

04 September 2014**Agenda Item: 4****Children's Trust Board Sponsor: Sue Gill****A WHOLE SYSTEMS APPROACH TO IMPROVING SPEECH LANGUAGE
AND COMMUNICATION FOR ALL CHILDREN AND YOUNG PEOPLE****Purpose of the Report**

1. Inform the Children's Trust Board of the whole systems approach to improving speech, language and communication for all children and young people.

The Board is asked to:

- I. **ENDORSE** the recommendation of a whole systems approach.
- II. **APPROVE** that this work is to be delivered through the Integrated Commissioning Hub
- III. **CASCADE** this work into respective networks

Information and Advice

2. A new approach is required that focuses on the speech, communication and language needs of all children and young people rather than focusing on service provision and in particular individual pathways within service provision.
3. Speech, Language and communication is 'Everyone's Business' it does not fall to one single agency to meet the need and therefore a whole systems approach is required. This approach requires collaboration between parent/carers/CYP, providers, schools and commissioners.
4. This work forms part of phase two of the Integrated Community Children and Young People's Healthcare Programme (ICCYPH), which identified twenty recommendations and seven priorities: (link to full report <http://www.nottinghamshire.gov.uk/caring/yourhealth/developing-health-services/childrenscommissioning/>)
5. A summary of ICCYPH programme priorities and recommendations relevant to SLCN can be found in appendix one.
6. There has been a previous review responding to concerns from parents, this whole systems approach builds on that work.
7. It was recommended at the CFCS Commissioning Workshop in February 2014 that opportunities for joint commissioning of Speech and Language Therapy Services are explored

Current Situation

8. There is no overall understanding of the speech, communication and language needs of CYP in Nottinghamshire and therefore this makes effective planning and commissioning of services extremely challenging. Data is held in several different places and organisations not all of it being shared, with no consistency or overall coordination and management therefore a gap identified in the JSNA.
9. **There are a number of providers:**
 - i. Nottinghamshire Healthcare Trust including Health Partnerships (County) and Nottinghamshire Children and Families Partnerships (Children's Centres)
 - ii. Doncaster and Bassetlaw NHS Trust
 - iii. Education – delivered in schools and colleges
 - iv. Third sector (voluntary)
 - v. Third sector (private/independent)
10. **There are a number of commissioners**
 - i. Integrated Commissioning Hub, Nottinghamshire County Council (NCC) (on behalf of CCGs)
 - ii. Early Years and Early Intervention Department, NCC (Children's Centres)
 - iii. SEN Policy & Provision Department, NCC
 - iv. Schools

Rational for a Whole Systems Approach (SLCN Whole system mapping and design tool, Commissioning Support Programme 2011)

11. The term 'speech, language and communication needs' (SLCN) has become the standard term used to describe a significant range of needs. These needs can range from a delay in emerging skills which resolves with increased experience of communication, to severe and life-long difficulties with aspects of speech, language, communication and/or eating and drinking. Such a diverse group will, not unexpectedly, require a diverse range of responses and rarely will one professional group or agency offer the solution to all of these needs. When commissioning services for this group of children and young people, it is therefore essential to have a whole system approach.
12. It is important for commissioners to consider the whole range of provision, the need for complementary system components and how the parts work together. There needs to be an understanding of services provided by the local authority, schools, health agencies, the voluntary and community sector, and private or independent providers. In other words, commissioners need to look at what is currently commissioned across all children's services that directly affects outcomes for children with speech, language and communication difficulties.
13. A needs assessment is currently underway and due to be completed in September 2014; the framework for the needs assessment is included in appendix three. This needs assessment will inform the commissioning of future provision.
14. Commissioners will also find a whole system approach useful in explaining and promoting the importance of the role of universal services in supporting the speech, language and communication needs of children and young people. Commissioners who have a good understanding of the whole children's services system can spot opportunities for integration, support service improvement, reduce gaps and overlaps, move resources, intervene early and increase efficiencies.

15. We need to move away from a service providing therapeutic input (following a disease/diagnosis a medical model) and more towards a public health approach to speech, language and communication with the ethos of ALL children and young people having the opportunity to early intervention support for good communication throughout childhood and best outcomes in adulthood. This is in line with the NCC policy of early help.
16. The current system: there is duplication, gaps, inequity across the county, pockets of good practice, lack of understanding of need, silo commissioning, outcomes for CYP unknown, workforce capacity (existing delivery model unsustainable) and input and activity focused
17. **A whole systems approach could create a complementary network of services rather than separate services and pathways which is:**
 - i. Outcomes focused for CYP
 - ii. Jointly Commissioned
 - iii. A good understanding of need and gaps
 - iv. Understanding of the total resource available and has the potential to meet need more effectively
 - v. Pooling of resources (section 75)
 - vi. Focusing on evidence and best practice
 - vii. To provide a continuum of universal, targeted and specialist provision
18. **Interdependencies:**
 - i. SEND Reforms/ EHC Plan Pathway
 - ii. Better Together (Mid Nott's Transformation Programme)
 - iii. South Nott's Transformation Programme
 - iv. NCC New Operating Model for Children's Services
 - v. School nursing review
 - vi. CAMHS Pathway review
 - vii. Concerning Behaviours Pathway (including possible ASD/ADHD and Challenging Behaviours)
 - viii. SEBD Review
 - ix. ASD/SLT Pathway Review/Report
 - x. Pathway to Provision
 - xi. Early Help Offer
19. To ensure engagement and consultation with stakeholders (including CYPF) throughout the work.
20. Governance for this work would be through the ICCYPH Steering Group and the Integrated Commissioning Group for SEND
21. A high level action plan has been developed which is in appendix two

