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Date: 24 May 2013

Dear Member of the Health and Wellbeing Board

HEALTH AND WELLBEING BOARD - WEDNESDAY, 29 MAY 2013

Please find attached a report on Local Children Services Arrangements for consideration at the meeting of the Health and Wellbeing Board to held on Wednesday, 29 May 2013. This report was unavailable when the agenda was printed.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Peter Sass', is written over a light blue horizontal line.

Peter Sass
Head of Democratic Services

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From: Roger Gough, Cabinet Member for Education and Health Reform
Andrew Ireland, Corporate Director, Families and Social Care

To: Health and Wellbeing Board – 29th May, 2013

Subject: **LOCAL CHILDREN SERVICES ARRANGEMENT**

Classification: Unrestricted

Summary: This paper informs Members about the proposed local children services arrangement to support the county Children and Young People's Joint Commissioning Board at the Clinical Commissioning Group Health and Wellbeing Boards level rather than retaining a district-based arrangement.

The Health and Wellbeing Board is asked to note that the Cabinet Member for Specialist Children's Services will take the decision to approve the local children services arrangements, after taking into account the views put forward by Members of the Board.

FOR COMMENT

1. Introduction

- (1) This report sets out proposed local arrangements for the Kent Children and Young People's Joint Commissioning Board. The Joint Commissioning Board functions as the strategic commissioning partnership body with the aim of improving outcomes for all children and young people.
- (2) The Joint Commissioning Board has had children services local partnership arrangement under consideration since May 2012. A central issue for the Board has been the need to decide on the kind of local collaborative arrangement which will help with joined up commissioning and integrated working, with a clear focus on improving health, education and social care outcomes for all children and young people.
- (3) It is the intention of the county council to use the opportunity now provided by having seven local Health and Wellbeing Boards operating at Clinical Commissioning Groups (CCG) level. This is in response to the having to work in a context of joined up commissioning and integrated service delivery, with a view to a more efficient use of resources and focusing on actions that will help achieve better outcomes for all children, with minimum duplication.
- (4) In the light of the central role of the Health and Wellbeing Boards (county and local levels), there is now a compelling case, for the reasons set out in this report, to organise local children services arrangement at the CCG Health and Wellbeing level, to ensure more effective joint commissioning with the health service and other key partners.
- (5) The Joint Commissioning Board will be discussing a report on the proposal at its meeting on 30 May 2013.
- (6) The purpose of this report is to inform Health and Wellbeing Board Members and to provide them with the opportunity to comment on the proposal before

the Cabinet Member for Specialist Children's Services takes the formal decision.

2. Background

- (1) The strategic review of the former Kent Children's Trust Board arrangements culminated in a report to KCC Cabinet on 19 September 2011. Cabinet approved the recommendation to "cease the Kent Children's Trust Board and replace it with a Children and Young People's Joint Commissioning Board". The decision was made under Kent Children's Trust Strategic Review - Key Decision number 10/01528.
- (2) Local arrangements for children's partnership have been under consideration since May 2012. The Joint Commissioning Board conducted a 12 week consultation exercise on proposals regarding local partnership arrangements during summer of 2012. The feedback on the consultation was reported to the Joint Commissioning Board on 29 November 2012. In the context of changing policy environment, clarification of the roles and responsibilities of local partnership arrangement was welcomed. The majority of respondents preferred a form of partnership configuration which is district-based.
- (3) The different contributions of Local Children's Trust Boards over the years is acknowledged, as is the intelligence and knowledge of how local services are delivered. Consequently, a means for tapping into the voice of local players would be reflected in moving forward with the proposal.

