From: Andrew Ireland, Corporate Director, Families and Social

Care

To: Jenny Whittle, Cabinet Member for Specialist Children's

**Services** 

Decision No: 13/00051

Subject: Local Children Services Arrangement

Classification: Unrestricted

**Future Pathway of Paper:** 

**Electoral Division:** All

**Summary**: This paper set outs proposals regarding the 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.

## Recommendation(s):

That the Cabinet Member for Specialist Children's Services agree that the Local Children Services Arrangement should operate on a CCG-level Health and Wellbeing Board basis.

### 1. Introduction

- 1.1 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.
- 1.2 The Joint Commissioning Board has had children services local partnership arrangements 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.
- 1.3 It proposed that the County Council should use the opportunity provided by having seven local Health and Wellbeing Boards operating, at Clinical Commissioning Groups (CCG) level instead (Appendix 1) of retaining a district-based arrangement. This is in response to the need for 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.
- 1.4 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.
- 1.5 The Kent Health and Wellbeing Board considered the proposal on 29 May 2013. In addition, the Joint Commissioning Board discussed a report on the proposal at its meeting on 30 May 2013.
- 1.6 The purpose of this report is to ask the Cabinet Committee for Specialist Children's Services take the decision.

# 2. Financial Implications

2.1 The recommendations will not have any direct impact on the capital or revenue budgets of the Authority. The indirect impact should be through improved joint commissioning, services delivering better outcomes for Kent children and value for money

# 3. Bold Steps for Kent and Policy Framework

3.1 The proposals support the commitment within 'Bold Steps' and 'Facing the Challenge' to transform how we procure and commission services to support integrated models of service delivery and the development of a consistent single process for all contracting and procurement for children's services.

## 3.2 Policy Context:

- a) Section10 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).
  - b) 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.
  - c) 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".
  - d) 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.

e) The Joint Commissioning Board and the Health and Wellbeing Board have agreed '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. Detail

# 4.1 Background:

- a) 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.
- b) 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.
- c) The different contributions of Local Children's Trust Boards over the years have been acknowledged, as is the intelligence and knowledge of how local services are delivered.

#### 4.2 Proposed local arrangement:

- a) The proposal is that local children services arrangement should move to a CCG-level basis. The appropriate mechanism for feeding district- level views into the CCG-level arrangements will form part the new arrangement and this will be determined locally. It is also accepted that there is no single ideal solution upon which to build 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.
- b) 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. Conclusions

- 5.1 The Joint Commissioning Board, Kent Health and Wellbeing Board, CCG-level Health and Wellbeing Boards have considered the proposals. The flexible nature of the terms of reference does enable particular important local factors to be accommodated.
- 5.2 The Chairs of Local Children's Trust Boards have been informed about the proposals. The notification of intent acknowledged the contribution and the role played by the Local Children's Trust Boards, in particular, that of the Chairs.
- 5.3 The decision will pave the way for the new working arrangement to be put into effect

### 6. Recommendation(s)

### Recommendation(s):

The Cabinet Member for Specialist Children's Services is asked to agree that the Local Children Services Arrangement should operate on a CCG-level Health and Wellbeing Board basis.

#### 7. Contact details

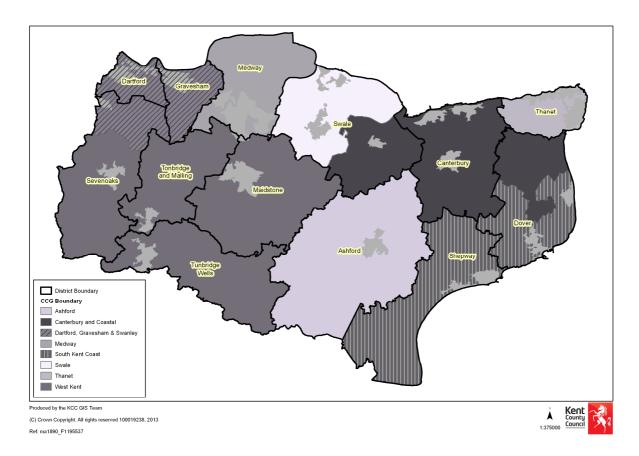
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## 7. Background documents:

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.



Map showing proposed seven local Health and Wellbeing Boards operating at Clinical Commissioning Groups (CCG) level.