

Cabinet

Date of Meeting: 05 February 2019

Report Title: 0-19 Healthy Child Programme

Portfolio Holder: Councillor Jos Saunders, Portfolio Holder Children and Families
Councillor Liz Wardlaw, Portfolio Health

Senior Officer: Mark Palethorpe, Acting Executive Director People

1. Report Summary

- 1.1. The Council commissioned Wirral Community Trust (CWT) to supply the 0-19 Healthy Child Programme from 30th of September 2015. The initial contract term for this contract was three years and in accordance with the terms and conditions of contract has been extended until 30th of September 2020.
- 1.2. The health and wellbeing of children and young people is central to delivering Cheshire East Council's Outcome 5 identified in the three year plan – people live well for longer – care and health services focus on prevention early intervention of a child's wellbeing and health. The commissioning of 0-19 Healthy Child Programme has a positive impact on the safety, health and wellbeing of our children and young people, and supports our local communities to be strong and supportive.
- 1.3. This specialist commission directly influences children and young people's health and wellbeing. An effective procurement process will ensure that partnerships are strengthened, increasing efficiency, effectiveness and the sustainability of the future programme.
- 1.4. This report recommends the re-commissioning of the 0-19 Healthy Child Programme. Any future service will be co-produced, co-designed and led by the service user journey.
- 1.5. The key milestones for the successful delivery of the project are aligned to the 6 stages of the commissioning cycle and pipeline thresholds for the Procurement and Commissioning Board (see Appendix 1).

2. Recommendations

That Cabinet:

- 2.1. Approves the commissioning of a 0-19 Healthy Child Programme;
- 2.2. Delegate authority to the Executive Director of People, in consultation with the Portfolio Holder for Children and Families, and the Portfolio Holder for Health, to award the 0-19 Healthy Child Programme contract to the successful supplier or suppliers.

3. Reasons for Recommendations

- 3.1. The 0-19 Healthy Child Programme is a universal offer available to all children and young people. The programme aims to ensure that every child gets the good start they need to lay the foundations of a healthy life. The programme recognises the importance of building on the support in the early years and sustaining this across the life course for school-aged children and young people to improve outcomes and reduce inequalities through universal provision and targeted support.
- 3.2. The 0-5 element is a mandated Public Health element of the programme is led by health visiting services. The 5-19 element is led by school nursing services. These professional teams provide the vast majority of Healthy Child Programme services. The universal reach of the Healthy Child Programme provides an invaluable opportunity from early in a child's life to identify families that are in need of additional support and children who are at risk of poor outcomes.
- 3.3. To ensure service consistency, the Council commissioned the immunisation and vaccination service on behalf of NHS England. The delivery of this service is via the 0-19 Healthy Child Programme and is a key element to maintaining children's health and wellbeing.
- 3.4. The proposed strategy is to re-commission the 0-19 Healthy Child Programme, to take a fresh look at the Service ensuring coherent, effective; life course services for children and young people aged 0-19 across Cheshire East which are value for money. The aim is to achieve some efficiency savings via transforming and re-designing the current offer, doing things differently eg; exploring a digital offer, more intergrated working with Early Years settings. The go live date for new service delivery and contract will be 1st October 2020.

4. Other Options Considered

Option 1 - Continue to deliver the 0-19 Healthy Child Programme with existing Provider.

The contract has already been extended until 30th September 2020 and has no further options to extend. This option does not allow for service transformation, improved outcomes and further efficiencies to be made and is therefore not recommended.

Option 2 - De-commission the 0-19 Healthy Child Programme

Local Authorities have statutory responsibilities to deliver Public Health Services to 0-5 services within the 0-19 Programme. De-commissioning this service would impact on children and young people in all Wards and on the statutory responsibilities of the Council. De-commissioning this service would not provide value for money due to the cost implications for the wider health and social care economy, therefore is not recommended.

