

## **Healthy Child Service**

### **Summary**

1. The purpose of this report is to provide the Committee with an update on the transfer of health visiting, school nursing and the National Child Measurement Programme from York Teaching Hospital NHS Trust to City of York Council and progress with the development of a new Healthy Child Service.

### **Background**

2. The Healthy Child Programme (HCP) is a universal public health programme for improving the health and wellbeing of children and young people. It is currently delivered as two separate programmes:
  - HCP from 0 to 5 years is delivered by the health visiting service
  - HCP 5 to 19 years is delivered by the school nursing service

Both elements are currently provided by York Teaching Hospital NHS Trust. In addition, the school nursing service is responsible for delivery of the National Child Measurement Programme.

3. The HCP works within a framework of four levels of universal health review and screening, health promotion and early intervention for infants, children, young people and their families that promotes optimal health and wellbeing and with safeguarding being an integrated element. The levels of service provision are outlined below:

**Community:** The needs of communities are understood through health needs assessment and mapping of the range of services provided for and by communities. Health visitor and school nursing teams have an important role in developing services for health and wellbeing with communities

**Universal:** Provision of the 0-19 HCP to every child in the City. This includes providing support for parents and access to a range of community services and resources.

**Universal Plus:** Time limited evidence-based care packages based on identified need and delivery of a rapid response from health visiting and school nursing teams when expert help is required.

**Universal Partnership Plus:** On-going support provided plus co-ordination of care with a range of local services working together to deal with more complex issues over a longer time.

4. On 27 August 2015, the Council Executive approved the transfer of health visiting, school nursing and National Child Measurement Programme services from York Teaching Hospital NHS Trust to the Council. This provides the Council with an opportunity to integrate elements of the HCP to ensure better service provision. Integration will enable the provision of a strong and comprehensive universal offer to children and young people, whilst ensuring value for money and making decisions based on the best available evidence of what works.
5. The impact of an effective Healthy Child Service will be seen and measured through improved public health outcomes and indicators including: life expectancy, breast feeding, domestic abuse, smoking prevalence in pregnancy and at age 15, school readiness, excess weight in 4-5 and 10-11 year olds, tooth decay and self-reported wellbeing.
6. A core dataset of indicators to measure performance and evaluation of the impact of the service is being developed and will be in place for 2016/17. The aim is to use 2016/17 to establish a baseline position from which targets can be set for continuous service improvement.

### **Transition of the Services**

7. A project group has been established to implement the transition of the health visiting, school nursing and National Child Measurement Programme services from York Teaching Hospital NHS Trust to the Council. There are eight workstreams – ICT, information governance, human resources, workforce development, legal, finance, facilities and communications.
8. The project group has a project plan and timetable with key dates for the transition process.
9. For 2016/17 the transfer is to be effectively a ‘lift and shift’ with the main priority being the stability of the services.

## Risk Management Implications

10. The key risks for the Council have been identified as:

Risks	Mitigating Actions
<p>Finance:</p> <p>The funding formula for the 0-19 HCP is not needs based. The budget is based on the historical financial allocation that transferred from the NHS to the Council. York is starting from a low baseline position because of historical under-investment in prevention by the old PCT.</p> <p>In addition, the government's decision to cut the Public Health Grant by 6.2% in 2015/16 with further cuts expected to be confirmed shortly, inevitably creates an additional budget pressure. The services are currently wholly funded by the PH grant.</p>	<p>The Council provided evidence to the Department of Health consultation on future PH grant allocations and will be writing again to express our concerns about the likely impact of further budget cuts.</p> <p>We are actively engaging with YTHT to better understand caseload management, skill mix, risk management and mandatory requirements etc. and exploring opportunities for improving cost effectiveness and efficiencies e.g. through better integration.</p> <p>The annual review of PH commissioning intentions will seek to ensure that the cost of the service can be contained within the wider financial envelope on an annual basis. However it should be noted that the cuts to the PH grant impacts on the ability to achieve the Council's Medium Term Financial Strategy by charging the cost of other early help services to the grant.</p>
<p>Legal:</p> <p>There are employment law issues relating to the TUPE of staff.</p> <p>Some elements of the HCP are mandated in government regulations.</p> <p>There are legal requirements relating to other elements of the service e.g. nurse prescribing, issuing of emergency contraception under a Patient Group</p>	<p>Preparation for the transfer includes active input from the legal team.</p> <p>Preparation for the transfer has included input from Public Health England to better understand the requirements for mandatory reporting of HCP activity.</p> <p>Preparation for the transfer has included input from the CCG with further work planned to establish shared clinical governance around nurse prescribing</p>

