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To: Health Reform and Public Health Cabinet Committee - 1st May 2018

Subject: Contract Monitoring Report – Primary School Public Health Service

Classification: Unrestricted

Previous Pathway: This is the first committee to consider this report

Future Pathway: None

Electoral Division: All

Summary:

This report provides the Committee with an overview of the Primary School Public Health (PSPHS) contract including monitoring arrangements, performance outcomes and value for money

The service is provided by the Kent Community Health NHS Foundation Trust (KCHFT) and in 2017/18 KCC invested just under £3.4M into the service.

The service delivers a Universal whole school health approach to all primary school aged children, providing Tier 1 interventions to meet specific health needs. It is responsible for delivering the mandated National Child Measurement Programme (NCMP) which weighs and measures all children in Year R and Year 6.

Following a competitive process, a new contract commenced on the 1st April 2017 and following a period of transition, the service has embedded a new model. The new service delivers a number of benefits including a dedicated outreach team, greater visibility, drop-in clinics in schools, and health assessments for pupils in Year R and Year 6.

KCC and KCHFT are continuously working to improve efficiency, ensure value for money and deliver improvements for users through contract management. KCC's effective monitoring arrangements ensure KCHFT delivers the requirements of the contract and performs within expected levels.

Recommendation:

The committee is asked to **comment on and endorse:**

- Progress made to transform services through an effective contract management approach.
- Ongoing activities to deliver statutory obligations, continuous improvement and meet performance expectations.

1. Introduction

- 1.1 Kent County Council (KCC) Public Health has a responsibility to deliver improved health and wellbeing outcomes for Children and Young People in Kent to ensure every child gets the best start in life. School public health services support this by offering a Universal service to all school age children and have been commissioned by KCC since April 2013 (when Public Health responsibilities transferred to the council)
- 1.2 The Children's Social Care and Health Cabinet Committee previously endorsed the proposal to re-commission school health services as part of a wider collaboration with health commissioners to implement 'The Way Ahead, Kent's Emotional Wellbeing Strategy for Children, Young People and Young Adults in Kent'.
- 1.3 Following a competitive tendering process, which was in part collaboration with CCG commissioners, KCC awarded the Primary School Public Health Service (PSPHS) contract to Kent Community Health NHS Foundation Trust (KCHFT) in February 2017. As this was the incumbent provider for most areas in Kent, it meant that KCHFT were able to mobilise quickly and transitioned to the new model over a period of months. This change included a revised staffing structure and the restructuring of teams to separate Primary and Secondary School Health Services.
- 1.4 This report provides the committee with an overview of this contract monitoring arrangements, performance outcomes and value for money.

2. What does the service provide?

- 2.1 The service facilitates a Universal whole-school approach to health for all primary school-aged children in Kent (aged 5-11 years) and supports those who are home schooled or attending private schools.
- 2.2 The service co-produces whole School Public Health Plans with primary school leaders, across all Kent schools (454) which includes data from Year R and Year 6 health assessments to determine current need and plan future provision. The plans are tailored to the needs of the school and set out agreed priorities, planned activity, allocation of resources and work programmes to improve the overall health and wellbeing of children. A calendar of school-specific events and interventions will be agreed as part of the development of the School Public Health plans.
- 2.3 The Universal whole-school health improvement activity includes delivery of the mandated National Child Measurement Programme (NCMP) to all children in Year R and Year 6 in line with national guidance. Families identified through this programme will be contacted by the service, so they can be offered guidance and support.
- 2.4 As well as offering whole-school health, the service provides individual health improvement through offering tier one interventions to individual children and their families, signposting and referring to other services where required. These packages are person centred, flexible and support a preventative approach.
- 2.5 The service also takes a targeted approach to help reduce health inequalities and focuses resources on those schools and populations most in need. For example,

they may provide additional training or workshops for schools identified by the NCMP as having high numbers of children above a healthy weight.

2.6 The PSPHS includes:

Universal offer	Universal offer delivered based on need
Health Assessments at Year R and Year 6	Package of care on: Behaviour management Healthy eating and lifestyle Emotional health and wellbeing Puberty/PHSE Sleep Daytime and night-time wetting and soiling Complex health needs
Vision and hearing screening in Year R	Signpost/referral to additional services
Delivery of NCMP (weighing and measuring) in Year R and Year 6	Signpost/referral to additional services
Drop-in clinics	Attendance at Strategy and Child Protection conferences
School Public Health Plans – delivery of whole-school approach to improve pupil’s health.	

3. Why invest?

3.1 The Primary School Public Health service directly supports the delivery of the KCC Strategic Outcome “*Children and young people in Kent get the best start in life*”, and the supports the following outcomes:

- Keep vulnerable families out of crisis and more children and young people out of KCC care.
- Kent’s communities are resilient and provide strong and safe environments to successfully raise children and young people.
- Children and young people have better physical and mental health.

