

## NORTH YORKSHIRE CHILDREN'S TRUST

### Agenda Item Cover Sheet

**TITLE OF PAPER:** NHS North Yorkshire and York Strategic Plan and Children and Young People's commissioning priorities

**DATE OF MEETING:** 17<sup>th</sup> May 2010

**ORGANISATION/SUB GROUP:** NHS North Yorkshire and York

**RELATED CYPP IMPROVEMENT PRIORITY:** Be Healthy

**RELATED PERFORMANCE INDICATOR(S):**

	Vital Sign	LAA
Percentage of women who have seen a midwife or a maternity healthcare professional, for assessment of health and social care needs, risks and choices by 12 completed weeks of pregnancy.	Yes	
Obesity among primary school age children – Reception and Year 6	Yes	Year 6
Under 18 conception rate per 1,000 females aged 15-17	Yes	Yes
Percentage of infants breastfed at 6-8 weeks	Yes	
Effectiveness of Children and Adolescent Mental Health Service (CAMHS) (percentage of PCT and Local Authorities who are providing a comprehensive CAMHS)	Yes	
Prevalence of Chlamydia	Yes	
Access to GUM services	Yes	
Proportion of mothers throughout North Yorkshire known to smoke during pregnancy (at delivery).		Yes

**MAIN RECOMMENDATIONS OF PAPER:**

- To note and receive the update on priorities

**IMPACT ON RESOURCES:** Not quantified as yet

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# **Briefing for North Yorkshire Children's Trust Board on the NHS North Yorkshire and York Strategic Plan and Children and Young People's Commissioning Priorities**

## **1. Introduction**

The aim of this paper is to inform the board of our work in relation to children and young people priorities within the context of the NHS North Yorkshire and York five year Strategic Plan. The paper will inform the board of the Children and Young People's priorities within the Strategic Plan and the priorities and expected actions from this in the 2010/2011 Operating Plan within the Financial Plan constraints for NHS North Yorkshire and York.

## **2. Partnership working**

Increasingly work on the Children and Young People's agenda is driven by the strengthening partnership with our local authorities and through our commitment to Children's Trusts. It is clear from national policy documentation that the Children's Trust arrangements will take an increasingly important role in Children's Health commissioning.

The direction and key commitments of the Children's Trust partnership are laid out in the Children and Young People's plan.

We are strongly committed to Children's Trust partnership arrangements and our priorities aim to achieve those identified in the current Children and Young People's plans particularly within the Be Healthy and Stay safe streams.

## **3. NHS North Yorkshire and York Strategic Plan**

The PCT has recently published and launched its 5 year Strategic Plan. This sets out the overall goals that NHS North Yorkshire and York is aiming to achieve over the next five years and the strategic initiatives that are to be prioritised in order to achieve these goals. There are six strategic initiative areas that are as follows:

- Build an improved community system
- Dementia
- Help people to change their behaviour
- Self care and management of disease
- Clinical networks and alliances
- Urgent Care system

Within these six areas there are specific Children and Young People's services initiatives that have been identified as priorities within the plan and these are detailed below

**a) Review of universal services for all children and young people in line with the Healthy Child Programmes covering 0-5 and 5-19 year olds.**

The aim of this review is to begin to commission 0 – 19 years universal services in line with the Healthy Child Programme.

This initiative will

- Commission evidence based care
- Ensure compliance with current and future national Safeguarding guidance
- Commission equitable access to services across the localities
- Improve access to routine health services during the development of a child whilst enabling services to focus on the needs of vulnerable children
- Improve services for young people aged 16 to 18, particularly those not in school settings
- Increase focus on early intervention, prevention and health promotion.
- Improve integration with Local Authority and primary care services where beneficial

**b) Improving Services for Children with Complex Needs and Disabilities**

This initiative is about working jointly with the Local Authorities to review services for children with complex needs and disabilities to ensure that they have the necessary medical treatment and support to ensure as healthy and inclusive a life as possible. There is an increasing number of children with complex needs and technology dependent children who are living at home for much longer periods and these children, their families and carers need support to enable this...

