

READING BOROUGH COUNCIL

REPORT BY DIRECTOR OF EDUCATION, CHILDREN AND EARLY HELP SERVICES

TO:	HEALTH & WELLBEING BOARD		
DATE:	17 APRIL 2015	AGENDA ITEM:	11
TITLE:	TRANSFER OF 0-5 COMMISSIONING RESPONSIBILITIES - HEALTH VISITORS/FAMILY NURSE PARTNERSHIP		
LEAD COUNCILLOR:	COUNCILLOR GAVIN HOSKIN	PORTFOLIO:	CHILDREN SERVICES PUBLIC HEALTH
SERVICE:	CHILDREN SERVICES PUBLIC HEALTH	WARDS:	BOROUGHWIDE
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1. PURPOSE AND SUMMARY OF REPORT

- 1.1 The transfer of the commissioning responsibility to Reading Borough Council for the Public Health 0 - 5 Health Visiting (HV) and Family Nurse Partnership (FNP) Service has progressed at a steady state both national and locally over the last few months.
- 1.2 The national allocations of the resources have been confirmed and work has progressed to agree the service specification that will be provided from 1 April 2015. The first six months of 2015/16 will be commissioned by the NHS England Area Team and from 1 October 2015 the Council will become responsible for commissioning these services.
- 1.3 This report will set out the progress to date in terms of the HV/FNP transfer/contracting arrangements and the decisions made by the Adults Social Care, Children Services and Education Committee on the 4th March

2. RECOMMENDED ACTION

- 2.1 That the Board acknowledges progress to date in terms of development and agreement of the Health Visitor and Family Nurse Partnership service specification and contract.
- 2.2 That the Board endorses the decision made by the Adult Social Care, Children's Services and Education Committee on the 4th March (Section 4).

2.3 That the Board endorse continuing with the existing partnership working processes to ensure a safe transfer of 0 - 5 commissioning responsibilities.

3. BACKGROUND

- 3.1 The Health and Social Care Act changed the pattern of commissioners for a range of Health Services including those that serve children.
- 3.2 Local authorities already have established and extensive responsibilities with regards children's care: education, safeguarding and social care services as well as early intervention and prevention services. As part of the movement of Public Health responsibility to the local authority, Public Health Services for children and young people aged 5-19 have been transferred. Currently all six local authorities within Berkshire have an overview role on immunisation and directly commissions school nursing.
- 3.3 The transfer of the commissioning responsibility to Local Authorities for the Health Visiting and Family Nurse Partnership Service is scheduled for 1 October 2015. This follows the expansion of the Health Visitor "Call to Action" Programme. This expansion is part of a national government commitment to expand the number of Health Visitors by 4200 and to ensure sustainability of service for the future. This service is provided by Berkshire Healthcare Foundation Trust (BHFT).
- 3.4 Over the last nine months the six Berkshire local authorities (with the Public Health Service Shared Team) have been working with the NHS Area Team and Berkshire Healthcare NHS Foundation Trust to review the finance and contracting issues. Baseline funding has now been announced by the Department of Health (which was in line with the expectations from the local work undertaken to agree the baseline) and the Council is now working to commission the service within this envelope and the national regulations.

4. CONTRACTING ROUTE

- 4.1 In order for the Council to deliver its responsibility from 1 October it has been working with The Public Health Shared Team and the NHS England Area team to review the national specification and make adjustments for local variations. This work has progressed and to support this, the Council was required to state its contracting intentions. Therefore the following was proposed for both the Health Visitor and the Family Nurse Partnership service:

Main Health Visitor Contract

- That the NHS England Area team will contract for the service from 1 April 2015 to 30 September 2015.

- That Reading Borough Council works with the Public Health Shared Team, the NHS England Area Team and Berkshire Healthcare NHS Foundation Trust to agree within the contract that allows the single NHS contract to be transferred from an individual contract to the six Berkshire local authorities on 1 October 2015.
- That Reading accepts a transfer of the contract for the HV service (for the Reading locality) from 1 October 2015 for a period of 12 months (this will be managed on behalf of the Council by the Public Health Shared Team based in Bracknell Forest Council).
- That on 1 October 2015 the Council gives 12 months' notice of our intention to re-commission the service (if the Council is ready at that point to ensure a new service can be commissioned by 30 September 2016).
- That the Council includes an option to extend the contract by a further 12 months from 1 October 2016. However this decision will need to be taken at least 12 months before the end of the extension, for example: if RBC wishes to extend by 3 months to 1st Jan 2017 then this will need to relay to the provider by 1st Jan 2016.