<p>Direction.</p> <p>The Council does not currently have adequate systems in place for clinical governance.</p> <p>There is a requirement for the Council to be registered with the Care Quality Commission as a provider of health visiting and school nursing services.</p> <p>The Council will need to develop a relationship with the Nursing and Midwifery Council as the Regulator for qualified nurses.</p>	<p>and PGDs.</p> <p>Initial exploration of the CQC requirements has taken place and support will be sought from the local CQC for our application for registration. YTHT is providing expertise as the current CQC registered provider.</p> <p>The Council will register with the NMC as an employer of registered nurses to enable access to employer's support and guidance. Systems are being established to assure the Council that all staff who require effective registration from 1 April 2016 have this in place.</p>
<p>Information Governance:</p> <p>The Council needs to prepare for the transfer of responsibility for Child Health Records. Health visiting service currently uses SystmOne – an electronic records management system. School nursing still uses paper records.</p> <p>Records need to be kept until a child reaches 25<sup>th</sup> birthday which poses a challenge for safe and secure storage.</p> <p>There are potential safeguarding concerns if child health records are not easily accessible.</p> <p>All information needs to be managed in accordance with the Data Protection Act.</p>	<p>The Council already has robust systems in place for information governance and there is involvement of the information governance team to ensure that there is a safe transfer.</p> <p>Contingency plan is for staff to remain based in current office accommodation post 1 April 2016 until we are confident that an effective solution has been put in place for records storage that provides adequate access and meets IG requirements.</p> <p>Work is underway to put in place a managed support agreement between YTHT and the Council for the continued use of SystmOne for health visiting service and the rollout to school nursing. This agreement is to be in place for 2 years while the Council explores options for integration with other children and young people records in the longer term.</p>

<p>Workforce:</p> <p>There is a possibility that the Council may inherit a workforce with insufficient capacity to deliver the mandated elements of the HCP</p>	<p>Staff will retain their NHS terms and conditions under TUPE. The Council is applying for a Pensions Direction Order that will allow all staff who transfer to retain their entitlement to the NHS Pension Scheme.</p> <p>Staff consultation and engagement is taking place to involve them in planning for transition and development of the new service.</p> <p>Joint recruitment is to take place by YTHT and the Council to fill frontline vacancies during transition.</p> <p>The transfer project includes engagement with Health Education England to plan the future workforce strategy including future training commissions for health visitor and school nurse student placements.</p> <p>Arrangements are being put in place to include mandatory training requirements for health visiting and school nursing workforce in the Council's learning and development strategy.</p>
<p>Safeguarding:</p> <p>The Council will inherit a position in which health visitors receive safeguarding training and supervision from Harrogate and District NHS Foundation Trust and school nurses from York Teaching Hospital NHS Foundation Trust.</p> <p>There is a lack of clarity around funding arrangements.</p>	<p>Preparation for the transfer includes input from the Designated Safeguarding Professional Lead team for North Yorkshire and York.</p> <p>The North Yorkshire and York NHS Partnership Commissioning Unit are undertaking a review of safeguarding training and supervision arrangements across the NHS. The outcome of this review will clarify funding and inform future decision making around arrangements for safeguarding training and supervision of health visitors and school nurses.</p>

	<p>Until such time assurance is being sought from the PCU that the existing arrangements for safeguarding training and supervision of health visitors and school nurses in York will continue post 1 April 2016.</p>
<p>Reputational:</p> <p>The Council will inherit an underperforming service and may be held to account on performance of delivery of mandated 0-5 HCP checks</p>	<p>There is a lack of performance data on the school nursing service in York and nationally so it is not possible to benchmark. Arrangements are being put in place to establish a better system of data collection and reporting of performance against key indicators following the transfer.</p> <p>Performance data for health visiting shows poorer performance in York when benchmarked against regional and national data. However we know that there are issues around data quality and so this may not reflect true position. An audit will be undertaken during 2016/17 to establish more accurate baseline. Performance monitoring to be strengthened against key performance indicators following the transfer.</p> <p>The government public health regulations do make it clear that Local Authorities will only be expected to take reasonable and practicable steps to delivering mandated 0-5 checks and continuous service improvement over time.</p>

## Development of new Integrated Healthy Child Service

11. We have high ambitions to ensure delivery of an effective, integrated 0-19 Healthy Child Service. The service will have the child and family at its centre and a strong public health focus, underpinned by a robust evidence base. All mandated requirements will be met; there will be safe clinical practices and strong information governance. Safeguarding will be at the core of all work. There will be robust monitoring systems

that evidence the scale of reach and the impact the service is having on the lives of children and young people.