These children often require additional specialist health care services either in their own homes, school or other settings. They need tailored and co-ordinated programmes of care to enable them to access educational and social settings.

This initiative will:

- Commission evidence based care consistently and equitably across North Yorkshire and York
- Enable children to have improved access to education, leisure services and short breaks by improving medical training and support to carers and service providers
- Support short breaks availability for a wider cohort of disabled children and their families
- Improve access to therapy services to support the mobility and health outcomes for children with complex needs and disabilities

- Improve access to equipment to enable children to access services and short breaks
- Develop tailored and co-ordinated programmes of care across health, social care and education
- Improve support to parents and carers of children with complex needs and disabilities

**c) To review CAMHS provision to identify need and commission equitable services through common pathways.**

This initiative will:

- Review CAMHS Eating Disorder Services within the county
- Ensure appropriate services are provided in the right place and are of sufficient quality for CAMHS patients
- Improve access commissioned in the east of the PCT to provide equitable out of hours specialist CAMHS access across North Yorkshire
- Commission equitable access to CAMHS services for all children and young people with mental health problems and a learning disability
- Working with social care and education, commission effective services to children who are in placements, fostered or adopted
- Aim to provide fully integrated early intervention services with local authorities
- Address any quality issues in relation to the National CAMHS review and recommendations

**d) The prevention and management of Childhood Obesity**

We aim to design and commission a comprehensive range of weight management services and interventions along a tiered care pathway to prevent and manage over weight and obese children, young people and their families

We continue to work with local authority colleagues on the commissioning of services for this WCC priority. Parents are now receiving a letter informing them of their child's information from the National Child Measurement Programme carried out in reception and year 6.

To compliment this, a number of child obesity focused services have been and are being commissioned to sign post people to should they need them. These will compliment services such as MEND in Ryedale that already exist

This initiative will:

- Provide weight management programme to over 400 families in the first 2 years
- Contribute to a reduction in GP consultations due to BMI
- Enable the prevention / delaying Type II diabetes
- Work towards a reduction in year 6 obesity

**e) Sexual Health Identification and treatment services**

To review and where appropriate re-commission services to improve the health and wellbeing of people with sexual health issues in line with the North Yorkshire & York Sexual Health Commissioning Strategy.

This initiative will:

- Review, redesign and re-commission care pathways for sexual health services across NYY ensuring equitable high quality services.
- Maximise the opportunities for efficiency & productivity within a joint commissioning framework with local authorities. This will include reducing the average cost of Chlamydia screens to ensure it is in line with expectations in the National Chlamydia Screening Programme guide for Commissioners published in December 2009
- Ensure there is equity of access to sexual health services across the PCT area
- Lead to the commissioning of more integrated sexual health services so that there is less duplication and gaps in service delivery and more efficient commissioning.
- In conjunction with partners commission specialist sexual health services in secondary schools and colleges
- Ensure there is equity of access to GUM across North Yorkshire and York and that there is enough capacity to meet the 48 hour offered and seen targets,
- Develop a clinical pathway and choice approach for the efficient and cost effective commissioning of termination services including an improved access to medical terminations

**f) Maternity and Newborn Pathway**

To review, redesign and re-commission the maternity pathway across North Yorkshire and York. This will include investigating the potential for increased clinical partnership working between providers to ensure that services are commissioned in a robust and sustainable way in line with national and local expectations. It will need to and offer quality and choice to the local population.

This initiative will:

- Contribute to a reduction in infant mortality rates against national targets
- Improved breast feeding rates at birth and at 6 to 8 weeks against NHS North Yorkshire and York trajectory. Particular focus for improvement will be on current providers with low initiation rates
- Contribute to a reduced level of women smoking in pregnancy leading to a reduction of deaths in 1st 4 weeks after birth. Particular focus will be on providers with high prevalence of smoking in pregnancy.

