



18 July 2013

Agenda Item: 4

**REPORT OF THE DIRECTOR OF PUBLIC HEALTH AND THE CORPORATE
DIRECTOR FOR CHILDREN, FAMILIES AND CULTURAL SERVICES**

**INTEGRATED COMMISSIONING ARRANGEMENTS FOR CHILDREN'S
HEALTH SERVICES**

Purpose of the Report

1. To provide information on the integrated commissioning arrangements for children's health services in Nottinghamshire, including the establishment of the Nottinghamshire Integrated Commissioning Hub and the governance arrangements for the integrated commissioning of health services for children, young people and families, which were approved by the Children and Young People's Committee on 10 June 2013.

Information and Advice

National and Local Policy Context

2. Commissioning of high quality, effective, integrated children's and maternity health services continues to be a national and local priority, with recognition that commissioning processes for these services are different from those for adults.
3. As a result of the Health and Social Care Act, from 1 April 2013, health services for children in Nottinghamshire are commissioned by an increased number of organisations including six Clinical Commissioning Groups (CCGs), Nottinghamshire County Council (NCC), NHS England Nottinghamshire-Derbyshire Area Team (AT), NHS England South Yorkshire and Bassetlaw AT, Leicestershire-Lincolnshire AT and Public Health England. There is a serious risk of fragmentation of service provision for children.
4. The table overleaf highlights the key national changes in relation to commissioning of services that impact on children and families.
5. Nottingham North and East (NNE) CCG acts as the lead CCG for children and young people in so much as it represents Nottinghamshire County CCGs on the Children's Trust Board and on integrated commissioning groups (ICGs). NNE CCG has been involved in service reviews and scoping projects and leads on the County Health Partnerships contract, which includes a range of children's community services. Bassetlaw CCG is represented on the Children's Trust Board and integrated commissioning groups by the Head of Partnership Commissioning, who is active in commissioning of children's services.

Table 1: Commissioners of maternity and children’s health services from 1 April 2013

Topic area/service	Lead Commissioner	Length of time as lead commissioner (if short term)
Maternity Services	CCGs	
Health Visiting	NHS England Area Teams	2013- 2015
Family Nurse Partnership	NHS England Area Teams	2013- 2015
Immunisation and Vaccination, screening	NHS England Area Teams	
School Nursing	Public Health, NCC	
National Child Measurement Programme (statutory duty)	Public Health, NCC	
Child and Adolescent Mental Health Services (CAMHS)	CCGs	
Services for children with disabilities and complex needs	CCGs	
Paediatric services	CCGs	
Substance use services	Public Health, NCC	
Sexual Health Services (statutory duty)	Public Health, NCC	
Termination of pregnancy services	CCGs	
Population level interventions to reduce and prevent birth defects (with Public Health England)	Public Health, NCC	

Duties and legislation

6. The Children and Families Bill has now passed its second reading in the House of Commons and committee scrutiny of the Bill is beginning. On 5 March 2013, it was announced that the Bill will be amended to place a *legal duty* on CCGs to secure health services that are specified in Education, Health and Care Plans for children with disabilities and special educational needs (SEN). This provides important clarity and reassurance to families in addition to the duties already in the Bill around co-operation and joint commissioning.
7. Public Health within local authorities has a statutory duty to commission a number of services which relate to children and young people including sexual health services and the National Childhood Measurement Programme.

Local Response

8. Following discussions with CCG Chief Officers, senior officers of Nottinghamshire County Council Children, Families and Cultural Services (CFCS) Department, the NHS England Area Teams covering Nottinghamshire and the Children’s Trust Board, it was agreed to scope and develop an integrated commissioning function (hub) for children’s health services in the County.

9. Prior to April 2013, in the NHS Nottinghamshire County Primary Care Trust (PCT) area, there was no dedicated capacity for commissioning children's health services. Elements of work were led by Public Health, but following the move of Public Health into the Local Authority, this role has changed. Children's services commissioning in Bassetlaw PCT has been part of the role of the Head of Partnership Commissioning who is retained in Bassetlaw CCG.
10. There is recognition that CCGs have limited capacity to take on the commissioning of children's health services. Children's services are complex and interrelated, there is a need for effective working across health, social care and education services and in order to fulfil a number of statutory duties and there are many small, county-wide specialist community NHS and non-NHS services. There is clearly a need for effective joint working across a number of organisations, with sufficient capacity to ensure effective commissioning of services.
11. The rationale for establishing an Integrated Commissioning Hub is summarised below.