3.2 The PSPHS fulfils KCC’s mandated duty to deliver the National Child Measurement Programme, providing a systematic approach to identifying those children who are not at a healthy weight, including those who are underweight.

3.3 A key focus of the service is to provide early intervention and preventative services for emotional wellbeing. The PSPHS delivers a universal emotional wellbeing service for all school-aged children as well as access to the more targeted service supporting KCC and partners to meet a key target set by NHS England. This target is to increase the proportion of children and young people with a diagnosable Mental Health condition who are able to access evidence-based treatment. (The definition of “accessing treatment” is any child or young person who has received 2 or more contacts from a provider of evidence-based treatment so would include the school health offer).

4. How is it delivered in Kent?

- 4.1 The service is provided by KCHFT and is delivered by a multi-skilled workforce across four area-based teams within Kent, alongside an outreach team that works with those children and young people who are outside of mainstream education. The workforce includes; area Clinical Managers, Specialist Community School Nurses, School Nurse Assistants and Health Improvement Practitioners.
- 4.2 The service is delivered to all Primary schools including Special schools. Those children who are home-schooled or educated through a pupil referral unit (PRU) may receive support through a dedicated outreach team.
- 4.3 Each school has a named practitioner to ensure that the service has a visible presence across the county and offers services all year round.
- 4.4 Referrals regarding support for individual children are made through the Single Point of Access (SPA) and are triaged by clinicians. The service accepts self-referral as well as referrals made by professional agencies (Early Help, schools, GPs). The service has a new website to make it easier for parents and schools to know where to go for advice. (See Appendix A)
- 4.5 The PSPHS works collaboratively with KCC's Early Help and HeadStart services to ensure that a partnership approach is taken to delivering improved health and wellbeing outcomes for children and young people.

5. What does good look like and how does Kent perform?

5.1 The service specification sets out the outcomes, standards and key performance indicators (KPIs) that need to be delivered to meet the population needs. This is monitored by the Public Health team on a quarterly basis to provide assurance that the contract is performing well, and quality standards are met.

5.2 Key measures of success for this contract are as follows:

- **Provide a Universal offer of support to primary age children, families and schools** Table 1 outlines a selection of service activity that has been developed during the first year of the contract and demonstrates that increasing levels of activity as the service develops further and the school year progresses. Unlike other traditional Public Health services, the PSPHS is focussed on an academic year.

Table 1: Key performance activity for PSPHS

	July - Sept 17	Oct to Dec 17
Number of Year R sent a health questionnaire	-	18,104
No. of new packages of care started - Total	421	484
No. of new packages of care started - Substance misuse	5 or less delivered	
No. of new packages of care started - Sexual health		
No. of new packages of care started - Domestic abuse		
No. of new packages of care started - Behaviour support	62	101
No. of new packages of care started - Tier 1 Enuresis Advice & Information	66	106

No. of new packages of care started - Weight management inc Change for life	39	29
No. of new packages of care started - Emotional Health and wellbeing	102	51
No. of new packages of care started - Parenting	12	47
No. of new packages of care started - Long Term Conditions	84	77
No. of new packages of care started - Continence	54	72

- **Carry out mandated services required by the Public Health Grant**
The NCMP programme is conducted in two waves weighing Year 6 first and Year R so that both intakes have started school. The programme is expected to weigh and measure over 34,000 children and carry out proactive phone calls to parents who have a child identified as outside of the normal range. This is a new feature of the service designed to provide intervention and support.
- **Deliver a number of service improvements compared to previous models.**
Service redesign identified a number of developments that were needed, and the service has worked to deliver against these since April 2017

Improved visibility	The service has a new website and each school is allocated a named school health lead https://www.kentcht.nhs.uk/service/school-health/
Ease of access	The service now has a single point of access and offers extended opening hours along with a central telephone and email address. nem-tr.kentchildrenandyoungpeoplehealthservices@nhs.net
Improved packages of care and focus on priority areas	The service now offers 1-1 packages of care and has an increased focus on priority areas such as emotional wellbeing and healthy weight
Proactive phone calls	Pro-active phone calls are made to parents who have a child outside of the healthy weight range. Parents are offered additional support and referred where appropriate to additional services.
Introduction of Lancaster screening tool for Year R and Year 6 pupils	The service has introduced an evidence-based screening tool which allows for early identification of needs on an individual and population basis. Parents of Year R children are asked to complete the questionnaires and Year 6 children and young people will complete the questionnaires independently

- **Provide a responsive service that meets user needs.**
The service sends out health surveys to parents to support effective planning of services, meet user needs and listen to the voice of the child. The number of surveys completed is higher than in the previous contract and supports an intelligence led approach.

The service also carries out satisfaction surveys and reports 96% overall satisfaction with the service. This satisfaction metric is calculated using feedback from child and parent carer surveys and includes feedback on a

number of indicators such as information, communication, if they felt listened to and involvement in decisions.

