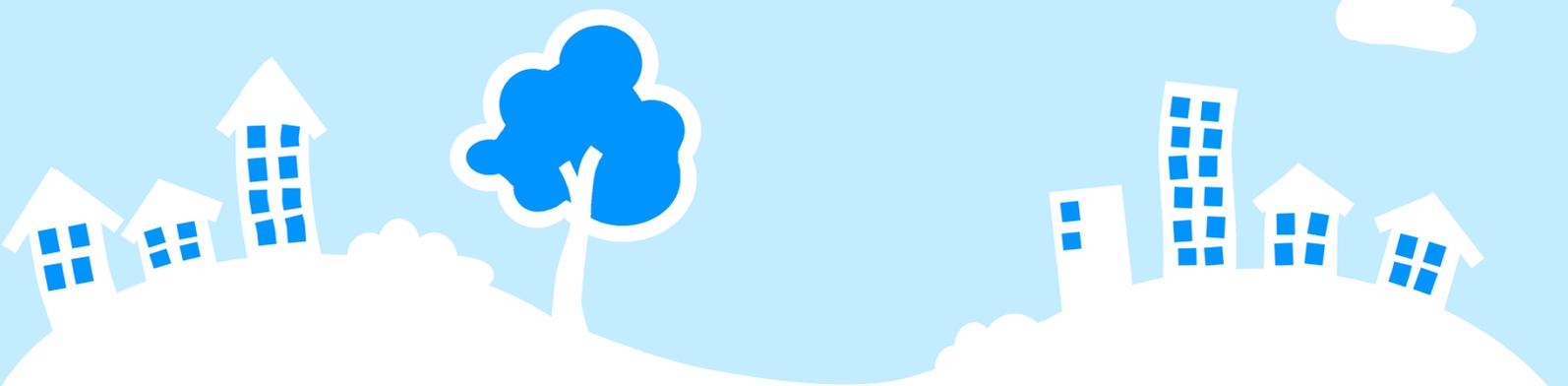


Cheshire East Children and Young People's Joint Commissioning Strategy



2016-2018



Cheshire East
Children & Young
People's Trust



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Introduction and Purpose of a Joint Strategy

This strategy sets out the joint commitment of all key partners delivering to improve the lives and life chances of all children and young people (aged 0 – 25 years) in Cheshire East to a joint commissioning approach that delivers integrated services for children, young people and families.

There are many vital commissioning alliances and partnerships involving the local authority, Clinical Commissioning Groups (CCGs), police, probation, voluntary groups/bodies and health providers that are important in delivering effective services. This strategy concentrates on the added value achieved by close and effective joint working/investment across partners.

The strategy is driven by the intent to improve the lives of Cheshire East children, young people and families and is informed by the Children and Young People's Plan, Health and Wellbeing Strategy and Joint Strategic Needs Assessment. This strategy includes a joint commissioning plan which sets out our key joint priorities, opportunities and overview of the joint work programme (see Appendix 1).

Whilst the strategy covers all children and young people it has a focus on 2 main areas;

1. Children, young people and families where there is a need for collaborative and joint action (for example, children at risk, those with additional needs & complex health concerns).
2. Early help - reducing health inequalities and strengthening ill health prevention, giving all children and young people the best start in life - leading population level behaviour change with a focus on emotional health.

The objective is to deliver positive change through commissioning across the life course of a child from before birth through to adulthood.

The strategy is based upon recognition that to maintain or improve outcomes, acknowledging the **experience** of children/ young people and their families is vital. We already know from what children and families have told us that changes are required to the way services are organised and relate to each other.

The strategy:

1. Sets the guiding principles for how services will be jointly commissioned and or aligned
2. Confirms the key elements of design within which integrated services will develop and operate.
3. Clarifies the priority areas for joint commissioning focus and activity. The strategy is informed by and supports the strategic plans of each partner and follows the commissioning cycle outlined in the Council's Corporate Plan 2016 -2020.



Joint Commissioning for Cheshire East

Joint commissioning for children and young people is the connecting of child and family need to service design, standards and investment across the **whole system**.

Our aims are to:

- effectively support children and families when they need our help and protection
- Create opportunities through advice and guidance on self-help to support families to take further control of their own lives.