Table 2: Rationale for integrated commissioning for children's service

<ul style="list-style-type: none"> ▪ Whole system approach to planning and commissioning ▪ Maximise the quality of services for children and their families ▪ Focus on outcomes ▪ Reduce silo working and duplication ▪ Clear processes for engaging with children and families to inform commissioning ▪ Opportunity to integrate approaches to prevention ▪ Added value, greater savings, best use of available resources ▪ Clearer accountability ▪ Clearer links with recommendations from the Joint Strategic Needs Assessment (JSNA) and other in depth needs assessments to inform commissioning decisions ▪ In line with the Government's focus on better health outcomes for children.

12. Following discussions referred to above, it was agreed to apply for non-recurrent funding to support the scoping and development of an Integrated Commissioning Hub, to be hosted in the County Council's CFCS Department. CCGs, represented by NNE CCG, NHS England Area Teams and the Local Authority, Nottinghamshire County Council, have agreed this approach.
13. The Integrated Commissioning Hub proposals were presented to the Health and Wellbeing Board on 17 April 2013 as part of the paper on the Health of Vulnerable Children and Young People in Nottinghamshire. Proposals were supported as a positive development. In addition, development of the Hub was approved by the Children and Young People's Committee on 10 June 2013, together with recruitment to identified posts.

Vision for the Integrated Commissioning Hub

14. The Children's Trust Board ambition is reflected in the agreed vision for the Integrated Commissioning Hub:

'We want Nottinghamshire to be a place where children are safe, healthy and happy, where everyone enjoys a good quality of life and where everyone can achieve their potential.'

Through integrated commissioning, we will work together with children, young people and their families and use a whole systems approach to improve the planning and commissioning of services for children, young people and their families.'

Model for the Integrated Commissioning Hub

15. The Hub will be a single point of accountability/co-ordination for children's health and well-being related integrated commissioning, on behalf of:
 - Nottinghamshire CCGs
 - NHS England Area Teams (from April 2015)
 - Nottinghamshire County Council, including Public Health.
16. The Hub will consist of a small team, hosted in the County Council's Children, Families and Cultural Services (CFCS) Department. The structure of the team is attached as **Appendix 1** to this report. A number of existing posts currently within the Public Health Directorate will be incorporated into the team and an element of the funding received from all six Nottinghamshire CCGs will be used to recruit to new posts, working in or alongside the integrated commissioning team.
17. New senior posts located in the Integrated Commissioning Hub are detailed below:
 - Senior Public Health and Commissioning Manager
 - Senior Strategic Performance and Needs Assessment Manager
 - Performance and Contracts Officer
18. In addition to these posts, there will be a full time Business Support Administrator and funding has been identified to secure procurement and finance support from the relevant County Council departments. Discussions are underway with the relevant departments in relation to the capacity required to support the Hub team.
19. The Hub will work to align and pool commissioning resources from the County Council, CCGs and the NHS England Area Teams, in some cases via Section 75 arrangements, in order to effectively jointly commission services and activity.
20. The Hub will operate at different commissioning levels depending on the service/topic area. A list detailing this is attached as **Appendix 2**.
21. The Hub will provide opportunities for consistency across services in relation to priorities and processes such as safeguarding children, Pathway to Provision, and young people friendly services.
22. The Hub will be accountable to the Health and Wellbeing Board through the Nottinghamshire Children's Trust Board (membership includes CCGs, CFCS Department, Public Health Department and NHS England Area Teams). In addition it may be appropriate to establish formal direct links with CCGs if agreed. The accountability/governance structure is attached as **Appendix 3**.

Initial scope: areas of commissioning

23. It is envisaged that the Integrated Commissioning Hub takes on the lead for commissioning of children's services in a phased approach and will be operational by September 2013.
24. A full breakdown of initial services considered for inclusion within the scope of the Integrated Commissioning Hub is included in **Appendix 2**. As stated previously, there will be varying levels of commissioning responsibility depending on the particular service. For some services, the Hub will work closely with other agencies that have lead responsibility for a service, while for others, pooled funding and direct commissioning from providers will be in place.

