

CHILDREN'S SERVICES: PROVISION OF 0-19 PUBLIC HEALTH NURSING SERVICE AND SERVICES FOR CHILDREN WITH ADDITIONAL NEEDS

Report of the Chief Officer for Communities, Public Health, Environment and Prosperity and the Chief Officer for Children's Services

Please note that the following recommendations are subject to consideration and determination by the Cabinet (and confirmation under the provisions of the Council's Constitution) before taking effect.

Recommendations: That Cabinet:

- (a) Approves the undertaking of option appraisals for the provision of the 0-19 Public Health Nursing, Portage and ROVICs services from April 2019 onwards.
- (b) Approves the undertaking of work for the consideration of Devon County Council becoming the Lead Commissioner for the Residential Short Breaks service and, if the Council becomes the Lead Commissioner, for the undertaking of an options appraisal for the provision of the Residential Short Breaks from April 2019 onwards.
- (c) Delegates future decision making powers regarding Portage, ROVICs and Residential Short Breaks to the Chief Officer for Children's Services.
- (d) Approves the joint commissioning of Occupational Therapy (**OT**) and child and adolescent mental health services (**CAMHS**) as part of the Community Health and Care Services with NEW Devon CCG acting as lead commissioner for a new contract to start from April 2019.

1. Introduction

- 1.1. Ensuring that Devon's children and young people have the best start in life, and grow into healthy adults, is one of Devon County Council's top strategic priorities and a priority for the partnership of the Wider Devon Sustainability and Transformation Plan (STP). It is also fundamental to reducing inequalities in health, which is a statutory duty of local authorities and of the NHS.
- 1.2. Devon County Council is currently one of five partners in a commissioning partnership for the provision of Integrated Children's Services (ICS) provided by Virgin Care Ltd. The current five-year contract comes to an end on 31st March 2018. Cabinet, on 8th March 2017, considered a range of options (below) relating to the position of Public Health Nursing, informed by the outcome of a consultation with stakeholders and the public.
 - Option 1: a 12-month interim contract (with partners) to allow for a full procurement with a contract start date of 1st April 2019.
 - Option 2: an independent procurement of 0-19 Public Health Nursing services.
 - Option 3: to bring the service "in-house".
- 1.3. The Cabinet selected Option 1 and made the following decision:
'that approval be given to the course of action at Option 1 set out above namely entering into a 12-month interim contract (with partners) to allow for a full procurement for a longer term contract with a contract start date of 1st April 2019'.
- 1.4. In relation to the procurement of Integrated Children's Social Care services Cabinet decided on 8th March 2017 that:

- 1.4.1 the Local Authority (the County Council) continues to commission jointly with the Clinical Commissioning Groups (CCG's), Children and Adolescent Mental Health Services (CAMHS) and community health and care services for children with additional needs: with delivery of services monitored through the commissioning governance arrangements of the Children, Young People and Families Alliance, jointly funded through a pooled budget for the period of one year 2018/19 via a Section 75;
 - 1.4.2 as lead commissioner, NEW Devon CCG award a one year contract for 2018/19 to Virgin Care Ltd;
 - 1.4.3 the Local Authority (the County Council) work jointly with CCG's throughout the next year to determine a strategy to shape service delivery with a view to tenders for services being invited during 2018 for a longer term contract(s) from 2019 onwards
- 1.5 A decision is now required from Cabinet for the provision of the 0-19 Public Health Nursing, Portage, ROVICs and Residential Short Breaks services from April 2019 onwards and for the re-commissioning of OT and CAMHS from April 2019.

