

14<sup>th</sup> September 2017

Agenda Item:2

# **Children's Trust Executive Sponsor: Kate Allen**

# COMMUNITY CHILDREN AND YOUNG PEOPLE'S HEALTH SERVICES

# Purpose of the Report

1. This report updates the Children's Trust Executive on developments in the community children and young people's health services transformation programme.

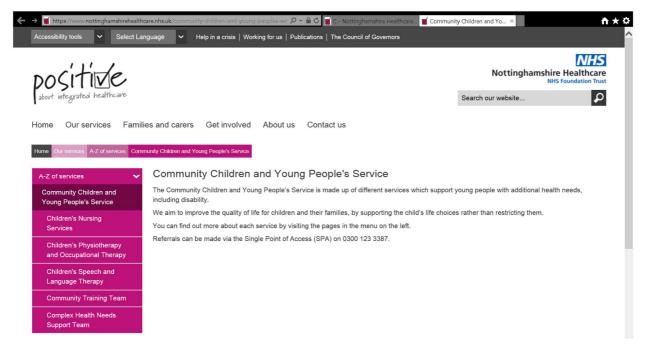
# Information and Advice

- 2. The vision for the original Integrated Community Children and Young People's Health Programme was to enable children and young people with acute and additional health needs, including disability and complex needs, to have their health needs met wherever they are. The programme was borne from a concern that a lack of co-ordinated support for children and young people with complex needs and disability and their families was leading to inequity of access and potential safeguarding risks. There were multiple providers and teams working to different processes, policies and procedures leading to duplication and lack of efficiency and effectiveness, which was having a negative impact on children, young people and families.
- 3. Nottinghamshire County and Nottingham City Clinical Commissioning Groups (CCGs) worked together to develop a new, integrated service for children and young people with additional needs and disabilities. The aim of the work was to secure high quality, cost and clinically effective services with consistent staffing, and satisfied and highly motivated teams ensuring the right skills in the right place at the right time, every time.
- 4. Included within the programme were the following community health services for children with additional needs:
  - Physiotherapy;
  - Speech and language therapy;
  - Occupational therapy;
  - Special school and community nursing, including end of life care;
  - Phlebotomy.
- 5. Following a full co-production and procurement of a 'Families' Statement of Expectations' (attached as Appendix A) which set the standards for high

quality, person-centred care, a contract was awarded to Nottinghamshire Healthcare NHS Foundation Trust, commencing from April 2016. The contract includes an outcomes framework, which incentivises the provider for meeting the outcomes in the Families Statement of Expectations, by providing clinically effective, efficient services which offer excellent experiences for patients.

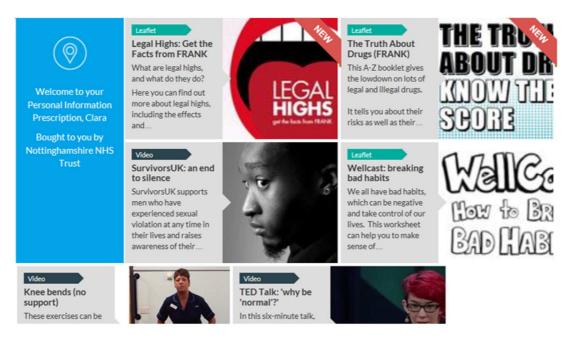
6. Following a consultation process, a name for the new service was agreed. The Community Children and Young People's Service (CCYPS) provides integrated care and health care plans across a range of clinical specialties making accessing support and receiving care simpler and easier for families, many of whom have children with very complex needs. All of the services are accessible via a new single point of access.

#### **Provider Trust Website**



- 7. Community nurses, some of whom were previously based in settings such as social care facilities and special schools, are now based in community teams ensuring that clinical care follows the child and is based on needs, rather than the setting the child attends. The community training team continue to provide training to staff and families supporting children with complex needs to ensure their day to day needs are met.
- 8. The service uses 'Recap', a web-based platform providing bespoke clinical advice to families, in the form of an individual clinical prescription, using digital technologies to improve the experience of services and to improve self care.

## **Recap- web-based platform**



- 9. There have been improvements in the quality of care and patient experience since the new service was launched. For example: all children now have a plan to reduce avoidable admissions; most children receive support within 8 weeks and waiting times are reduced; over 75% of children have an integrated electronic care plan, and this is increasing, and 100% of families are involved in agreeing the outcomes and interventions for their child. There are fewer complaints since the new, integrated service was launched.
- 10. There remain challenges for the service; in particular waiting times for some speech and language therapy services remain too long, although these are now reducing. The integration of staff from different organisations into locality based teams all using a single recording system has been challenging, and significant training and staff development has been required to support this. Furthermore, the financial challenges facing CCGs require all services to deliver efficiencies, including CCYPS. Proposed changes to the service to deliver these efficiencies are being fully costed and impact assessed.
- 11. The service has a number of priorities for the next year, including strengthening transitions from child to adult services, continuing to reduce waiting times for speech and language therapy and implementing service changes to deliver efficiencies whilst minimising negative impacts on clinical effectiveness and patient experience.

# **RECOMMENDATION/S**

1) It is recommended that the Executive note the content of the report, and agree to receive a further update on the service in 2018.

#### Nicole Chavaudra Senior Public Health and Commissioning Manager, Children's Integrated Commissioning Hub

For any enquiries about this report please contact: nicole.chavaudra@nottscc.gov.uk

## **Background Papers**

None.

## **Appendix A: Families' Statement of Expectations**

Our values are...

- Respect
- Collaboration
- Continual improvement

1. "No decision about me without me".

We are consulted and listened to, heard and treated with respect as experts on our/our own child's condition and have our views taken into account at all times.

2. Access to information and supplies.

We can easily get information, advice and guidance, and the services and supplies that we need, when we need them, so that our family can enjoy the best possible health and fulfilling lives. This should enable and support our roles, lifestyle choices and aspirations.

## 3. Whole systems working.

There is collaborative, joined up and timely planning and service delivery, with all parts working as a whole across all organisations and agencies involved in every aspect of our children's care.

4. Child/young person centred care.

Every child/young person is treated as an individual.

5. Communication and record sharing.

There is timely communication and shared documentation including core essential information about our children, their condition and their support between all those who need to be involved.

6. Capacity, competency and empathy.

We are confident that there are enough staff, who have the right knowledge, skills and expertise for what they are there to do, and they demonstrate this by empathy and understanding in all contacts.

## 7. Transition.

Children/young people are supported to achieve responsibility for themselves as adults and the family is supported during this period of transition to adulthood and reduced dependence on the family.

#### 8. Continual improvement.

We can see that everyone involved in our children's care is committed to continually improving what they do.

## 9. Care environment.

Children/young people are seen in age appropriate environments furnished and equipped to meet their needs, taking into account chronological and developmental age.

10. Safety.\*

At all times our children are protected from harm.

\*Please note this is wider than safeguarding - consider points such as moving and handling training for parents, safe use of equipment etc.