with practitioners' skills and expertise.

3 FINANCIAL IMPLICATIONS

- 3.1 The delivery of the pathway of services through an integrated approach will be within existing resources and subject to decisions relating to the broader budget context.

4 LEGAL IMPLICATIONS

- 4.1 The legal team are supporting the process to ensure there is no potential for a legal challenge to the procurement or delivery of the service.

5 CLIENT GROUP

- 5.1 The client group includes all pregnant women, babies, children, young people and their families in receipt of our universal and early help services.

6 IMPACT ON EQUALITIES ISSUES

- 6.1 The integrated service is a universal, preventative service accessible to all within the client group

7 OUTCOMES AND PRIORITIES AFFECTED

- 7.1 The outcomes and priority areas within the CYPP have informed the development of the service specification and therefore all will be addressed