This strategy acknowledges the interdependency between different services such as the family GP and schools, the health visitor and social care, midwives and children centres, youth services and sexual health. Services need to be considered in the context of a life course model from the ante-natal stage through childhood to adulthood. This strategy aims to build upon some areas of good progress towards more joined up responsive, effective and efficient delivery.

This strategy reiterates the commitment to aligning key activities associated with commissioning. These include; decision making, information analysis, priority setting, investment, planning, service design, service specifications, and service delivery and performance management.

A joint commissioning continuum is attached at Appendix 2. This provides a useful summary of the various stages of commissioning from operating in a silo to forming one commissioning organisation. The Children's Joint Commissioning Group is a relatively new part of the overall governance structure and is moving towards commissioners aligning plans with a clear aspiration to develop into a Virtual Joint Commissioning Unit with pooled budgets. Steps beyond this form are linked to wider structural, political and culture change.

In February 2016 the Children's Commissioning group met to map the commissioned services that each organisation delivers to achieve the six Children & Young People Plan priorities. This will allow partners to align plans and jointly commission when that decision best fits with achieving our priorities and offers cost effectiveness. This will often involve redesign and de-commissioning to re-commission rather than applying new money.

Implementation of this strategy will be supported by the developing commissioning toolkit which will be utilised across partners. This shall include joint specifications for integrated delivery.



A Joint Vision

The Cheshire East Children and Young People’s Plan 2015 – 2018 was co-produced by partners and voice of children, and sets out 6 priorities to improve outcomes for children in Cheshire East, making it **a great place to be young**:

1. Children and young people will be **actively involved in decisions** that affect their lives and communities
2. Children and young people **feel and are safe**
3. Children and young people experience **good emotional and mental health and wellbeing**
4. Children and young people are **healthy and make positive choices**
5. Children and young people leave school with **the best skills and qualifications** they can achieve and the life skills they need to thrive into adulthood
6. Children, young people and young adults with **additional needs have better chances in life**

The Children’s Trust has allocated leads for each of the Children & Young People plan priorities. Over the last year, these leads have led on developing strategies/ action plans for each of the priorities. The Children and Young People’s Joint Commissioning Group reviewed the actions in these strategies and identified priority actions that require a joint commissioning approach to be successful. This joint priority setting and review will be undertaken on an annual basis.

Guiding Principles

The alliance between the LA, CCG and other partners for Children and Young People’s Services incorporates a commitment to the principles detailed at Appendix 3 and summarised below:

- Children and Young People are able to participate in all stages of the commissioning process ensuring that children and young people are at the heart of our thinking, planning and actions.
- Commission services that put children and young people first and are focused on quality and outcomes by being both effective and cost efficient
- Measurement of performance by how services impact on outcomes for children and families.
- Have a competent workforce focusing on joint training and development.
- Ensure services continuously improve their models of delivery taking account of effectiveness of care to children and families and stakeholder views.
- Drive change and improvement quality of service delivery by children and families experiences.



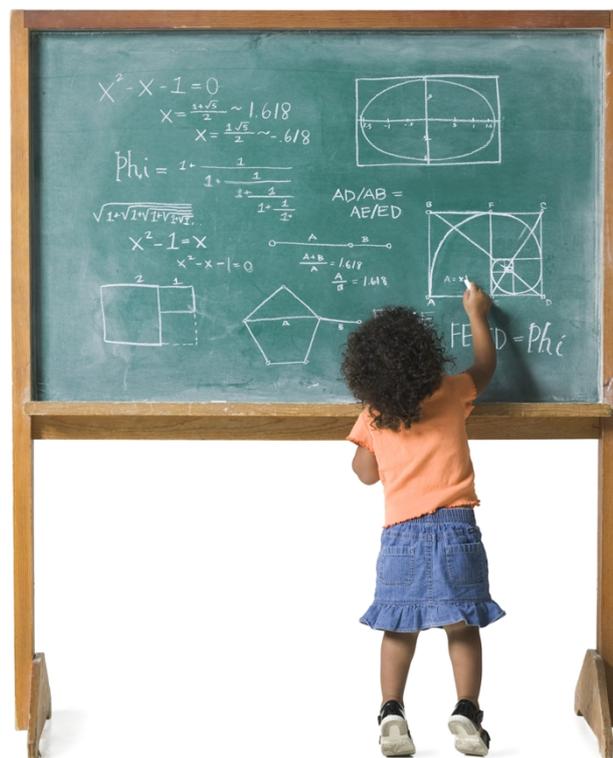
- Ensure providers of services are accessible, flexible and proactive in solution finding.
- Ensure providers focus on the overall experience of children and families as they journey through services with an emphasis on joined up and consistent approaches using evidence- based interventions including actively listening to children and families.
- Prevent harm, ill health and escalation of difficulties by adopting an early help approach across the whole system.