2. Background

- 2.1 The scope of the Public Health Nursing service comprises services to children, young people and families:
 - a. 0-5 Health Visiting Services
 - b. 5-19 School Nursing Services
 - c. The National Childhood Measurement Programme
- 2.2. The overall purpose of the Public Health Nursing service is to contribute to the improvement in the health and wellbeing that support all children and young people, to keep children and families safe, and reduce health related risks across the life-course. This is achieved through delivery of mandated (legally-required) universal public health assessments and undertaking public health interventions designed to offer prevention that supports families to adopt healthy lifestyles and identify and address difficulties and issues as early as possible. The service therefore has a significant role to play in early help.
- 2.3. Public Health Nurses work with other agencies to provide additional support to children, young people and families at the earliest opportunity where longer-term intervention is needed. Resources are focused on the most deprived geographical communities and communities of need within Devon to improve their health outcomes while offering a universal service to all children who are residents of Devon, plus those who attend Devon schools and academies. Current service provision and health outcomes for children compare well in Devon to other areas, despite recent national concern about trends in the health and wellbeing of children.
- 2.4. The Government's intention in transferring the responsibility for Public Health Nursing services to the local authority as part of the public health transition arrangements was to ensure that local authorities were able to better align their social and health care responsibilities for children, young people and families.
- 2.5 Portage is funded via Dedicated Schools Grant. The service is a home visiting service for children with complex health, development and learning needs. The relationship between this service and Public Health Nursing (PHN) is critical to successful early intervention. It is therefore proposed that the future delivery of this service is included in the options appraisal and consultation undertaken for PHN.

- 2.6 Rehabilitation Officers for Visually Impaired Children (ROVICs) is solely funded by the Local Authority. It is a support service for children with visual impairment and who are deaf blind. The service forms part of the delivery of the statutory duties of the council to deliver the Care and Support for Deaf Blind children. It has become clear over the course of the last year that there is more to do to join key parts of the education and care systems to meet wider sensory needs of children and to strengthen the impact of this service on wider outcomes. It is therefore proposed that a distinct options process be undertaken for this service to enable any future delivery model to fully address all sensory needs.
- 2.7 Residential Short Breaks form part of a range of services available in the community for disabled children. We have to ensure continuity of care for children for whom residential short breaks is a key part of their Education, Health and Care Plan. Lead commissioning responsibility currently sits with NEW Devon CCG for these services, whereas for all other short breaks services, lead commissioning is with the Local Authority. It is proposed that the LA takes lead commissioner responsibility for the future commissioning of the Residential Short breaks with joint funding from the CCG. If the proposal regarding lead commissioner is accepted it is then proposed that options for the delivery of these services be reviewed to respond to reducing demand and the need for more community based services.
- 2.8 The OT service is achieving good outcomes for children with a fully integrated care and health service as is CAMHS. In order to build on the increased emphasis on early intervention and strong partnership culture which is emerging it is recommended that the Council and CCG continue to jointly contract for these services.

3. Best Start in Life

- 3.1 Formative years can have a significant impact on a young person and adult's later health and wellbeing, and this relates directly to other important health, social care, and wellbeing outcomes such as; physical health e.g. smoking, healthy weight, oral health, mental health and health inequalities, detection and prevention of child safeguarding risks, and reducing the risk of children going in to statutory care proceedings. These can have a life-long negative impact on individuals, their families, and others, and are the cause of significant costs to the NHS and local authority social care, education and other functions.
- 3.2 The Joint Health and Wellbeing Strategy, emphasise the need for children to have the best start in life. This is further supported by the work of the Wider Devon Sustainability and Transformation Plan for Children where Best Start in Life is a priority but also coupled with a need to prevent adverse childhood experiences. Both the Joint Strategic Needs Assessment and the data pack for the STP support these priorities. These will inform our emerging Children and Young Peoples Plan.
- 3.3 Achieving the Best Start in Life for children spans the delivery of a wide range of services. It is vital that the system of services, including Public Health Nursing works effectively with a common purpose to ensure outcomes are improved. This is the first opportunity since the responsibility for the provision of Public Health Nursing transferred from the NHS to local authority to re-design the system.
- 3.4 The continuation of a Public Health Nursing workforce which has the specialist skills and expertise to deliver a high quality service remains a key priority. Parents and children highly value their support which is often available to families at very difficult times. Protecting and enhancing their specialist skills and experience to ensure a workforce which has both the capability and capacity to respond to the needs of children and families in Devon is critical.