Table 3: Services within the scope of the Integrated Commissioning Hub

- Public health services for children aged 0-5 (breast feeding, Healthy Start Programme)
- Public health services for children and young people aged 5-19 (school nursing, Healthy Schools)
- CAMHS Tiers 1/2/3
- Health services for Looked After Children (CAMHS/nursing/medical)
- Services for children with disabilities and SEN (community services)
- Elements of community paediatrics (where these relate to wider medical safeguarding, LAC and adoption roles, support to schools, disability and SEN services)
- Teenage pregnancy (C-Card Scheme, Teenage Pregnancy Training Programme and links to the commissioning of Contraception and Sexual Health Services)
- Substance use services for young people
- Health services for young offenders in the community

Areas for further/future consideration

25. In due course, and following discussion and agreement of relevant commissioners, it may be appropriate for the Integrated Commissioning Hub to lead on commissioning of general paediatrics (planned and unplanned care), maternity services and continuing care for children and young people. Commissioning responsibility for Health Visiting and the Family Nurse Partnership moves to Nottinghamshire County Council (NCC) from April 2015.
26. Once the Hub is established and following discussion and agreement of commissioners, it may be appropriate for the Integrated Commissioning Hub to lead on commissioning of Nottinghamshire County Council services, for example, commissioning all of disability services together across health, education and social care. This will have an impact on the capacity required and will need to be reviewed in due course.

Governance and accountability

27. The Integrated Commissioning Hub will commission services through a range of joint arrangements as referred to previously. There will be joint working with Nottingham City Council and Nottingham City CCG where there are common populations, common

objectives and in relation to services being provided by the same providers.

28. Governance will be via the Children's Trust to the Health and Wellbeing Board as set out in the diagram in **Appendix 3**. The governance and accountability arrangements were approved by the Children and Young People's Committee on 10 June 2013. The team comprising the Integrated Commissioning Hub will be directly accountable to the Corporate Director for Children, Families and Cultural Services. These arrangements will also ensure appropriate links to the Nottinghamshire Safeguarding Children Board and that robust processes are in place that demonstrate delivery of the relevant statutory duties.

Identified Risks

29. There are a number of risks currently being identified and explored as part of the development of the Integrated Commissioning Hub. A full risk log is under development and will include mitigating factors required to reduce the level of risk associated with the development and delivery of the Integrated Commissioning Hub. The risks can be summarised as follows:

- **Complexity of managing multiple stakeholder views and requirements:** the Integrated Commissioning Hub will have a number of stakeholders including Nottinghamshire County Council Departments, Clinical Commissioning Groups (x6); and the NHS England Area Teams (x2) all of which will have differing views, requirements and priorities.
- **Challenging financial circumstances: financial resources allocated for children and families:** the overall budget allocated to improve the health and wellbeing of children and families and prevent ill health is historically low when compared with that allocated for other groups or for interventions targeted at those in crisis or already in poor health e.g. smoking cessation services, substance use treatment. It is important to ensure that all relevant financial resource is identified, protected as far as possible and used to maximum effect to optimise health outcomes for children, adolescents and in later life.
- **Fragmentation of wider commissioning responsibilities:** there are a number of different commissioner leads responsible for a range of health and other services provided for children, young people and families. The integrated commissioning team will need to understand and influence other commissioners, to ensure that there is a shared understanding of evidence based practice and of local gaps in service delivery. This includes commissioners of services which affect children and young people's outcomes e.g. CFCS Department commissioners, Public Health commissioners for life course areas such as sexual health, smoking, obesity.

Other Options Considered

30. No other options have been considered.

Reason/s for Recommendation/s

31. The Integrated Commissioning Hub is an important opportunity to bring together the commissioning of children's services, an approach which is well established in other

areas. Resources from Clinical Commissioning Groups to pump prime the development have been identified and will support the Hub for three years. Furthermore, the Integrated Commissioning Hub will reduce duplication, streamline commissioning for children services, focus on outcomes, maximise quality whilst ensuring the best use of available resources, embed good practice and enable children, young people and families to have a say in the services and interventions they need.

Statutory and Policy Implications

32. This report has been compiled after consideration of implications in respect of finance, public sector equality duty, human resources, crime and disorder, human rights, the safeguarding of children, the NHS constitution (together with any statutory guidance issued by the Secretary of State) and sustainability and the environment and those using the service and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Financial Implications

33. The Integrated Commissioning Hub has been funded for three years from April 2013 to March 2016 by the six Clinical Commissioning Groups in Nottinghamshire and through reallocation of existing staff, by the Public Health Department.

Equalities Implications

34. Due regard has been given to the Public Sector Equality Duty. An Equality Impact Assessment is in progress.

Human Resources Implications

35. The posts have been evaluated and moderated using the County Council's agreed process. Recruitment will be subject to the vacancy control protocol and posts will be available to suitably qualified redeployees.
36. The recognised trade unions were sent a copy of the report and the relevant job descriptions and invited to comment.