Through the use of the joint strategic needs assessment and aligning to key partnership plans we have identified five priority areas for a joint commissioning focus and two enablers. The intention of the plan is to mark clearly the actions up to 2018 confirming improvement measures, resources, challenges and accountability related to the 5 priority areas.

The Strategy and Plan respond to the national and local requirements for Clinical Commissioning Groups (CCG), NHS England and Local Authorities to align/join commissioning plans and, integrate services for children, young people and families.

Accountabilities are set out within various national guidance and frameworks including for example requirements to reduce hospital admissions for children with asthma, diabetes or epilepsy, improving Public Health outcomes and increasing prevention and for example narrowing the gap in educational attainment.

This Plan is intentionally short and written with a view to being accessible to all those that have an interest in supporting change and improvement. The strategy is available on the Council, CELSCB and CYPT websites.





Commissioning for Children Accountabilities

Governance, accountability and influence for Commissioning integrated children young people and family services are distributed across a number of different bodies – the strategy and this plan focuses primarily on the Local Authority (inc Public Health) and Clinical Commissioning Groups commissioning activities but has reference to those significant elements of accountability that remain with NHS England. The table below summarises the main areas of accountability for the 3 commissioning Authorities. **Significantly, the role of Parents, carers, Children and Young people feature as a point of influence in each as they should inform and shape all elements.**

Cheshire East Council (inc Public Health)	Two Clinical Commissioning Groups	NHS England
Parents, Children and Young People have influence and in the context of personalising budgets control aspects of service development		
Teenage conception, Sexual health, Drug & Alcohol, Breastfeeding, Obesity & Smoking cessation programmes, Healthy Child Programme 0 to 19 years old. Tier 2 Mental Health Services Family Support Speech and Language Special Educational Needs (SEN) and Learning Disability services Short Breaks for Carers Children in Care services SEN and Post 16 services Domestic Abuse Services Safeguarding and protection	Children in Care & Safeguarding Maternity, Disability, Complex & Continuing Care, Unplanned & Planned Care, Palliative Care, End of Life, Therapies, Equipment & Wheelchairs, Continence services Community Nursing Child and Adolescent Mental Health Services tiers 1-3 Acute illness, developmental delay, Long term Care Speech and Language services	National Immunisation Programme National Screening Programme Primary Health Care services including; GPs, Dental, Ophthalmic, Specialist Commissioning: Tier4 CAMHS, Perinatal mental health, Cardiac, Neonatal services



The Focus for Our Joint Plan

The Plan and focus for activity continue to be formed with reference to the 4 main areas summarised below.

Needs

For the population as a whole the determinants of poor outcomes are not changing significantly – albeit the way that need presents and expectations of how services will be delivered are changing. For example families and CYP are expecting more choice, involvement and personalised provision.

Appendix 1 provides a JSNA summary for each of the Children and Young People’s Plan priority areas (excluding priority 1) with the main actions for each plan and how joint commissioning supports each priority.

Expectations

A fundamental challenge for all public services is to deal with rising demands in relation to some aspects of physical and mental health eg prevalence of Type 1 and 2 diabetes and anxiety/depression related to CYP and Adults. Growth in number of children with complex needs e.g. ASD

Concerns over safeguarding associated with Child Sexual Exploitation, domestic Abuse and Neglect are also dominant themes.

Performance

There is a need for improvement in the quality and responsiveness of some services and specifically the use of data to jointly monitor service impact on ‘outcomes’.

Outcome inequalities continue to be significant across the authority footprint in relation to elements of health, learning, safety and wellbeing despite a focus of services aiming to improve the position.

Whilst performance of services in relation to the timeliness and quality of assessment are relatively good the focus on actual quality interventions needs to improve.

Cost & Demand

Rising need & demand for acute/specialist services such as hospital care is generating rising costs that are creating major joint financial and service pressures.

