



By: Presented by Malti Varshney, Consultant in Public Health, KCC; written by Jo Tonkin, Public Health Specialist, KCC

To: West Kent Health and Wellbeing Board

Subject: Final Report from the Children and Young People Task and Finish Group

Classification: Unrestricted

Summary

This paper reports on the work of the Children and Young People's Task and Finish Group.

It briefly lays out the process, identifies findings and proposes recommendations to the Health and Wellbeing Board in relation to leadership, indicators of success, governance, membership and mechanisms that the Board should consider in order to achieve the best possible outcomes for children and young people.

Introduction

The Task and Finish group arose from a presentation made to West Kent Health and Wellbeing Board on children and young people's services.

The aim of the group was to

- Bring together children's commissioners from KCC Children's Services, Public Health, KMCSU with a representative from the CCG to identify key outcomes, priorities, based on identified need, for the CCG
- Identify actions, on the basis of evidence, for how they might be progressed given the strategic direction proposed in the Kent Health and Wellbeing Strategy
- Identify key barriers to progress
- Present these back to the Board for agreement and a decision as to how best to monitor progress

This task and finish group was progressed in the context of a changing governance framework for health and wellbeing for children and young people at Kent and CCG level.

The task was underpinned by the principles agreed in the Health and Wellbeing Strategy. Those are:

- Integrated Commissioning
- Integrated Provision
- Person Centred services

Body of the Report:

Methodology:

The Task and finish group included: Martin Cunnington / Alex Cheshire Kent and Medway Commissioning Support Unit (KMCSU), Mark Ironmonger, West Kent Clinical Commissioning Group (WK CCG), Karen Coffey, Early Intervention Manager, Kent County Council (KCC), Malti Varshney, Public Health Consultant and Jo Tonkin, Public Health Specialist, KCC.

The group took as its starting point the commissioning intentions of the Kent Health and Wellbeing Strategy and the priorities identified in the 'West Kent CCG Commissioning Plan 13-15' and agreed a framework for collecting information about Health and Wellbeing Board priorities.

The information was then compiled and analysed. Gaps in knowledge were identified and were followed up. Update reports were provided to the West Kent Health and Wellbeing Board.

Patient Participation Group (PPG) : The group has not approached the PPG to date . The group judged that the current scope of the task was complex and required refinement before meaningful participation could be undertaken.

Context:

A detailed audit of services and performance was not undertaken. However the diagram below shows a summary of children and young people's services in West Kent (and Kent):

	Ante-natal	0-5 yrs	5-11	12-15	16 - 18
Universal Needs (Tier 1)	GP & COMMUNITY HEALTH SERVICES, SCHOOLS / COLLEGES (School Nursing)				
	MATERNITY AND PRE-SCHOOL CARE (Children's Centres, Health Visitors, Nurseries)		EDUCATION AND TRAINING (Key Stages 1-4, Vocational and Academic Pathways, Apprenticeships, FE and HE)		
	SOLIHULL APPROACH (Solihull Parenting Programmes 0-7 yrs, Workforce - Wide Training Programme)				
	VOLUNTARY & COMMUNITY SECTOR AND LEISURE PROVIDERS (Mediation & Counselling Services, After School & Holiday Clubs, Youth & Sports & Activity Clubs, Uniformed Groups)				
Range from Low/ Vulnerable to High/ Complex Needs (Tier 2 and 3)	EARLY INTERVENTION AND PREVENTION COMMISSIONED SERVICES (Intensive Family Support Services, Domestic Abuse, Family Mediation, Positive Relationships, Young Carers Service, Adolescent Support Service)				
	EARLY INTERVENTION AND PREVENTION KCC & PARTNER SERVICES (MASH, Health Visitors, Midwives, GPs, Housing Support, Early Support Programmes, Substance Misuse Service, Portage, Specialist and Disability Services, SEN Support, Family Support Services, 16+ Homeless, KIASS, Troubled Families, Educational Psychologists, Integrated Family Support Services, EIP Teams)				
			EMOTIONAL HEALTH AND WELLBEING SERVICE (Young Healthy Minds, CAMHS, Post Abuse Services, Therapy)		
			PARENTING PROGRAMMES (Incredible Years, Strengthening Families, Strengthening Communities)		
			HEALTH IMPROVEMENT & SEXUAL HEALTH SERVICES (Healthy weight, smoking cessations and sexual health service)		
	EDGE OF CARE (Safer Stronger Families, Family Group Conferencing)				
Complex or Acute Needs (Tier 4)	KCC SPECIALIST CHILDREN'S SERVICES (Virtual School Kent, Disabled Children Team, Unaccompanied Asylum Seeking Children Teams, Children in Care Teams, Fostering & Adoption Team, Commissioned Service including Leaving and After Care Service, Independent Fostering Provision, Residential Homes and Special Schools, Short Breaks and Respite Units, Adoption, Kinship)				
					YOUTH OFFENDING & PROBATION (Bail and Remand)
HOSPITAL AND ACUTE HEALTH SERVICES (Tier 4 CAMHS – SLaM, Accident and Emergency, Sexual Health, Paediatric, Sexual Exploitation, End of Life Care, Disability Services, Oncology)					

Kent County Council services are being transformed to progress integrated and personal centred.

Findings:

The group has identified progress across all the outcomes and priorities. There are also areas where increased engagement from Health and Wellbeing partners may result in greater improvement.