Implications related to the NHS constitution and statutory guidance issued by the Secretary of State

37. Regard has been taken to the NHS Constitution together with all relevant guidance issued by the Secretary of State in formulating the recommendation.

RECOMMENDATIONS

That the Public Health Sub-Committee:

- 1) notes the integrated commissioning arrangements for children's health services, including the establishment of the Nottinghamshire Integrated Commissioning Hub

and governance arrangements for the integrated commissioning of health services for children young people and families.

- 2) agrees to receive updates in relation to the work of the Integrated Commissioning Hub.

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Constitutional Comments (LM 02/07/13)

38. The Public Health Sub-Committee has delegated authority within the Constitution to approve the recommendations in the report.

Financial Comments (KLA 01/07/13)

39. The financial implications of the report are set out in paragraph 33 above.

Background Papers and Published Documents

Development of the Integrated Commissioning Function for Children and Young People's Services: A progress report – report to Children's Trust Board on 15 April 2013

Health of Vulnerable Children and Young People in Nottinghamshire – report to Health and Wellbeing Board on 17 April 2013

Integrated Commissioning Arrangements for Children's Health Services - report to Children and Young People's Committee on 10 June 2013

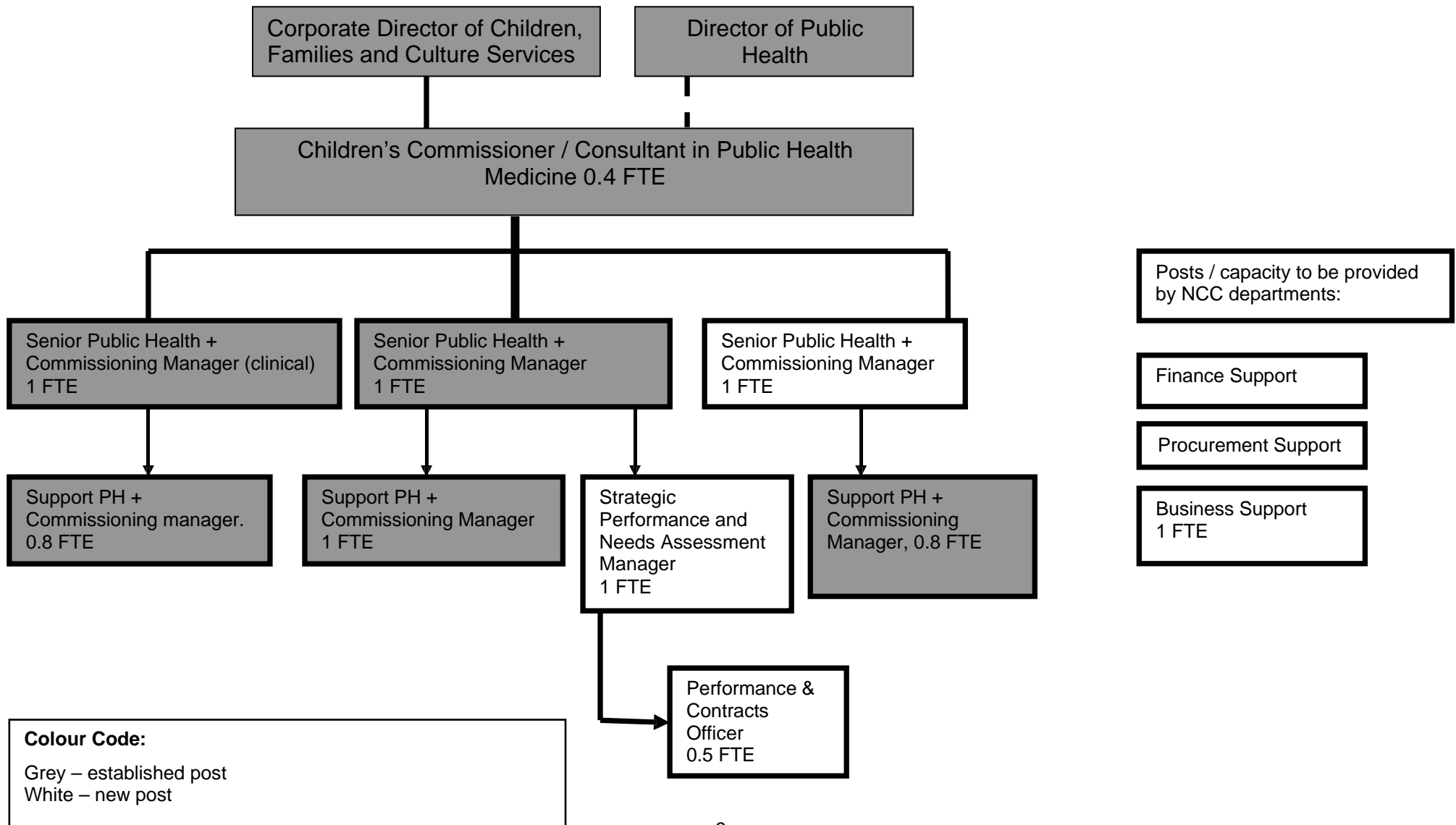
Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