4.2 Family Nurse Partnership (FNP) contract

As this is a very different service and can only be provided under a license from the Department of Health, the recommendation is:

- That the NHS England Area team will contract for the service from 1 April 2015 to 30 September 2015.
- That Reading works with the Public Health Shared Team, the NHS England Area Team and Berkshire Healthcare NHS Foundation Trust to agree within the contract a deed of novation that allows the single NHS contract to be novated to the Shared Team to hold two contracts, one for the East of the County and one for the West on 1 October 2015.
- That the Public Health Shared Team accepts a transfer of the contract for the FNP Service (for the Reading, Wokingham and West Berkshire locality) from 1 October 2015 for a period of 12 months (this will be managed on behalf of the Council by the Shared Team in Bracknell).
- That the Public Health Shared Team includes an option to extend the contract by a further 12 months from 1 October 2016

Reason for the above suggestion is that in reviewing the funding it was identified that this is more a West and East of Berkshire based service due to the low numbers and who are actually eligible. It would be very difficult to deliver this at a borough level alone.

4.3 Other options considered

In reviewing the contract the Council has limited options. The main variation is the length of the contract from 1 October 2015. It was considered that the contract should be 6 months and the procurement exercise be carried out to deliver a new service from 1 April 2016. This is discounted due to:

- It was unlikely that the Council would be able to undertake a full procurement exercise with this time span.
- It may unduly destabilise the provider and the quality of the service.
- That by tendering immediately it would not allow the Council to review how well the new service performs before the 1 April date.

4.4 Adults Social Care, Children Services and Education Committee Decision

The Committee decision on the 4th March was as follows:

- That the contracting approach, set out in Section 4.1 and 4.2 of the report, for both the Health Visitor and Family Nurse Partnership Services be agreed;
- That the Director of Children, Education and Early Help Services, in consultation with the Lead Councillors for Children's Services and Families and Health, the Head of Legal and Democratic Services and the Head of Finance, be granted delegated authority to enter into the contracts for Health Visitor and Family Nurse Placements Services, referred to in sections 4.1 and 4.2 of the report

5. CONTRIBUTION TO STRATEGIC AIMS

5.1 The context for the delivery of Council services is outlined in the Corporate Plan and the following new priorities are proposed as the focus of our service delivery:

1. Safeguarding and protecting those that are most vulnerable;
2. Providing the best start in life through education, early help and healthy living;
6. Remaining financially sustainable to deliver these service priorities.

5.2 To deliver these priorities within the new Corporate Plan there is a continued focus on the Council's contribution to narrowing what the gaps are within Reading. To do this the Health Visiting Service works across a number of stakeholders, settings and organisations to lead delivery of the Healthy Child Programme 0-5 (HCP). This is a prevention and early intervention Public Health programme that lies at the heart of the universal service for children and families and aims to support parents at this crucial stage of life, promote child

development, improve child health outcomes and ensure that families at risk are identified at the earliest opportunity.

This includes safeguarding children and working to promote health and development in the '6 high impact areas' for early years -

- Transition to parenthood and the early weeks
- Maternal mental health (perinatal depression)
- Breastfeeding (initiation and duration)
- Healthy weight, healthy nutrition and physical activity
- Managing minor illness and reducing hospital attendance and admission
- Health, wellbeing and development of the child age 2 - 2.5 year old review (integrated review) and support to be 'ready for school'.