The group identified the following actions as key priorities for West Kent Health and Wellbeing Board:

Priority	Rationale	Current barriers to progress	Actions and roles
<p>Review of and development of a Community Paediatric Nursing Team to better manage long term conditions in the community</p>	<p>Improved health and social care outcomes for children, young people and their families Reduced costs and repatriate funding from high cost care Secure nursing care and public health interventions for children in Special Schools</p>	<p>Capacity and continuity to progress Structural barriers to repatriation of funds from high cost care Fragmentation of health commissioning and formative stage of new structures</p>	<p>Clinical Commissioning Group to commission a review of the Community Paediatric Nursing Team NHS England to facilitate repatriation of funds from acute to the community Health and Wellbeing Board to be assured that the health needs of all children are met so that they can be engaged in education, family and community life,</p>
<p>Build effective ante natal and post natal pathways which improve health and reduce risks to mother and child</p>	<p>Outcomes for breastfeeding and smoking in pregnancy require improvement in West Kent Pathway improvements provide opportunities to address parental substance misuse, domestic violence and mental health</p>	<p>Whole systems approach is required but is not yet in place.</p>	<p>Health and Wellbeing Board to initiate and oversee a multi agency review of the ante and post natal pathway.</p>

	Significant improvements in morbidity can be achieved through making improvements to the pathway		
Improving emotional health and wellbeing and mental health ¹	Clinical concerns about the current performance of the service	Fragmented accountability Systems wide approach to emotional health and wellbeing is indicated.	Health and Wellbeing Board to support a review of the emotional health and wellbeing pathway across Kent. Progress and monitor a resulting multi-agency action plan to ensure improvements across the pathway.
Implementation of SALT (Speech and Language Therapy) Framework and in particular the Balance System Framework	The delivery of SALT is critical to children and young people accessing and benefiting universal, targeted and specialist services. SALT implementation has system wide benefits.	A SALT Framework has been developed by a multi agency group across Kent. Systems wide engagement is now required to ensure that it can be implemented in West Kent.	Health and Wellbeing Board lead in implementing the SALT Framework in West Kent West Kent CCG to ensure that the Balance System Framework be embedded across all those working with children and young people.

The group identified that schools and colleges are key partners in the delivery of health and wellbeing outcomes for children and young people , for example, under 18 conceptions and risk taking behaviour, yet are largely absent from West Kent Health and Wellbeing Board decision making.

Commissioning and decision making around children and young people's issues happens at different geographies and involves different partners. Where commissioning occurs Kent wide, it is not clear who is tasked with and what the mechanism is for providing feedback.

¹ CAMHS delivery fell out of scope of the group because of the representation on the group but has been articulated as a priority for West Kent CCG.

Data and information sharing occurs at different geographies and is reported to different settings. This makes intelligence gathering and assurance complex and obtuse.

Some of the priorities require refinement and may benefit from clarity regarding what the Health and Wellbeing Board expects will be achieved, over what time frame. Capacity may be an issue.

Data and information sharing occurs at different geographies and is reported to different settings. This makes intelligence gathering and assurance complex and obtuse.

Conclusions:

The current governance framework for achieving children and young people's outcomes in West Kent requires strengthening to ensure that West Kent CCG Health and Wellbeing Board can be assured that outcomes for children and young people in West Kent are being progressed and to ensure that outcomes which require a systems wide focus can be progressed.

There are opportunities for integrated commissioning, provision or person centred approaches in Kent. However, these opportunities will only be progressed if representation, reporting and lines of accountability between West Kent Health and Wellbeing Board and decision making bodies at different geographies can be established.

Progress is being made against the priorities but clarity of leadership, purpose and expectation is required overall. There are specific priorities for the Board which the group have identified that require systems wide effort and could achieve improvements for children and young people in West Kent like reviewing and improving the antenatal and postnatal pathway.

Schools are a key partner in progressing improvements for health and wellbeing but are largely absent from Health and Wellbeing Board discussions.

DISCUSSION POINT: How are commissioners currently influencing education providers to progress health and wellbeing of children and young people? How can this be improved?

RECOMMENDATIONS for the BOARD

1. A sub group of the West Kent Health and Wellbeing Board needs to be established. It will:
 - take as its constituents all children and young people resident in West Kent
 - be formed around the key priorities for children and young people in Kent. This will need to include the health needs of parents that impact significantly on children and young people

- add value to and ensures lines of accountability to existing Kent wide commissioning arrangements
 - include Education representation
2. Establish clear outcomes and targets on the commissioning priorities so clarifying what success looks like for the children and young people population of West Kent.
 3. The Health and Wellbeing Board needs to consider progressing as priority:
 - Review and develop a Community Paediatric Nursing Team to better manage long term conditions in the community
 - Build effective ante natal and post natal pathways
 - Improving child and adolescent emotional health and mental health
 - Implementation of SALT (Speech and Language Therapy) Framework
 4. The role that primary care plays in progressing each commissioning priorities for children and young people needs to be articulated, implemented and monitored.
 5. Review the progress and identify milestones for the development of integrated commissioning, provision and person centred services for children and young people in Kent. This includes ensuring that there are opportunities for children, young people and their families in West Kent have the opportunity to share their experiences and shape commissioning, development, delivery and review of services.

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