Electoral Division(s) and Member(s) Affected

All.

C0258

CYP Integrated Commissioning Hub Team Structure



Commissioning Model	Service/Care Group	Lead Commissioner	Rationale
<p>Co-ordinated – joint development of needs assessment and agreement of shared priorities</p> <p>Individual organisations view these alongside their own priorities</p> <p>Service design, resource allocation, contracting and performance management remain separate</p>	<ul style="list-style-type: none"> Paediatric planned care Paediatric urgent care Maternity Services 	NHS Contracting Teams	<p>These services are “core business” for CCGs</p> <p>Service changes are largely transacted by the contracting teams</p>
	<ul style="list-style-type: none"> Health Child Programme 0-5, including Health Visiting Family Nurse Partnership 	NHS England Area Teams (ATs)	These services will be commissioned by the NHS England AT until April 2015, when they move to the Public Health in the LA. Work required to maximise integration with other services and prepare for April 2015
<p>Joint - joint development of needs assessment and agreement of shared priorities</p> <p>Joint agreement of resource allocation and aligning budgets</p> <p>Joint design of service specifications and joint work on procurement/contracting through a lead commissioner</p> <p>CCGs retain responsibility for performance management through agreed contracting and governance arrangements but will require coordination and communication pathways.</p>	<ul style="list-style-type: none"> Obesity/Physical Activity/ Nutrition Drug and Alcohol Services - substance use services for young people Teenage pregnancy/ sexual health 	<p>Public Health/ Integrated Commissioning Hub</p> <p>Elements of sexual health service commissioning transacted via CCG contracting leads initially.</p>	<p>These services will be funded via either the PH Grant or the Local Authority – joint commissioning provides opportunities for increased efficiency</p> <p>Many are already jointly commissioned</p>
	<ul style="list-style-type: none"> Community Paediatrics - elements relating to wider medical safeguarding, Looked After Children (LAC) and adoption roles, support to schools, disability and SEN services) 	NHS Contracting Teams	These elements are part of the Community Paediatric block contracts with acute providers currently. Full commissioning responsibility may move to Integrated Commissioning Hub if agreed in the longer term.
<p>Integrated – responsibility for the whole commissioning cycle delegated to an integrated team through a pooled budget</p>	<ul style="list-style-type: none"> CAMHS Tiers 1/2/3 Services to meet health 	Integrated Commissioning Hub	Potential to make savings through pooling

Commissioning Model	Service/Care Group	Lead Commissioner	Rationale
	<p>needs of disabled children</p> <ul style="list-style-type: none"> • Services to meet health needs of Looked After Children • All specialist community services for disabled children • Teenage pregnancy (C-Card Scheme, Teenage Pregnancy Training Programme) • Breast feeding support services, Healthy Start programme • Health Child Programme 5-19, including School Nursing • Health services for young offenders in the community 	<p>To include formal pooling of budgets via Section 75 agreements</p>	<p>Some services already secured via a joint service specification</p> <p>Proposed changes in legislation (statutory duties) to achieve greater integration between Health, Education and Social Care services.</p> <p>The NHS England Area Teams is lead commissioner for health services for young offenders in custodial settings</p>

Commissioning Model	Service/Care Group	Lead Commissioner	Rationale
<p>National/Regional Commissioning – some services will be commissioned either by NHS England Area Teams (ATs) at a regional level or nationally.</p>	<ul style="list-style-type: none"> • Primary Care • Screening, I&V • CAMHS Tier 4 • Neonatal/PICU • Tertiary Care • Children’s Continuing Care 	<p>NHS England</p> <p>Greater East Midlands Commissioning Support Unit</p>	<p>Specialist services commissioned collectively to achieve economies of scale and to maximise quality.</p> <p>Require input from local areas to ensure effective pathways, links between specialised and local services – likely to be provided by Integrated Commissioning Hub</p>