4. Services for Children with Additional Needs

- 4.1 The Cabinet decision on 8 March 2017 was for the Local Authority to work jointly with the CCG's to determine a strategy to shape service delivery. This strategy has developed greater clarity on the services to be included in the Community Health and Care Services re-procurement. Therefore there is a need to consider how Portage, ROVICs and Residential Short Breaks are delivered which has led to the proposals to carry out options appraisals.
- 4.2 Portage is closely aligned to Public Health Nursing and it is therefore proposed that part of the Public Health Nursing options appraisal will consider the integration of the two services.
- 4.3 ROVICs compliments a number of other services which are provided to children with sensory needs. It is proposed that an options appraisal be undertaken to consider the formation of an integrated sensory service which jointly caters for all an individual's sensory needs.
- 4.4 The Lead Commissioner for the Residential Short Breaks service is currently NEW Devon CCG. It is proposed that consideration be given to Devon County Council becoming the Lead Commissioner and, if that proposal is approved, an options appraisal be undertaken to consider the future delivery of the Residential Short Breaks service.

5 Financial considerations

- 5.1 The Public Health Nursing service is commissioned by Public Health Devon within the context of a diminishing local authority Public Health Grant. The historic contract value per annum for the Public Health Nursing element is £11.8million.
- 5.2 As with other public health services commissioned by Public Health Devon, spend on the Public Health Nursing service needs to reduce from 2018-19 to enable the reductions in the Public Health Grant to be managed and still comply with Public Health England's funding conditions. Working with the current provider, Virgin Care Limited, we have already put in place mitigations during the lifetime of the contract, and there are efficiencies to be realised from the recent digitisation of Public Health Nursing records and the benefits of "total mobile" working. As a result of this the contract value for the Public Health Nursing element for 2018/19 is £10million.
- 5.3 Public Health Devon has a budget of £10million per annum for 0-19 Public Health Nursing service from April 2019 and beyond. All delivery options would have to be delivered within this budgeted amount.
- 5.4 The delivery of the OT, CAMHS, Portage, ROVICs and Residential Short Breaks services would have to be delivered within the existing budget of £4.2m. This budget includes £750k Dedicated Schools Grant for the Portage Service.

6. Additional considerations

- 6.1 The Clinical Commissioning Group led a recent public engagement exercise on the provision of Children's Community Health and Care Services. The key message from this consultation was the need to ensure that locally there is an integrated system of advice, support, care and treatment for children and families. Much of the feedback reiterated previous engagement outcomes with the priorities being a single point of contact, continuity of care, timely access and joined up children's services for community, health and care.

- 6.2 The Clinical Commissioning Group is to commence (18th October 2017) the re-procurement of Children's Community Health and Care Services for delivery from April 2019 onwards. If Cabinet decide to undertake an options appraisal on future service delivery models, this would result in a removal of the 0-19 Public Health Nursing, Portage, ROVICs and Residential Short Breaks services from the Clinical Commissioning Group led re-procurement of Children's Community Health and Care Services.

7. Legal considerations

- 7.1 The service forms part of the Director of Public Health's responsibilities made under section 6C of the NHS 2006 Act, inserted by section 18 of the 2012 Act.
- 7.2 The requirements of the Children and Families Act 2014 have been considered and taken into account in the formulation of the recommendations set out in report. These services make a significant contribution to the Local Offer for children with SEND. The Local Authority and the Partnership in compliance with the Code of Practice must ensure sufficient delivery of short breaks and community health and care services. Through Education, Health and Care Plans children are able to access these coordinated, integrated and personalised services.
- 7.3 Legal advice will be sought when considering all options within the detailed options appraisal.

8. Environmental impact considerations

- 8.1 While healthy lifestyle behaviours can contribute to environmental goals, no direct environmental impacts are expected from any of the options under consideration.

