

HERTFORDSHIRE COUNTY COUNCIL

HEALTH AND WELLBEING BOARD
9 OCTOBER 2015 AT 10.00 a.m.

Healthy Child and Early Childhood Commissioning: Update

Report of the Director of Children's Services and the Director of Public Health

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1.0 Purpose of report

- To update the Board on the transfer into HCC of the responsibility for commissioning the Healthy Child Programme (0-5 years)
- To update the Board on the HCC decision not to re-tender for a home visiting service
- To set out the proposed approach for the establishment of the Healthy Child and Early Childhood SCG
- To outline the commissioning priorities for the next 12 months
- To share the draft approach of integrated working for the children's centre, health visiting and midwifery services

2.0 Summary

This Board has asked for greater integration across Healthy Child and Early Childhood updates on two aligned areas and sets out the proposals for a strategic commissioning group to continue this work

3.0 Recommendation

- To note the updates in sections 4 and 5
- To agree the approach to the establishment of the Healthy Child and Early Childhood SCG
- To note and comment on the agreed priorities

4.0 Background

- 4.1 This Board has championed the development of an integrated approach to universal, preventative and more targeted services from conception to aged five.
- 4.2 Work is underway to develop this, and progress has been achieved in terms of communication and strategic direction. Updates on some key work are included below. These also demonstrate the need to integrate this work more closely because of the close interface across services.

5. Transfer into local authority of responsibility for Healthy Child Programme (0-5 years) including healthy visiting service

- 5.1 The Healthy Child Programme (HCP) comprises two parts: 0 - 5 years and 5 – 19 years. Responsibility for the 5 – 19 HCP and school nursing, transferred to the County Council, with the Director of Public Health, in April 2013.
- 5.2 Under national policy, the responsibility for the strategic overview and commissioning of Health Visitors and Family Nurse Partnership will transfer to the Director of Public Health on 1 October 2015 as part of the Public health function. This forms the final part of the transfer of public health commissioning responsibilities to local government, and aligns policy responsibility for all children's public health and wellbeing (0-5 and 5-19).
- 5.3 The transfer of the commissioning of these services will be undertaken by 'novation' of the current service contract to the Council. There will be no change to the contracted provider - Hertfordshire Community Trust – nor to service delivery as the services are delivered to a national service specification. There are 5 universal health visitor reviews which form part of the HCP and will be mandated by the Secretary of State for 18 months, which means we have limited discretion on altering the scheme within the next eighteen months. These are:
- Antenatal health promotion review
 - New baby review, which is the first check after the birth
 - 6-8 week assessment
 - 1 year assessment
 - 2 to two-and-half year review
- 5.4 Public Health have undertaken a consultation with stakeholders on what School Nurses do. As a result of this work is underway on developing a series of models for school nursing on which further engagement will be undertaken.

6. Update on the contract for a home visiting service

- 6.1 For around 30 years, HCC and health commissioners have provided funding for Home-Start schemes across Hertfordshire to provide a befriending home-visiting service. The development of the Early Childhood Strategy included consideration of the expansion of public sector services for under five year olds and their families, and HCC decided not to re-tender for a home-visiting service in the future. The current contract ends on 30 September 2015. Both Hertfordshire CCGs also contribute to the funding for this contract and during September also reviewed the future service needs.
- 6.2 Full Council endorsed the proposal not to re-tender in July and although the decision was reviewed by the Overview and Scrutiny Committee in August, no further action was recommended.
- 6.3 Herts Valleys CCG Board agreed to explore ways to continue supporting vulnerable children and their families. This would mean making full use of the annual budget of £103,000. Herts Valleys CCG will engage with Home Start and other voluntary sector providers and look at how best to use this resource – in a way that targets those areas most in need - to improve health outcomes for vulnerable children and their families in the Herts Valley area.
- 6.4 The East and North Herts CCG Governing Body members will be taking a decision regarding the CCG's funding for a home visiting service on 24 September, in line with decisions taken by Hertfordshire County Council, Herts Valleys CCG and Cambridge and Peterborough CCG. The CCG's Children's lead will work with localities and the voluntary sector to review and agree how the existing budget is used to support vulnerable families who may not be accessing children's centre services, to improve their health outcomes.
- 6.5 HCC Cabinet approved transitional funding of £200,000 to support:
- Those families currently receiving support through the contract
 - The retention of the skills and experience of the volunteers
 - The development of a sustainable model for Home-Start schemes beyond September.
- Home Start Hertfordshire, an umbrella organisation established to support the nine schemes, is working with Home-Start UK to develop a business plan for the use of this transitional funding.
- 6.6 The Business Plan has not yet been submitted, but initial indications are that it will include proposals for:
- The families who will need support to continue beyond September (approximately 100)
 - Funding to engage a consultant to look at the structure of Home Start, considering the finances available, and the implementation of this structure.
 - Support with fundraising including applying to large national funds (such as Big Lottery) and corporate funding.
 - Support to develop a plan to implement the efficiencies gained from the rationalisation of offices, IT, etc.

