

<b>Title of paper:</b>	Child Development Strategic Commissioning Review	
<b>Report to:</b>	Children's Partnership Board	
<b>Date:</b>	30.9.15	
<b>Relevant Director:</b>	Katy Ball, Director of Procurement and Children's Commissioning	<b>Wards affected:</b> All
<b>Contact Officer(s) and contact details:</b>	Chris Wallbanks, Strategic Commissioning Manager for Children 0115 8764801	
<b>Other officers who have provided input:</b>		
<b>Relevant Children and Young People's Plan (CYPP) priority or priorities:</b>		
<b>Safeguarding and supporting children and families:</b> 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.		√
<b>Promoting the health and wellbeing of babies, children and young people:</b> 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.		√
<b>Supporting achievement and academic attainment:</b> 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.		√
<b>Empowering families to be strong and achieve economic wellbeing:</b> More families will be empowered and able to deal with family issues and child poverty will be significantly reduced.		√
<b>Summary of issues (including benefits to customers/service users):</b>		
<p>The Child Development Review is being undertaken by Nottingham City Council in partnership with Nottingham City Clinical Commissioning Group (CCG) in response to the opportunity for increased integration of commissioning and service delivery offered by the transition of Health Visitors and the Family Nurse Partnership (FNP) to the Local Authority in October 2015.</p> <p>In order to maximize the potential for increased integration, an in-depth review of existing services needed to be undertaken. This would then provide an opportunity to redesign universal / preventative and early help services to be more efficient and evidence-based and to develop one comprehensive written pathway of services for pregnant women, babies, children and young people up to the age of 19, which Nottingham does not presently have.</p> <p>This pathway re-design, co-produced with partners and citizens will ensure a consistency of approach throughout the City, create a mechanism for the Small Steps Big Changes programme (SSBC) to influence system change, increase integrated working to support OFSTED inspections of our Children's Centres and as an Early Intervention City, the process will enable us to identify which programmes and workforce approaches we should invest in and where we can use evidence to improve the system as a whole for our children and young people. It is envisaged that in two years, there will be integrated teams in areas delivering this pathway.</p> <p>This report provides an update of progress to date and a timeline for future actions.</p>		
<b>Recommendations:</b>		
<b>1</b>	To note the purpose and core activities of the Child Development Strategic Commissioning Review	
<b>2</b>	To note the progress of the Child Development Review	
<b>3</b>	To note the timescale to move towards the implementation of the new pathway and integrated area	

	teams
4	To note the link with the Small Steps Big Changes programme and the potential of this review to become the mechanism to influence system change

## 1. BACKGROUND AND PROPOSALS

The Child Development Review was triggered initially by the nationally proposed transfer of Health Visitors and FNP from NHS England to Local Authorities in October 2015 and the need to consider their integration into existing children's delivery teams. During early discussions, it was recognized that a Strategic Commissioning Review of existing service provision would provide a clear context for integration and an opportunity to design an updated 'pathway' of evidence based programmes and approaches for pregnant women, babies, children and young people. Nottingham has never had one comprehensive written pathway which shows the range of services available through pregnancy, childhood and adolescence and all partners agreed that this should be a key product of the review.

Through the co productive redesign of service provision, it would be possible to increase integrated working, develop a consistent offer of services across the City, improve the quality of services to meet inspection requirements and as an Early Intervention City, to be very deliberate about which programmes and workforce approaches to invest in, or stop delivering, during this time of budgetary pressures, and what system changes would add more value.

The service redesign is being undertaken within the context of existing service improvements and reviews, including the commissioning of contracts, within the City Council and the CCG. The review team is working very closely with colleagues and partners to ensure a consistent approach to system change.

The Steering Group that oversee the work include representatives from Nottingham City Council's Early Help Team, the Early Years Team, the School Partnerships Service, Public Health, the Crime and Drugs Partnership; representatives from the Change and Improvement Team and partners; including representatives from Nottingham City Clinical Commissioning Group, Futures, the Voluntary and Community Sector, NHS England and SSBC.

### a. Developing The Nottingham Pathway / Offer:

Before any analysis work was undertaken, partners considered what it was that we wanted our services to achieve for the 0-19 population. An outcomes framework for pregnant women, babies, children and young people up to the age of 19 has been developed and agreed by the partnership and is reflected within the updated Children and Young People's Plan 2014.

An analysis of need has been undertaken through reviewing Nottingham's key population level indicators and the JSNA and benchmarking against statistical neighbours. The Early Intervention Foundation supported this process and confirmed the results of the analysis and areas on which to focus, which included Child Protection rates, first time entrants into the Youth Justice System, hospital admissions for substance misuse (15-24), permanent exclusions and tooth decay.