12. The new service will have contact with all children and young people in the City of York at key points through childhood and adolescence.
13. The service will build on the 6 high impact areas for early years and will use innovative methods to engage children and young people, including those in vulnerable and excluded groups, in accessing health advice, in taking control of their health, preparing them for adulthood and supporting them to make healthier choices for themselves.
14. The service will deliver strong universal provision and early identification of problems to ensure appropriate support is offered. Children will move seamlessly through the 0-19 service ensuring children, young people and their families get the right support, from the right person, in the right way and at the right time, every time. This will require strong partnerships with NHS agencies, community and voluntary sector, education settings, other Council services etc.
15. Key contact points throughout the universal 0-19 Healthy Child Service to offer health review and screening will be:
  - Antenatal review
  - New baby review
  - 6- 8 week assessment
  - 1 year assessment
  - 2 to 2.5 year review
  - School entry staged contact (at 4-5 years)
  - Year 6 staged contact (10 to 11 years)
  - Mid teens staged contact (16-19 years)
16. All of the above will be supported by evidence based care pathways to ensure quality and consistency of the offer and onward referral as appropriate. A multi-agency Healthy Child Service Steering Group has been established to oversee this process.
17. The service will be responsible for working closely with specialist Looked After Children health provision and undertaking review health assessments in accordance with statutory guidelines and best practice.

## **Options**

18. There are no options for the Committee to consider. The report is intended to be an update on the transfer of the service.

## Analysis

19. The project is on track to deliver a safe transfer of the health visiting, school nursing and National Child Measurement Programme services to the Council on 1 April 2016.

## Council Plan

20. The Healthy Child Service specifically relates to the priorities within the Council Plan:
  - **A Prosperous City for All** - the new 0-19 Healthy Child Service will be aimed at ensuring that every child and young person in York has the best start in life and is supported to achieve their full potential
  - **A Focus on Frontline Services** – by ensuring that all York’s younger residents live and thrive in a city which allows them to contribute fully to their communities and neighbourhoods and where every child has the opportunity to get the best start in life and are encouraged to live healthily.
  - **A More Responsive and Flexible Council that puts Residents First and Meets its Statutory Obligations** – by ensuring that the new service delivers the mandated elements of the Healthy Child Programme and contributes to the Council’s statutory duties for improving health and reducing health inequalities in our residents.

## Direct Implications

21. There are no direct implications arising from this report.

## Recommendations

22. As the report is for information only there are no specific recommendations.

### Reason:

To provide an update on the transfer of health visiting, school nursing and National Child Measurement Programme and progress with the development of a new Healthy Child Service.



## Contact Details

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Report Approved



Date 14/01/16

Specialist Implications Officer(s) None

Wards Affected: List wards or tick box to indicate all

All

For further information please contact the author of the report

## Background Papers

<https://www.gov.uk/government/publications/healthy-child-programme-pregnancy-and-the-first-5-years-of-life>

[http://webarchive.nationalarchives.gov.uk/+www.dh.gov.uk/en/publication/sandstatistics/publications/publicationspolicyandguidance/dh\\_107566](http://webarchive.nationalarchives.gov.uk/+www.dh.gov.uk/en/publication/sandstatistics/publications/publicationspolicyandguidance/dh_107566)

## Glossary of abbreviations

CCG- Clinical Commissioning Group

CQC- Care Quality Commission

HCP- Healthy Child Programme

ICT- Information and Communication Technology

NMC- Nursing and Midwifery Council

NHS- National Health Service

PCU- Partnership Commissioning Unit

PGDs- Patient Group Directions

PH- Public Health

TUPE- Transfer of Undertakings Protection of Employment

YTHT- York Teaching Hospital Trust