5. Background

- 5.1. The Health and Social Care Act 2012 sets out a local authority's statutory responsibility for delivering and commissioning public health services for children and young people aged 5-19 years. Responsibility for children's public health commissioning for 0-5 year olds, specially health visiting, transferred from NHS England to local authorities on the 1st of October 2015.
- 5.2. On the 30th of September 2015, Wirral Community Trust was awarded the 0-19 Healthy Child Programme contract for an initial three year period. In accordance to the terms and conditions of the contract this term has been extended until the 30th of September 2020.
- 5.3. Cheshire East's 0-19 Healthy Child Programme consists of the following componentparts:
 - 5.3.1. Health Visiting;
 - 5.3.2. Family Nurse Partnership;
 - 5.3.3. School Nursing;
 - 5.3.4. National Child Measurement Programme and;
 - 5.3.5. Targeted Breastfeeding Support Service.

- 5.4. The 0-19 services is delivering directly within schools and early year settings within Cheshire East, in some instances staff are co-located within these settings. In addition, the service leads on a number of Parenting Journey stops including the health visiting mandatory stops of:
- Antenatal health visit;
 - New baby review;
 - 6/8 week assessment;
 - 1 year review;
 - 2 to 2.5 year review.
- 5.5. The programme works in partnership with Public Health England, Children and Families (Parent Pathway), CCGs (Women and Children's Group) and Schools.
- 5.6. To ensure the consistency for service users the Council commissioned the immunisation and vaccination programme on behalf of NHS England in 2015. The service is commissioned on the terms and conditions of contract set out by NHS England, who are responsible for the management and quality assurance of the service.
- 5.7. The 0-19 Healthy Child Programme delivers the immunisations and vaccination services for NHS England. Therefore, the 5-19 school nursing teams provide HPV, Meningitis C, Tetanus, Diphtheria and Polio, and MMR catch up vaccinations to school children. The annual value from the NHS England to deliver this contract is £71,000 paid directly to CWT.
- 5.8. This represents just over 5% of the total value of the school nursing service. However the time spent by the service in administering the vaccinations significantly exceeds 5% and can take up a significant proportion of the school year. It is likely that some of the service delivery of the 0-19 contract has been subsidising the immunisation and vaccination service, preventing the service from delivering on some of the prevention activities required by the contract.
- 5.9. In addition, from 2017/18 the provision of the Fluenz vaccination for reception age children has transferred from primary care to school nursing. NHS England has worked with the Trust to develop a delivery model which, it is hoped, will minimise the impact on the wider service. This involves providing training for school nurse screeners to administer the vaccine under the supervision of a school nurse. Nonetheless, this has created significant additional work for the service.

5.10. The Quality and Contract Assurance Team have requested that the Provider produces a time and costing exercise to establish the actual cost of delivering the total immunisation and vaccination element of the service (including the Fluenz programme). This will support the open dialogue and negotiation with NHS England over a possible increase in their contribution towards the value of the immunisation and vaccination contract. This would therefore provide further efficiencies, and effectiveness of the current service.

5.11. The following table demonstrates the contract value and 0-19 population in our neighbouring authorities;

Local Authority	0-19 Contract Value per annum	0-19 Population figures for LA (2016 population estimates, latest available)
Cheshire East	Intended recommissioning budget £5,490,667	83,075
Halton	£3,450,000	31,104
Bolton	0-5 is £5,000,000 5-19s is £3,300,000 = 8,300,000	73,813
Cheshire West	£5,700,000 per year with £200,000 additional for the school-age imms and vaccs services commissioned by NHSE.	74,362
Sefton	£5,570,700	59,265
Knowsley	£3,622,116	36,394

5.12. Further benchmarking will be undertaken during the recommissioning process to identify learning and best practice from other Local Authority areas.