3. Policy context

- (1) Section 10 of the Children Act 2004 contains the main provision for the Children's Trust arrangements. Section 10 is essentially about the 'duty to cooperate' placed on local authorities and named statutory partners (Schools and colleges, Early Years and Childcare, Health Services, Police, Adult social care, Housing authorities, British Transport Police, Prison Service, Probation Service, The secure estate for children, Youth Offending Teams, The United Kingdom Border Agency, Children and Family Court Advisory and Support Service, Armed Services, Voluntary and private sectors and Faith Organisation).
- (2) The prescriptive statutory guidance governing the arrangements was withdrawn on 31 October 2010. Nonetheless, each local authority with responsibilities for children's services must still have a Children's Trust Board, but the manner in which it operates, what it is called and, how it works with the bodies such as the Health Wellbeing Board and the Police and Crime Commissioner is a matter for local determination. As a result, and as mentioned under paragraph 2.1 above, the Children and Young People's Joint Commissioning Board has replaced the former Kent Children's Trust.
- (2) More recently, the 'Working Together to Safeguard Children- A guide to inter-agency working to safeguard and promote the welfare of children' (March 2013), came into effect as of 15 April 2013. It is a requirement for this statutory guidance to be followed by "all the relevant persons and agencies including local authority Chief Executives, Directors of Children's Services, Local Safeguarding Children Board Chairs and senior managers from health

services, adult services, the police, Academy Trusts, education and the voluntary and community sector”.

- (3) The Kent Health and Wellbeing Board was established under provisions of section 194 of the Health and Social Care Act 2012. It formally came into being on 1 April 2013. It is the duty of the Health and Wellbeing Board to provide system-wide leadership for improving the health and wellbeing of the population of Kent.
- (4) The Joint Commissioning Board has also recently asked for the development of ‘Every Day Matters – Kent’s Multi-agency Strategic Plan for Children and Young People 2013-2016’. This is an overarching vision document, informed by the principles of ‘Working Together to Safeguard Children’ (2013).

4. Proposed local arrangement

- (1) The proposal is that the local children services arrangement should move to a CCG-level basis. It is recognised that an appropriate mechanism for feeding district-level views into the CCG-level arrangements will be required. It is also accepted that there is no single ideal solution upon which to build a local children services arrangement. However, the establishment of local Health and Wellbeing Boards which bring together key organisations to consider joined up commissioning and integrated service delivery, provide a workable platform for reshaping integrated service delivery that can and better address gaps in services and demonstrate positive benefits.
- (2) The proposed local children services arrangement has been influenced by a number of reasons, including:
 - the need to deliver more effective joint commissioning which helps ‘universal’ and ‘targeted’ children services to address gaps in vital provision, by making sure that all the available resources for children’s services are fully utilised;
 - a strong case for obtaining the best out of service integration, especially where this would have the desired impact and add considerable value;
 - making sure that local services are delivered in a way that improves the experience and outcomes for people;
 - the need to respond to the pressure on public sector resources by seeking more efficient use of resources
 - stretched management capacity, especially for the NHS.

5. Next Steps

- (1) The Joint Commissioning Board, the Kent Health and Wellbeing Board and CCG-level Health and Wellbeing Boards also have to consider the proposal. This will enable details regarding the terms of reference including membership to be agreed.
- (2) The Chairs of Local Children’s Trust Boards should be informed about the proposal pending the formal decision by the Cabinet Member for Specialist Children’s Services. This should acknowledge the contribution and the role played by the Local Children’s Trust Boards, in particular, that of the Chairs.

- (3) The aim is to have the detailed working arrangements to be signed-off by the Joint Commissioning Board and local Health and Wellbeing Boards by no later than July 2013. This will confirm, amongst other things, organisation of meetings which enable focusing on children and education matters as well as the representation of schools and head teachers.
- (4) The Cabinet Member for Specialist Children's Services would then take the decision as soon as due process allows.

6. Recommendations

The Kent Health and Wellbeing Board is asked to:

- (1) **COMMENT** on the proposal to move to a CCG-level arrangement rather than retaining the district-based structure.
- (2) **NOTE** that the Cabinet Member for Specialist Children's Services will take the decision to approve the local children services arrangement, after taking into account the views put forward by Members of the Committee.

Background documents:

Working Together to Safeguard Children - A guide to inter-agency working to safeguard and promote the welfare of children, Department for Education, March 2013.

Every Day Matters – Kent's Multi-agency Strategic Plan for Children and Young People 2013-2016(Draft).

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