- Improved percentage of women who have seen a midwife or a maternity healthcare professional, for assessment of health and social care needs, risks and choices, by 12 completed weeks of pregnancy.
- Lead to commissioning services that will be safe with appropriate clinical staff in place to allow full choice of birth offer to be maintained. There will be a reduced number of women having to give birth in hospital who chose to have their birth at home.
- Work towards a reduction in the levels of Caesarean births

#### **4. Operating Plan and 2010/2011 Children and Young Peoples priorities**

In effect the Operating Plan is the first year of the Strategic plan. A significant amount of the work to be undertaken during 2010/2011 will have its focus on improving our standing against the various vital sign targets, LAA targets, inspection outcomes and moving forward the broader children's priorities in the Children's Trust Children and Young People's plans. This will be carried out within the context of the financial framework agreed for NHS North Yorkshire and York.

##### **a) Financial Context**

The NHS along with other public sector organisations is heading into increasingly challenging financial waters.

The PCT Financial Plan is derived from the Strategic Plan. The PCT has been working with the Strategic Health Authority and local acute providers, through a System Management Executive to establish financial stability across the health economy.

The approach covers the totality of PCT resource for which there is direct control, and the contracts with 3 acute providers (Scarborough, York, Harrogate) and CMHS and has been made up of the relevant Chief Executives and Directors of Finance

The output of this approach is a revised financial plan for year one of the Strategic Plan based on ensuring the local health economy has a stable financial environment to enable the delivery of vital signs

NHS North Yorkshire and York is tasked with delivering a year on year surplus as part of the overall NHS financial planning process. Part of this challenge will be met through the delivery of productivity initiatives based on the strategic plan. An increased move to more medical TOP and a reduction in the rates of Caesarean births are identified as the main contributions from the Children and Young People's area.

##### **b) Vital Signs and LAA targets**

Listed below are the key metrics for children and young people that we are aiming to achieve and that will be a key focus of work during 2010/2011

	Vital Sign	LAA
Percentage of women who have seen a midwife or a maternity healthcare professional, for assessment of health and social care needs, risks and choices by 12 completed weeks of pregnancy.	Yes	
Obesity among primary school age children – Reception and Year 6	Yes	Year 6
Proportion of children who complete immunisation by recommended ages	Yes	
Under 18 conception rate per 1,000 females aged 15-17	Yes	Yes
Percentage of infants breastfed at 6-8 weeks	Yes	
Effectiveness of Children and Adolescent Mental Health Service (CAMHS) (percentage of PCT and Local Authorities who are providing a comprehensive CAMHS)	Yes	
Prevalence of Chlamydia	Yes	
Access to GUM services	Yes	
Proportion of mothers throughout North Yorkshire known to smoke during pregnancy (at delivery).		Yes

### c) Outcomes of Inspections

#### Ofsted/CQC Safeguarding Inspection

- **Health Visiting**

We are on track with actions required from the Ofsted/CQC safeguarding inspection carried out in September 2009 and have already agreed some immediate health visiting and school nursing resource with CMHS to the equivalent of an extra 6 Band 6 clinicians and 1 Band 4 clinician. This capacity has already started to be played out by CMHS to those areas where any potential safeguarding risk was deemed to be highest.

This is now being followed up with the broader strategic piece of work to review universal service input to the 0-19 age group to ensure we move towards commissioning a service in line with the expectations of the National Child Health Strategy and in particular delivering in line with the Healthy Child Programmes

- **Looked After Children**

In line with the inspection outcomes a detailed health strategic plan for Looked After Children along with an accompanying action plan has been developed and this is being presented separately to this meeting of the Children's Trust Board

## **Youth Justice Service**

The thematic review carried out by HMIC highlighted, amongst other things issues on the commissioning and provision of health services for this population. It also highlighted some inequity of access to some services dependent on where you were in North Yorkshire.

Work to oversee the improvements needed from the inspection, is carried out through the Youth Justice Board. Some aspects of health improvement are already taking place or planned such as plans for training in the promotion of sexual health and the use of the mental health screening tool 'SQIFA'.

However there are other aspects that need recognising and prioritising. The inspection highlighted that approximately 40% of 16 year olds and younger are not receiving full time education and some do not have access to a GP so potentially are not receiving universal services delivered via schools. The PCT will take this into account within its overall review of 0-19 universal services and delivery of the Healthy Child Programme expectations.