9. Equality considerations

- 9.1 Where relevant to the decision, the Equality Act 2010 Public Sector Equality Duty requires decision makers to give due regard to the need to:
- eliminate discrimination, harassment, victimisation and any other prohibited conduct;
 - advance equality by encouraging participation, removing disadvantage, taking account of disabilities and meeting people's needs; and
 - Foster good relations between people by tackling prejudice and promoting understanding.
- 9.2 In considering equality impacts we need to take into account age, disability, race/ethnicity (including Gypsies and Travellers), gender and gender identity, religion and belief, sexual orientation, pregnant women/ new and breastfeeding mothers, marriage/civil partnership status, in coming to a decision, a decision maker may also consider other relevant factors such as caring responsibilities, rural isolation or socioeconomic disadvantage.
- 9.3 Equality Impact Assessments have been completed. Members will need to consider the Impact Assessment for the purposes of this item.
- 9.4 No unmanageable consequences for current and future service users have been identified as a result of the commissioning options under consideration. Regardless of the commissioning and procurement arrangements, the protected characteristics will be considered across all elements of the service to ensure that the service reduces harm in those in greatest need.

- 9.5 The guidance for service delivery is set by the National Institute of Clinical Excellence (NICE) and Public Health England (PHE). Equality Analysis has been carried out by the Department for Health on the 'Healthy Child Programme' through regulation:

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/493625/Service_specification_CG4_FINAL_19Jan2016.pdf

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/410685/Equalities_analysis.pdf

10. Risk assessment considerations

- 10.1 A risk assessment was undertaken for consideration for the options considered by Cabinet in March 2017. A risk assessment will be undertaken as part of the options appraisal if Cabinet agree with the recommendations.

11. Public Health Impact

- 11.1 The Joint Health and Wellbeing Strategy is a relevant document, drawing together priorities from the Joint Strategic Needs Assessment. This report, and related documents, emphasise the need for children to have the best start in life.
- 11.2 The prime purpose of the Public Health Grant is to ensure the delivery of the mandated elements of the grant as described in the statutory instrument, and the expectation of local authorities to deliver year-on-year improvements in the health of all children and young people through the delivery of an effective 0-19 Public Health Nursing service.

12. Recommendations: That Cabinet:

- 12.1 Approves the undertaking of an options appraisal for the provision of the 0-19 Public Health Nursing, Portage and ROVICs services from April 2019 onwards.
- 12.2 Approves the undertaking of work for the consideration of Devon County Council becoming the Lead Commissioner for the Residential Short Breaks service and, if the Council becomes the Lead Commissioner, for the undertaking of an options appraisal for the provision of the Residential Short Breaks from April 2019 onwards.
- 12.3 Delegates future decision making powers regarding Portage, ROVICs and Residential Short Breaks to the Chief Officer for Childrens Services.
- 12.4 Approves the joint commissioning of Occupational Therapy (**OT**) and child and adolescent mental health services (**CAMHS**) as part of the Community Health and Care Services with NEW Devon CCG acting as lead commissioner for a new contract to start from April 2019.

13. Timeline

- 13.1 The following is an indicative timeline to undertake the actions relating to 0 -19 Public Health Nursing proposed in 12.1 above.

October 2017	<ul style="list-style-type: none"> • Draft service delivery options developed • Public consultation documents developed
November 2017	<ul style="list-style-type: none"> • 6 week public consultation commences on service delivery options
December 2017	<ul style="list-style-type: none"> • Public Consultation ends
January 2018	<ul style="list-style-type: none"> • Options appraisal completed • Cabinet decision on future service delivery model
February 2018	<ul style="list-style-type: none"> • Commencement of project delivery to secure agreed service delivery model for April 2019

Dr Virginia Pearson CHIEF OFFICER FOR COMMUNITIES, PUBLIC HEALTH, ENVIRONMENT AND PROSPERITY DEVON COUNTY COUNCIL

Jo Olsson CHIEF OFFICER FOR CHILDREN'S SERVICES

Electoral Divisions: All

Cabinet Member for Communities, Public Health, Environment, and Prosperity:
Councillor Roger Croad

Chief Officer for Communities, Public Health, Environment, and Prosperity: Dr Virginia Pearson

Cabinet Member for Children's Services and Schools: Councillor James McInnes

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LOCAL GOVERNMENT ACT 1972: LIST OF BACKGROUND PAPERS

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