5.3 These '6 high impact areas' of the service are entirely consistent with the Council's Early Help Strategy, as agreed by the ACE Committee in October 2013, which recognises the important role that Health Visiting plays in our local Early Help offer. This commissioning process gives opportunities to strengthen these Early Help Strategy key priorities:

1. Earlier identification and access to services will improve with the wider universal coverage and provision of development checks and information about parenting and immunisations.
2. Effective Help will improve with a renewed focus on key issues like breastfeeding and immunisation take up from vulnerable families
3. Supporting the more vulnerable and sustaining the change will strengthen as we further integrate this service into Reading's Early Help offer and especially with our Children's Centre programme. In particular the universal coverage of Health Visiting will enable other Early Help services to further target remaining resources to the most vulnerable.

6. COMMUNITY INVOLVEMENT

6.1 Across Berkshire, including Reading, there have been a number of partner consultation workshops that both provided an update on the Health Visitor commissioning process as well an opportunity to discuss service priorities for Reading itself. A range of statutory, community and voluntary sector partners were able to take part in the workshop. Feedback that we received included:

- Gaps in provision include low level support for parents with emerging mental health needs, ante and post natal education opportunities for families about their child's development and consider out of hours support for families.
- Opportunities identified include focusing on communication of both service offer and service successes, continuing to build relationship and providing services in Children's Centres and more joint training across the workforce.

7. LEGAL IMPLICATIONS

- 7.1 The Health and Social Care Act 2012 ("the 2012 Act") transferred Public Health functions from the NHS to local authorities commencing on 1 April 2013 with the transfer of different services being staged. The relevant statutory provisions in respect of Health Visitor Services and Family Nurse Placement Services come into effect on 1 October 2015.
- 7.2 From 1 October 2015 it will be necessary to enter into the joint contracts with the other Berkshire local authorities as detailed in Sections 4.1 and 4.2 of this report and the replacement contracts thereafter as detailed.

8. EQUALITY IMPACTS

- 8.1 Members are under a legal duty to comply with the Public Sector Equality duties set out in the Equality Act 2010. In order to comply with these duties, Members must seek to prevent discrimination, and protect and promote the interests of 'protected' groups.
- 8.2 An equality analysis has been prepared by the NHS Area Team for 1 April - 30 September period. The Public Health Team in Reading have completed Equality Impact Analysis assessments individually for both the HV and FNP services from 1 October 2015. Copies of these are attached as an appendix to this report so that Members can give conscious and open minded consideration to the impact of the equality duty before taking further decisions.

9. FINANCIAL IMPLICATIONS

9.1 Revenue Implications

The Department of Health have recently confirmed the allocation that the Council will receive to fund this service (£1.466m - part year funding). This funding is expected to fully cover the commitment the Council will take on from 1 October 2016. This funding will become part of the Council's Public Health grant which is ring fenced and subject to specific grant conditions.

Funding for 2016/17 has yet to be confirmed as the Government is undertaking a review of how the Public Health grant is allocated. The Government is currently seeking views around how the formula for allocation resources for the Health Visitor and Family Nurse Partnership schemes could be developed.

9.2 Capital Implications

There are no capital implications associated with this transfer.

9.3 Value for money

The Council is currently working with NHS England and Berkshire Healthcare NHS Foundation Trust on performance measures for the service at the point of service which will support the Council in monitoring the appropriate levels of performance are being achieved. The procurement exercise will allow a full test of value for money outcomes.

9.4 Risks

There are no specific financial risks for the new financial year (2015/16) as the funding has been identified however there maybe a risk for 16/17 as the level of funding available has not yet been identified.

There however maybe a commissioning and transfer risk if one or more of the other Berkshire authorities do not agree to a standard approach to the transfer to ensure stability of the service.

Revised Public Contract Regulations are due to come into force on 1 April 2015. The regulations have just been published (6 February) and compliance with a new "light touch" regime for health services of high value will be required once the new regulations are in force.

SUPPORTING PAPERS

Department of Health Commissioning and Finance Fact sheets:

<https://www.gov.uk/government/publications/transfer-of-0-5-childrens-public-health-commissioning-to-local-authorities>

Health Visitor background documents:

<https://www.gov.uk/government/publications/health-visitor-implementation-plan-2011-to-2015-sets-out-call-to-action>

Health Visitor National Plan

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/208960/Implementing_the_Health_Visitor_Vision.pdf

Equality Impact assessments