It has also been highlighted that there is inequity of access to sexual health services with some service available in Harrogate and a more limited service available in Scarborough. This will be looked at as part of the overall sexual health initiative within the strategic plan

The PCT will also work with the Youth Justice Board to understand the Speech, Language, and Communication issues and the support needed by the Youth Justice system to identify and assess issues such as ADHD, conduct disorder and dyslexia.

### **d) Operating Plan priorities**

#### **Childhood obesity**

We continue to work with local authority colleagues on the commissioning of services for this WCC priority. Parents are now receiving a letter informing them of their child's information from the National Child Measurement Programme carried out in reception and year 6.

To compliment this, a number of child, young people, and family weight management services have been and are being commissioned to sign post people to should they need them. These will compliment services such as MEND programme that is already available in some parts of the county.

#### **Children with Complex needs**

There are increasing numbers of children with complex needs that need support to enable them to be able to live as normal a life as possible. Our work in this area is embedded in partnership with LA's. A key national expectation on health and the local authorities is to enable more short breaks to be available for these children.

As part of our responsibility within this agenda we are currently out to tender on a 12 month pilot to provide a specialist nursing support team. This team will provide things such as training on medical equipment etc for activity providers to enable them to accept children with complex health needs.

There is also audit work being undertaken to understand and from here improve the access to specialist equipment required

## **CAMHS**

Delivery of a comprehensive CAMHS service is a key requirement for NHS North Yorkshire and York.

During 2010/2011 there will be the development of a CAMHS Needs Assessment, a benchmark of North Yorkshire services against outcomes of national CAMHS survey 2008, and the establishment of key areas of need for children in placement, and pre and post adoption placements

## **Sexual Health**

We are currently working with partners in Yorscreen – who from April 2010 co-ordinate the National Chlamydia Screening Programme for all of North Yorkshire and York and our primary care general practice and pharmacy colleagues to increase the level of Chlamydia screening for the 15-24 year olds.

Steps are beginning to increase the ability to provide LARC as a major method of contraception. This and using the outputs from the contraceptive mapping being led by the NYCC Teenage Pregnancy Co-ordinator will form major planks of our work with Local authorities to reduce the levels of teenage pregnancy in the patch.

We will be looking at the outcomes of the North Yorkshire Contraceptive review work to identify actions particularly around access to sexual health services in secondary schools and further education establishments that will impact on our key vital sign targets around Chlamydia Screening and Teenage Pregnancy rates.

## **Maternity and Newborn Services**

NHS North Yorkshire and York has worked with maternity providers through the Maternity Network to identify key needs and ways forward to meet the needs outlined in Maternity Matters. As part of this work a draft service specification has been developed to specify expectations within current contracts. The network has also started to share the benefits of best practice and to identify potential for closer working between the providers. This will continue to be explored and developed in 2010.

Specific actions for 2010/2011 include:

- Ensure that current maternity service specifications are fit for purpose and in line with national policy to become embedded in contracts with providers.
- Ensure that baseline performance information is in place for the key indicators outlined in measuring success against maternity matters including using the maternity dashboard information
- As part of the Q and P programme work with providers to reduce the rates of Caesarean births
- Carry out benchmarking exercise of performance measures against other similar PCT areas
- Develop project proposals for a review of the maternity care pathway commissioned

## **5. Next steps**

Now that the overall strategic initiatives for Children and Young People within the Strategic Plan have been identified and the operating plan expectations have been agreed, along with a revised financial plan framework, more detailed action plans will be developed for areas identified as priorities

The priorities and actions above will be used to inform the NHS North Yorkshire and York contribution to revisions of the Children's Trust Children and Young Peoples Plan.

Work will be undertaken with the NHS North Yorkshire and York locality directors to ensure that the overall children's priorities are delivered in the localities where the need is greatest.

## **6. Recommendations**

The Children's Trust Board is asked to note the update on children priorities within NHS North Yorkshire and York.