For example, increasing numbers of children/young people with complex needs, rising reports of mental distress and domestic abuse are significant.

The ambition continues to be meeting such needs jointly in an inclusive and community based way focusing on support for self- care, early help and prevention.

Key Themes for joint action as set out in the Strategy:

Integrated Services & Delivery

Children and families (particularly those whose needs are most complex) are seeking joined up solutions with services being more connected. For example linking school, short breaks, health care and family support. Parents have told us services should be fewer ‘agency’ boundaries and there are still too many referrals and transfers between agencies and workers.

Confident & Caring Workforce

The opportunities & challenges posed by interagency working in the development of effective care and support to children and families are significant. Research has also shown that the qualities of the practitioner are one of the strongest determinants of the extent to which people engage with interventions. The added value of skills & collaborative working will be a key focus.

Governance & Resources

To ensure best value and to maintain momentum for Joint Commissioning there is a need for an integrated approach to such things as; priority setting, investment, problem solving and decision making.

Such Governance is required across the commissioning cycle will require clear arrangements

Early Help

Early help means ‘intervening’ early as soon as possible to tackle problems emerging for children, young people and their families or with a population most at risk of developing problems. The foundations for virtually every aspect of human development -physical, intellectual and emotional- are established in early childhood. Our aim is to build a culture of assess, hold and intervene.



Prioritised Actions, Next Steps and Accountability

Priority Actions	Integrated Working	Confident & Caring Workforce	Governance
Parent Journey	<ul style="list-style-type: none"> The Parent Journey provides 14 stops between pregnancy and age 4 years, including mandatory Healthy Child Programme assessments. Implement the Parent Journey for all children born after April 2016. Further develop universal assessment delivered as part of Parent Journey and targeted support offer for those identified with additional needs. 	Continue multiagency Parent Journey training and development IT integration project. System One to support Universal Offer and Liquid Logic to support Targeted offer Joint outcomes and performance monitoring	Children and Young People's Transformation Group
Children and Young People's Improvement Plan	<ul style="list-style-type: none"> Delivery of all partner contributions to the children and young people's improvement plan following the 2015 Ofsted inspection Improve effectiveness of safeguarding across linked commissioned services Review capacity provided by the Designated Nurse – Cared for Children 		LSCB and sub-groups
Mental Health Transformation	<ul style="list-style-type: none"> Joint delivery and procurement (where applicable) to implement the CAMHS Transformation Plans Roll out of Emotionally Healthy Schools pilot Implement actions from the Pioneer Commissioning Review of Mental Health Services 	Joint outcomes and performance monitoring	Emotionally Healthy Schools model to develop future commissioning relationships with schools for integrated services.
Services for those with additional needs	<ul style="list-style-type: none"> Develop integrated services Integrate performance and experience measures Improve the joint assessment and decision making Focus on one plan linked to Personal Budgets as appropriate. Develop in-borough provision to reduce reliance on external placements 	Explore co-location and joint management of services for children with additional needs Joint outcomes and performance monitoring	Development of 0-25 SEND Governance through a newly established 0-25 SEND Partnership Board.
Young Carers	<ul style="list-style-type: none"> Implement Carer's Strategy 		JCLT and HWBB



How will we know there is progress?

For each priority/action area, key activities, milestones, measures and outcomes will be developed through the Governance groups responsible for the action. The broader strategic outcomes are covered within the Children and Young People's Plan and Cheshire East Safeguarding Children Board Business Plan.

Quality and Resources

2016-2018 will see a further significant fall in funding - for local authorities a further circa 20% reduction is required in some areas. Growth or investment will only be achieved through new additional 'specific grants', efficiency savings or decommissioning existing services to create investment capital. The intention is to align investment to maximise integration where there is joint activity and provision. As we move through the joint commissioning continuum it is anticipated that further funding will be pooled to bind commissioning arrangements more tightly together and enable more sustainable long term solutions for service users and providers.

Governance and Accountability

The oversight of the delivery of the Strategy and Plan will be via the Joint Commissioning Leadership Team (JCLT), Children's Trust and ultimately the Health and Wellbeing Board. These groups with the nominated lead officers and respective groups will appraise the extent to which progress is being made against the commitments outlined. A 6 monthly report will be presented to the JCLT that updates the overall position on each of the priority work-streams.