- A review of Home Start charity shops to consider expansion as a future funding stream
- 6.7 HCC Officers will continue to work with Home Start staff and trustees to ensure a robust and sustainable transition plan is agreed and implemented.
- 6.8 The majority of referrals to Home-Start come from health visitors and children’s centres, and the regular Family Matters meetings between those services are now being used to decide the best local support offer available to meet the particular needs of families.
- 6.9 In addition, a secure on-line referral system has been developed so that GPs and other agencies can refer families to children’s centres simply and quickly. However the befriending service provided by Home-Start will not be replicated by children’s centres.
- 6.10 The impact of these changes will be considered by HCC as part of the wider Scrutiny into early childhood services in 2016/17, and an update could be provided to this Board at the same time.

7. Governance and priorities

- 7.1 The updates in sections 4 and 5 demonstrate the clear links and interface between Children’s Services, CCGs and Public Health in the early years. As an example, a draft model of the inter-relationships between children’s centres, health visitors and midwifery is attached as Appendix 1. In order to align future service developments, it is proposed to establish a Strategic Commissioning Group (SCG) for Healthy Child and Early Childhood in the autumn.
- 7.2 Until this is established, CCG, Public Health and Children’s Services commissioners are meeting to discuss the service responsibilities and strategic priorities relating to early years for each organisation. Initial opportunities for integrated working and shared priorities have been agreed, and the lead agency to progress each priority outlined along with a commitment from all to support the delivery of these priorities. This demonstrates the work the SCG will monitor, support and challenge:

7.3

Priority	Lead agency
Reduce admissions to A&E through support for minor illnesses and accessing appropriate community health services	CCGs
Reduce smoking in pregnancy	Public Health
Develop a co-ordinated ante-natal support offer across sectors	Childhood Support Services (CSS)
Redesign the offer from the School Nurse service and if necessary re-procure	Public Health
Embed UNICEF BFI accreditation and breastfeeding	CSS

support across sectors	
Develop a peri-natal mental health support offer across the continuum of need	CCGs
Map the scope and access to parenting programmes across the continuum of need	CSS
Develop a Healthy Child bowel and bladder pathway	CCGs
Manage the transfer of commissioning responsibility for health visiting service into HCC, and the increased opportunities for integrated approaches for health visiting, midwifery and children's centre services	Public Health
Ensure preventative services and services for under five year olds are reflected in key strategic reviews/strategies, such as Domestic Abuse Strategy; CAMHS Implementation Strategy; addressing signs of parental neglect at an early stage; Speech and Language Review etc	CSS/Public Health/CCGs

Report signed off by	Children's Services Board Public Health Management Board Children and Young People's Integrated Commissioning Executive East and North Herts CCG Partnership and Programme Board
Sponsoring HWB Member/s	Jenny Coles Jim McManus
Hertfordshire HWB Strategy priorities supported by this report	Identify which priorities: Eg Reducing the harm from tobacco
Needs assessment (activity taken) n/a	
Consultation/public involvement (activity taken or planned) n/a	
Equality and diversity implications n/a	
Acronyms or terms used	
Initials	In full
HCC	Hertfordshire County Council
CCG	Clinical Commissioning Group
SCG	Strategic Commissioning Group
HCP	Healthy Child Programme
CSS	Childhood Support Services