From: Graham Gibbens, Cabinet Member for Adult Social Care and

Public Health

Andrew Scott Clark, Interim Director of Public Health

To: Children's Social Care and Public Health Cabinet Committee

20<sup>th</sup> January 2015

Subject: Public Health Services for Children and Young People

Classification: Unrestricted

Past pathway: This is the first committee by which this issue will be considered.

Future pathway: Cabinet Member Decision

Electoral Division: All

## Summary

This paper outlines the opportunity to develop a transformed and integrated approach to improving outcomes for children and young people. It recommends that the current contracts for School Public Health Services are extended whilst the review of the Healthy Child Programme and 0-25 transformation works continue. The transfer of the Health Visiting service including the Family Nurse Partnership offers a great opportunity to drive a transformed integrated approach through delivery of the Kent Healthy Child Programme across the system with Health and Wellbeing Board partners.

#### Recommendation

Children's Social Care and Health Cabinet Committee is asked to comment and either endorse or make recommendations to the Cabinet Member for Adult Social Care and Public Health on the proposed decision to extend the contracts with Kent Community Health Trust and with Medway Foundation Trust. This will allow the review of the Healthy Child Programme and 0 – 25 transformation work to inform the future procurement of these services in line with the Healthy Child Programme and an integrated system.

#### 1 Introduction

- 1.1 This paper presents further development on the planning and implementation of Public Health Services for Children and Young People, aged 0 -19. It follows the paper presented to the Children's Social Care and Public Health Cabinet on the 23<sup>rd</sup> September 2014.
- 1.2 The paper proposes that a decision is taken to extend the current contract with Kent Community Health Trust (KCHT) and with Medway NHS Foundation Trust (MFT) to allow for a Public Health transformation programme to deliver innovation, quality and further value from commissioned services.

1.3 Whilst the contracts are extended there will three pieces of work. This will be the development of a new integrated model, development of the models of service delivery and a rigorous focus on contract monitoring.

## 2 Background

- 2.1 On 23<sup>rd</sup> September 2014 Cabinet Committee endorsed the decision to extend the contracts with Kent Community Health Trust and Medway Foundation Trust for 6 months. Both organisations are current providers of the School Public Health Service. The extensions mean existing contracts now end in September 2015.
- 2.2 Rigorous contract monitoring of the providers is in place as is scrutiny on adherence to the key requirements of the service specification and improvements to the service.
- 2.3 Contract extension will also allow for the outcome of the Children's' Health and Wellbeing Board's review of the Healthy Child Programme (0 19) to influence the final model and the procurement of the new integrated service model for children and young people.
- 2.4 The Healthy Child Programme provides an outcome based framework for services and support, outlining key actions and interventions that can be made in particular by Health visiting, GPs and the wider early help workforce. It recognises the receptiveness of families is unusual at this time and there is therefore a window of opportunity to intervene. The review of the programme will ensure that opportunities for integration and of provision are maximised and children, young people and their families receive integrated services.

# 3 Transforming Kent Public Health Services for Children and Young People (0-19)

- 3.1 Since the Committee meeting on 23rd September 2014 a number of the reviews in relation to the Healthy Chid Programme have begun including a significant maternity service review. The recommendations of these pieces of work will be crucial in the modelling of integrated public health services for children and young people.
- 3.2 The recommended standard for the delivery of the Healthy Child Programme depends on services for children and families being fully integrated. If effectively implemented, the Healthy Child Programme should lead to delivery of the following outcomes:
  - Strong parent-child attachment and positive parenting, resulting in better social and emotional well-being in children
  - Care that helps to keep children healthy and safe
  - Prevention of serious communicable diseases
  - Improve readiness for school and learning
  - Provide early recognition of growth disorders and risk factors for obesity
  - Early detection of developmental delay, abnormalities and ill health

A core element described in the programme is the delivery of service provision through a Health Child Programme Team. This team can be multiple providers or a partnership arrangement that can involve a number of agencies.

- 3.3 There will be further opportunity to develop the Kent Health Child Programme presents as the commissioning of Health Visiting services, including the Family Nurse Partnership service, is transferred to the Local Authority in October 2015. Once the safe transition of the contract from NHS England has occurred a period of scrutiny will allow opportunity to develop an integrated model that enables children and young people in Kent to get the best start in life.
- 3.4 Deferring the procurement of the School Public Health Service will bring opportunity to design and deliver a comprehensive and integrated service for children and young people aged 0 -19, in line with the Healthy Child Programme. This will allow opportunity for integration of the inherited Health Visiting service and the School Public Health service. Service re-design will be delivered through extensive stakeholder consultation and engagement, incorporating the 0-25 transformation programme across the local authority and Health and Wellbeing Board partners.
- 3.5 A recent review of learning within the Public Health team has concluded that the market for Public Health services remains immature and commissioning intentions should consider this. Delaying the procurement of the School Public Health service will allow for a programme of pro-active market creation and engagement to take place working with current and potential providers of services for children and young people.
- 3.6 It is recommended that the contracts with KCHT and MTW are extended to ensure continuity of service whilst transformation work takes place, including the review of the Health Child Programme and resultant modelling. A key decision will be required to extend the contracts further.

## 4 Financial Implications

The current annual value of the two contracts is £5,375,273

#### 5 Conclusions

- 5.1 This paper identifies the opportunities which can be realised through deferring procurement of the School Public Health Service in order to pursue significant market development and integrated service design to develop public health services for children and young people, aged 0 -19. This work will be delivered alongside continued robust contract monitoring with an extension of existing contracts for School Public Health.
- 5.2 The transfer of the Health Visiting service offers a great opportunity to drive a transformed integrated approach to delivery of the Healthy Child Programme. It aligns with key developments across KCC including the development of the KCC outcomes framework and the 0-25 transformation programme and also offers huge scope to drive integration across wider partners of the Health and Wellbeing

#### 6 Recommendations

6.1 The Children's Social Care and Public Health Cabinet Committee is asked to comment and either endorse or make recommendations to the

Cabinet Member for Adult Social Care and Public Health on the proposed decision to extend the contracts with Kent Community Health Trust and with Medway Foundation Trust School Public Health Services to allow transformation and integration work to influence the future procurement of services that align with the Healthy Child Programme.

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### **Background Papers**

School Public Health – 23<sup>rd</sup> September Children's Social Care and Health Cabinet Committee

A Model for School Public Health – 9<sup>th</sup> July Children's Social Care and Health Cabinet Committee