6. Implications of the Recommendations

6.1. Legal Implications

6.1.1. The procurement process will need to be undertaken in accordance with the Public Contracts Regulations 2015 and the Council's own Contract Procedure Rules. Legal Services will continue to support the

commission of new services to ensure the Council meets requirements in this regard.

6.2. Finance Implications

6.2.1. The full year costs for the initial first 3 years starting in 2015 were £5.993m which have been reduced by £352k to £5.641m, meaning a saving of £704k over the last two years of the contract.

Contract Year	Cost	Savings Achieved
Year 1 ending 30 th Sep 2016	£5,992,667	
Year 2 ending 30 th Sep 2017	£5,992,667	
Year 3 ending 30 th Sep 2018	£5,992,667	
Year 4 ending 30 th Sep 2019	£5,640,667	£352,000
Year 5 ending 30 th Sep 2020	£5,640,667	£352,000
Total	£29,259,335	£704,000

6.2.2. When this service is recommissioned from the 1st Oct 2020 the intended recommissioning budget will be £5,490,667 per year, which would deliver a further reduction of £150k per year.

6.2.3. This contract is fully funded and budgeted for within the Public Health ring fenced grant.

6.3. Policy Implications

6.3.1. Joint Strategic Needs Assessment.

6.3.2. People Live Well for Longer Commissioning Plan.

6.4. Equality Implications

6.4.1. All public sector authorities are bound by the Public Sector Equality Duty as set out in section 149 of the Equality Act 2010. An Equality Impact Assessment will be carried out and the Council will need to take into account the needs of persons with protected characteristics as set out in equalities legislation during the course of the commissioning process.

6.5. Human Resources Implications

6.5.1. Whilst the proposals do not envisage any HR implications for the Council, TUPE may apply to the existing provider workforce at the point of recommissioning.

6.6. Risk Management Implications

6.6.1. The key risks related to the commissioning are:

- Failure to deliver services which protects health;
- Failure to use Council resources in the most effective way;
- Reputational damage to the Council as commissioner and contract manager should a serious incident occur.

These risks are managed through a risk register.

6.7. Rural Communities Implications

6.7.1. It is important that providers promote service provision to people who experience isolation whether that is geographic or social. This includes improved use of technology and working through local connected communities and networks.

6.8. Implications for Children & Young People/Cared for Children

6.8.1. There are direct, significant and lasting implications for children and young people. Children's safety, health and wellbeing are directly linked to this commission.

6.9. Public Health Implications

6.9.1. Ensuring every child has the best start in life is one of Public Health England's seven key priorities. Getting a good start in life and throughout childhood, building resilience and getting maximum benefit from education are important markers for good health and wellbeing throughout life. The 0-19 Healthy Child Programme contributes to a wide range of Public Health Outcome Framework (PHOF) indicators relating to children and young people as follows:

- School readiness;
- Pupil absence;
- Reduce low birth weight of term babies;
- Increase breastfeeding initiation rate and breastfeeding prevalence at 6 – 8 weeks;
- Reduce smoking rate at time of delivery;
- Reduce under 18 year old conceptions;
- Child development at 2 – 2.5 years;
- Child excess weight in 4-5 and 10-11 year olds;
- Reduce hospital admissions caused by unintentional and deliberate injuries in under 25's;
- Emotional wellbeing of looked after children;

- Smoking prevalence – 15 year olds;
- Self-harm;
- Alcohol-related admissions to hospital;
- Chlamydia detection rate (15-24 year olds);
- Infant mortality;
- Proportion of 5 year old children free from dental decay.

7. Ward Members Affected

7.1. All wards are affected.

8. Consultation & Engagement

8.1. This work is driven by both ongoing consultation and specific engagement about this commissioning cycle and further details are outlined in section 1.5 of this report.

9. Access to Information

9.1. People Live Well for Longer Commissioning Plan.

9.2. Joint Strategic Needs Assessment.

10. Contact Information

10.1. Any questions relating to this report should be directed to the following officer:

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