Alongside the analysis of need, a piece of work was undertaken to identify evidence-based practices and 'best practice' as indicated within national guidance documents which supported each of the 21 outcomes. The Early Intervention Foundation provided advice on a number of evidence-based programmes which were deemed to be worthy of consideration. This 'evidence' section also included actions which have derived from other reviews or inspections, for example the CAMHS Review, the Maternity Review, the Children's Centre Ofsted Inspection etc.

With the support of the Steering Group and a number of practitioner interviews, we mapped existing provision, gaps in provision and inconsistencies in delivery against the 21 outcomes, identified need and best practice. Through discussions with the SSBC team we have also identified which of their proposed programmes we may be able to implement in the future as part of this pathway, depending on the outcome of their evaluations.

Whilst the schools agenda was represented on the Steering Group it was not in scope within the mapping

of provision exercise. However, schools are included within the recommendations element of the review.

The process has resulted in a set of draft recommendations based on:

- The continuation of existing good practice
- The implementation of new evidence-based programmes and approaches
- The implementation of 'best practice' (where robust evidence is unavailable)
- System change
- Workforce development

#### **Consultation:**

Consultation on the recommendations is now underway. The recommendations have been grouped in a variety of ways to support the consultation process, including by setting or sector (e.g. VCS, PVI, Schools), by theme or outcome (e.g. mental health, healthy lifestyles), by life stage (e.g. maternity) and by service area (e.g. Early Help Team).

Members of the Children's Partnership Board that have not yet participated in the consultation process will be contacted in the next two weeks.

#### **Next Steps:**

Once the consultation process is closed at the end of October, feedback will be incorporated into the recommendations which will then be formally agreed by the key partner organisations. This will then form the 'pathway of services' and inform future service specifications.

It is intended that a 'family friendly' version of the pathway is developed to inform families of the universal and early help services available to them.

#### **b. Developing Integrated Delivery Teams:**

The second element of the review is to consider the most effective way of delivering the pathway of services within the context of increasing budgetary pressures. Work is now being undertaken on an options appraisal for a range of potential models of integrated delivery. These include the following:-

1. 0-5 Public Health Services (PHS) + Local Authority Services (LAS) = Health Visitors (HV), Family Nurse Partnership (FNP), Early Help Team (EHT)
2. 0-5 PHS + LAS + Midwifery (ie with CCG)
3. 5-19 LAS + CCG = EHT/Youth Provision Behaviour, Emotional and Mental Health Team (BEMHT)
4. 5-19 LAS + PHS + CCG = EHT/Youth Provision, SN, BEMHT
5. 0-19 Public Health Services only = HV, FNP, School Nursing Service
6. 0-19 PHS + LAS = HV, FNP, SN, EHT, Youth Provision, CAMHS
7. 0-19 PHS + LAS + CCG = HV, FNP, SN EHT, Youth Provision, CAMHS, Midwifery, BEMHT

It is anticipated that a combination of models will be adopted within a phased approach.

A draft integrated service specification will be completed by March 2016, ready for implementation in April 2017.

Progress on this element of the work will be provided to the Board through future meetings.

## **2. RISKS**

A key risk relates to the recommendations of the review not being delivered. This would mean that our services are not delivering as effectively as they could be and would impact adversely on the aspirations the City has for its children and young people.

An additional risk relates to any delay in the development of integrated teams as this will mean a delay in making cost savings

The risks are being mitigated through the engagement of colleagues and partners who have shown commitment to working on this shared agenda through sustained attendance at Governance Group and Steering Group meetings. The initial timeline for activity has been met thus far.

## **3. FINANCIAL IMPLICATIONS**

The total value of the services in scope of the review is approximately £4m pa. The review offers the opportunity to make budgetary efficiencies through the integration of teams and potentially the joint

commissioning of services in the future. The detail of the potential efficiencies associated with each model is being worked up at present.

#### **4. LEGAL IMPLICATIONS**

The initial stages of the review do not raise any significant legal issues. Legal services will provide advice and assistance as necessary to support the on going review.

#### **5. CLIENT GROUP**

The review relates to the 0 -19 age group which incorporates pregnant women and the Maternity Services.

#### **6. IMPACT ON EQUALITIES**

Equalities issues remain a focus within the review and have been identified within the needs analysis and evidence of best practice. The recommendations refer to both the general population and to particular vulnerable groups and their specific needs.

#### **7. OUTCOMES AND PRIORITIES AFFECTED**

The review relates to all of the CYPP priorities

#### **8. CONTACT DETAILS**

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