

Progress Review of Children's Contracts

Report of the Head of Commissioning for Women and Children (CCG)

1. Introduction

- 1.1 Members of Scrutiny Committee will remember the decision to award two contracts for children's services in December 2018 to Livewell South West for the Plymouth footprint and Children and Family Health Devon for the remainder of the STP footprint. These contract awards followed a robust procurement process that delivered on time to the specification required.
- 1.2 The purpose of this report is to provide an update on the:
- progress Children and Family Health Devon in the delivery of their new contract
 - assurance process through which the CCG holds provider to account for quality, health and well-being of services for children and performance and in turn provide assurance to partners

2. Background

- 2.1 Following a robust procurement process that held children and families at the centre, NHS Devon CCG awarded a contract for children's services in December 2018 to Children and Family Health Devon for services covering the Devon County Council and Torbay Council footprints. The contract was awarded on the following basis:
- Contracts were awarded on a 7 + 3-year basis
 - The contract contains elements of joint commissioning with Local Authorities in Devon namely Occupational Therapy and Child and Adolescent Mental Health Services
 - The contract for Children and Family Health Devon is a prime provider arrangement between Torbay and South Devon NHS Foundation Trust, Devon Partnership Trust, Royal Devon and Exeter NHS Foundation Trust and Northern Devon Healthcare Trust meaning that all contractually related matters are discussed with the prime (Torbay and South Devon NHS Foundation Trust) and the prime is then responsible for holding partner organisations within the contract to account
 - Staff in mental health services within this prime provider arrangement are employed by Devon Partnership Trust. The remainder of the staff are employed by Torbay and South Devon NHS Foundation Trust
 - Performance monitoring commenced on day one of the new contracts as per

previous arrangements ie service line reporting of volumes, activity and performance against national standards. Performance monitoring will, in time, move to measuring outcomes against the Contracting for Outcomes Framework developed during the procurement process.

- 2.2 Services previously commissioned from Virgin Care Ltd were subject to a range of disaggregation with public health nursing services and respite and short breaks services being taken into Devon County Council for delivery by the Authority and services for children with continuing healthcare needs being transferred to Ocean Healthcare Ltd through a separate procurement process. This disaggregation resulted in a complex set of transfer arrangements for staff, data, equipment and operational business. Despite this, and most importantly, no children were adversely affected by these service changes which is as testament to both the processes followed and the leadership and compassion demonstrated throughout the mobilisation phase.

3. Commissioner Assurance Processes

- 3.1 The following arrangements, led by the CCG, are in place for both contracts:
- Regular **informal discussions** with provider regarding performance and quality.
 - **Monthly Contract Assurance Meetings** - this meeting reflects the purpose and scope of the Joint Technical Working Group meetings (JTWG) held with the acute providers. Its purpose is to seek assurance about the services being delivered and to monitor, discuss and take action in respect of all contractual requirements. These meetings are chaired by a Senior Commissioner
 - **Quarterly Contract and Quality Review Meetings** – this meeting is held to consider issues escalated from the monthly Contract Assurance Meetings, although if urgent escalation is required, this happens sooner. This meeting also provides an opportunity to consider the transformation arrangements that each provider has in place and to ensure that the service strategy and specifications are being delivered. These meetings are chaired by the Head of Commissioning for Women and Children
 - Where urgent escalation is required, a **deep dive** is jointly undertaken by commissioners and providers and examples of such arrangements are described later in this paper. These meetings are chaired by the Head of Commissioning for Women and Children
 - **Strategic Review Meetings** – these meetings are held twice a year and are focussed on organisational and strategic development. These meetings are chaired by the Interim Director of Commissioning for Western as the Associate Director with responsibility for the women and children’s portfolio
 - Where appropriate, briefings, such as this are provided to the CCG’s Quality Committee and then to its Governing Body.

4. Provider Progress

- 4.1 The award of a new contract to an entirely new provider partnership has been both innovative and significant for the NHS in Devon with the transfer of a large group of staff and a new set of partnership arrangements coming into operation.
- 4.2 Importantly, the challenges that this new provider would face were clearly identified

through the due diligence phase of the procurement process and were therefore, expected. The key elements of the work that has been done by the new partnership include:

- Staff and children effectively transitioned to new provider arrangements
- Business as usual continued for children and the remainder of the system
- Development of the internal governance structure which was co-designed with key staff across DPT/TSD
- Partnership arrangements between the organisations involved in this contract arrangement strengthen
- Engagement and voice of children, young people and families
- The day one reporting arrangements commenced and continue to improve

4.3 As expected, following the transfer of services there are areas where a joint commissioner and provider focus is needed to deliver the ambition and aspirations described in the procurement strategy for children's health and wellbeing services.

4.4 **Model of delivery:** CAFHD is undertaking a review of the first few months of providing children's health and wellbeing services. The first phase of a consultation as to the new model (described by commissioners in conjunction with a wide range of stakeholders) has recently completed. The Chief Executives of the partners to the contract are now considering feedback and next steps to operational delivery of services, transformation and the capacity needed to deliver this.

4.5 **Performance:** As per the arrangements described above, there have been a number of discussions and improvement plans have been produced for two services in particular, CAMHS and autism. Members of Scrutiny will be well sighted on the challenges within the autism system, particularly for children awaiting an assessment for diagnosis.

4.6 Through the Written Statement of Action improvement process, the CCG committed up to £750k over two years to ensure that these 1800 children are assessed and signposted to other support services and groups. Excellent partnership arrangements involving all of the Children and Family Health Devon service providers, Babcock LDP and Livewell South West are now in place and the first children have been seen.

4.7 With regards to CAMHS, there are concerns about the waiting times for children to be seen. A joint deep dive has been undertaken and improvement plans are in place which will see waiting times shorten for these services.

5 Conclusion

5.1 Following a significant change in provider arrangements for the majority of the Devon footprint, good progress is being made, albeit slower than originally anticipated. Relationships between providers and commissioners are strong but appropriately robust in terms of challenge, performance and expected service improvement. The health, wellbeing and safety of children is known and continually monitored by the provider. Complaints remain low.

5.2 There are appropriate, robust assurance and performance monitoring/management arrangements in place led by the CCG, with well understood escalation processes when required.

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