RECOMMENDATION/S

1. **ENDORSE** the recommendation of a whole systems approach.
2. **APPROVE** that this work is to be delivered through the Integrated Commissioning Hub
3. **CASCADE** this work into respective networks

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Background Papers

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.

Appendix One

Summary of ICCYPH programme relevant to SLCN include:

Priorities:

- i. A single point of access for referrals and multi-agency, multi-disciplinary hub with coordinated assessments, single plan and key working
- ii. Integrated therapy services
- iii. Reduced duplication of activity and admissions to hospital
- iv. Alignment to SEND Reforms
- v. Alignment to Better Together Mid Nott's Transformation Programme (and subsequent South Nott's Transformation Programme)

Recommendations:

- i. Involvement of CYPF in service redesign (including 'Families statement of expectations')
- ii. Work with GPs including contact a family guidance, training and education
- iii. Improvement in data collected from service providers – including quality, outcome and activity based
- iv. Whole systems approach to integration and networking
- v. Improve ICT functionality
- vi. Proactive transition planning and pathway
- vii. Safeguarding and mental health considerations throughout service provision

The ICCYPH Vision:

'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 services will support the child's life choices rather than restrict them and improve the quality of life for children and their families and carers.'

Appendix Two

	High Level Action/Milestone	Lead Organisation	Who is involved	Deadline	Named Lead
1	To seek endorsement from the Children's Trust Board	ICH	CT Board	Sept 14	Sarah Everest
2.	To share detailed plan with stakeholders	ICH	All providers & commissioners NPH	Sept 14	Sarah Everest
3.	To undertake a needs assessment on speech, language and communication (appendix three)	ICH	All providers NPH	Sept 14	Ann Berry & Geoff Hamilton
6.	To refresh the strategy for Speech, Language and Communication (SLC) (informed by the needs assessment)	ICH	All providers NPH	Oct 14	Ann Berry
7.	Determine the total budget available	ICH	CCG finance SEN, NCC EY/EI, NCC Schools	Augt 14	Sarah Everest
8.	To agree a pooled budget through a section 75 agreement	ICH	CCG Chief Officers DCS	Apr 15	Sarah Everest
9	Market analysis and testing (market position statement) (with wider community services e.g. therapies and nursing)	ICH	Procurement (NHS/NCC)	Oct 14 – Mar 15	ICCYPH Programme Manager
10	To develop a model and specification based on needs assessment & strategy (with wider community services e.g. therapies and nursing)	ICH	Steering group/T&F Group	Oct 14 – Mar 15	ICCYPH Programme Manager
11	Agreed outcome measures for CYP	ICH	Steering group/T&F Group	Oct 14 – Mar 15	ICCYPH Programme Manager
12	To jointly procure a service across the continuum of need (universal, targeted and specialist) In line with CHP Community Services re-commissioning	ICH	Procurement (NHS/NCC) SEN, NCC EY/EI, NCC Schools NPH	April 15-Mar 16	ICCYPH Programme Manager
13	Performance monitoring and on-going evaluation of service	ICH	Implementation Group	April 16 on-going	TBA

Appendix Three

Needs assessment will need to include:

- i. an identification of any areas of unmet need and gaps in service provision
- ii. a system-wide view of needs, resources and provision and how they compare, as well as potential priorities for the future
- iii. an examination of workforce resources in skills, competences and capability a review of what services cost, where resources are committed and with what effect
- iv. an identification of the strengths and weaknesses in current provision as well as the potential for innovation and development
- v. an exploration of where and how services might need to be developed or reconfigured
- vi. an examination of the evidence basis for change and improvement
- vii. an understanding of what service users and carers say about the organisation, configuration and quality of services

	Acronyms, abbreviations and terms
SEND	Special Educational Needs and Disability
CYPF	Children, Young People and Families
ICH	Integrated Commissioning Hub
NCC	Nottinghamshire County Council
SLCN	Speech, Language and Communication Needs
SLT	Speech and Language Therapy
EHCP	Education, Health and Care Plan
JSNA	Joint Strategic Needs Assessment
ASD/ADHD	Autism Spectrum Disorder/Attention Deficit/Hyperactivity Disorder
CCG	Clinical Commissioning Group