- **Delivers improved outcomes for Children and Young people**

The service covers a population of 122,000 across Kent and the in addition to service data, the impact of these services can be illustrated by using case studies. An example can be found in Appendix B.

6. Service Costs

- 6.1 The contract value for 2018/19 is £3,345,154 which offers a saving of just under £400,000 compared to 2017/18.
- 6.2 Through the procurement process a total saving of £1.6M was made across the 5 years of the contract compared to the previous model offering excellent value for money.
- 6.3 The Health Reform and Public Health Cabinet Committee has previously agreed enter into a Partnership arrangement with Kent Community Health NHS Foundation Trust. This collaborative approach supports KCC to ensure an efficient and effective service that offers value for money.

7. Delivering ongoing service improvements

- 7.1 Continuous improvement is an important component of the Primary School Public Health Service. Since the start of the service, improvements have included:
 - Performance reporting moving from an academic year focus to all year reporting model. This has changed how data is captured and recorded by KCHFT with a greater emphasis on service user access not just being available in term time only.
 - Access to website and single point of referral (SPA) making self-referral easier through a single number contact point.
 - Future actions will be to ensure that more children and young people benefit from the service resulting in improved outcomes. This aim is to increase visibility enabling quicker access to the relevant level of support whether universal or targeted.

8. Risks

- 8.1 The biggest risks to the programme are;
 - A lack of support and engagement from schools: School support is crucial in facilitating access and communication with parents and pupils. To ensure schools are supportive KCHFT is further developing strong relationships and formalising shared expectations with Partnership Agreements.
 - A lack of engagement from parents following the Year R health assessment: This health assessment is completed online by parents. To ensure good completion rates KCHFT are reviewing how they communicate with parents and how they promote the benefits of the assessment.

- Despite NCMP being a statutory function and a key part of identifying children who are overweight, some parents view NCMP in a negative light: The service follows national guidelines on how to word letters to parents which have been widely tested and approved by Public Health England as best practice. In addition, KCHFT are conducting focus groups with parents to ensure information provided alongside the letter and proactive phone calls are as helpful as possible.

9. Conclusions

- 9.1 The Service is close to completing its first year of delivery and progress has been strong. Where there have been challenges, such as how to ensure parents complete the online Year R health assessments, a clear set of actions has been agreed to improve relationships and develop new structures.
- 9.2 Future actions will see a service that is more visible with self-management strategies being put in place to ensure that a child/young person and family is able to receive the right level of support with a 'no wrong door' approach.
- 9.3 Commissioners continue to work with the service to monitor performance and work together to identify and deliver improvement opportunities.
- 9.4 KCHFT are working collaboratively with Early Help, HeadStart and NHS Commissioners to ensure that services and pathways for school health continue to be embedded and focused on improving outcomes.

Recommendations

The committee is asked to **comment on and endorse:**

- Progress made to transform services through an effective contract management approach
- Ongoing activities to deliver statutory obligations, continuous improvement and meet performance expectations

Background Documents:

'The Way Ahead' - Kent's Emotional Wellbeing Strategy for children, young people and young adults in Kent'

- http://www.kent.gov.uk/_data/assets/pdf_file/0003/46821/Emotional-Wellbeing-Strategy-part-1-strategic-framework.pdf

Appendix A: KCHFT Primary School Public Health Service referral routes

School Health

We are a team of school nurses who work with children, young people and families in Kent. You do not have to be in school to use this service.

Contact us

We have school health teams across Kent. Referring to one of our teams is easy:

0300 123 4496

nem-tr.kentchildrenandyoungpeoplehealthservices@nhs.net

[Online referral form](#)

You'll find contact details of our team co-ordinators [here](#).

Our teams are available from 8am until 6pm, Monday to Friday, including during school holidays.

School Health

Health assessment for primary school-age

Health assessments for secondary school-age

National Child Measurement Programme

School Health team contacts

Support for schools

Vision and hearing screening

Appendix B: Case Study

Background Context	<p>Health Assessment alert for year R child – parent had expressed worries regarding her daughter’s emotional health.</p>
Intervention Action Taken	<p>School health contacted the child’s mother- history of domestic abuse identified. daughter emotionally affected due to the breakdown of parent’s relationship. Child seen in school for further assessment. Information shared with class teacher/SENCO – previously not aware of home situation. Mother given advice about children’s services – concerns over father manipulating mother/daughter relationship.</p>
Results Outcome Impact	<p>School completed referral to Early help for additional support for both mother and daughter. School monitoring situation at home. SATEDA worker continuing to support mother with Legal advice School supporting child through play therapy to express worries/concerns Child’s emotional health needs being supported in school.</p>
Lessons Learned	<p>The child’s emotional health needs are now being met with support from school. Health Assessment allowed an opportunity for multi professional working to support the needs of a child.</p>

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