

NHS
Southwark
Clinical Commissioning Group

# Southwark Children and Young People's (CYP) Local Commissioning

Southwark Health and Wellbeing Board
18 June 2015

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The best possible health outcomes for Southwark people

### Introduction and **Purpose**





- Children and Young People's (CYP) Public Health Profile
- Strategic Shared Aims:
  - Our Healthier South East London
  - Giving London's children the best start in life Transformation Programme
- **Local Commissioning** 3.
- Southwark Council Families Matter Approach
- Local Challenges and Opportunities 5.
- 6. What difference are we hoping to make for our local children?
- What could this look like?
- Strategic Framework Proposal





The chart below shows how the health of people in this area compares with the rest of England. This area's result for each indicator is shown as a circle. The average rate for England is shown by the black line, which is always at the centre of the chart. The range of results for all local areas in England is shown as a grey bar. A red circle means that this area is significantly worse than England for that indicator; however, a green circle may still indicate an important public health problem.

Signif	ificantly worse than England average				Regional	average^	England Average	
O Not si	significantly different from England average			England Worst				Englan Best
Significantly better than England average		Local No	Local	Eng	Eng	25th Percentile	75th Percentile	Eng
Domain Indicator		Per Year	value	value	worst		England Range	best
Our communities	1 Deprivation	106,193	35.6	20.4	83.8		• •	0.0
	2 Children in poverty (under 16s)	15,605	28.6	19.2	37.9		•	5.8
	3 Statutory homelessness	555	4.3	2.3	12.5		••	0.0
	4 GCSE achieved (5A*-C inc. Eng & Maths)†	1,428	62.4	56.8	35.4		(0	79.9
5	5 Violent crime (violence offences)	5,366	18.3	11.1	27.8		• •	2.8
_	6 Long term unemployment	2,567	11.7	7.1	23.5			0.9
	7 Smoking status at time of delivery	166	3.8	12.0	27.5		<b>*</b> 0	1.9
Children's and young people's health	8 Breastfeeding initiation	4,381	88.1	73.9				
ren's g peop	9 Obese children (Year 6)	692	26.7	19.1	27.1	•	÷	9.4
biid gub	10 Alcohol-specific hospital stays (under 18)†	8.3	13.9	40.1	105.8		♦ 0	11.2
· ×	11 Under 18 conceptions	124	30.6	24.3	44.0		• •	7.6
£ ₀	12 Smoking prevalence	n/a	20.7	18.4	30.0		<ul><li>   •</li></ul>	9.0
heal	13 Percentage of physically active adults	259	58.2	56.0	43.5		♦ ○	69.7
Adults' health and lifestyle	14 Obese adults	n/a	20.6	23.0	35.2		O.	11.2
A m	15 Excess weight in adults	389	56.3	63.8	75.9		40	45.9
	16 Incidence of malignant melanoma†	12.3	6.1	18.4	38.0		<b>♦</b> •	4.8
≨	17 Hospital stays for self-harm	300	101.5	203.2	682.7		0	60.9
Disease and poor health	18 Hospital stays for alcohol related harm†	1,399	601	645	1231		0	366
8	19 Prevalence of opiate and/or crack use	2,829	13.1	8.4	25.0		• •	1.4
and	20 Recorded diabetes	14,196	5.5	6.2	9.0			3.4
ease	21 Incidence of TB†	109.3	37.2	14.8	113.7		•	0.0
Š	22 New STI (exc Chlamydia aged under 25)	5,508	2516	832	3269	•	•	172
	23 Hip fractures in people aged 65 and over	146	576	580	838		<b>•</b>	354
£	24 Excess winter deaths (three year)	66.5	15.9	17.4	34.3		<b>O</b>	3.9
l des	25 Life expectancy at birth (Male)	n/a	78.6	79.4	74.3		• •	83.0
8	26 Life expectancy at birth (Female)	n/a	83.8	83.1	80.0		0	86.4
Life expectancy and causes of death	27 Infant mortality	20	4.0	4.0	7.6			1.1
	28 Smoking related deaths	257	329.8	288.7	471.6			167.4
	29 Suicide rate	19	7.5	8.8				
	30 Under 75 mortality rate: cardiovascular	134	94.4	78.2	137.0		• •	37.1
	31 Under 75 mortality rate: cancer	218	153.8	144.4	202.9		O   •	104.0
5	32 Killed and seriously injured on roads	110	37.5	39.7	119.6		(C)	7.8



#### Child health

- In Year 6, 26.7% (692) of children are classified as obese, worse than the average for England
- The rate of alcohol specific hospital stays among those under 18 was 13.9\*, better than the average for England.
- Levels of teenage pregnancy and new STI are worse than the England average.
- Levels of GCSE attainment, breastfeeding and smoking at time of delivery are better than the England average



# Our Healthier South East London and London Southwark Clinical Commissioning Group

- Developing population-based networks to promote health/wellbeing and co-ordinate care
- 2. Reduce variation in quality of services
- Develop commissioning of children and young people services to enable the effective commissioning of pathways of care
- Integrating care across public health and primary and secondary services
- Develop innovative access models e.g. Local Care Networks

### Local Commissioning





Good partnership working exists between Local Authority and CCG with Public Health formalised through monthly meetings of the Children's Commissioning Board. Current projects includes:

- Vitamin D programme expanding universal coverage from pregnancy to four years through community pharmacies
- School Nursing and Health Visiting Service improvements and monitoring, including commissioning responsibility moving to the Local Authority
- Tackling Childhood Obesity Workstream, e.g. a follow up programme that GPs can refer families to, following up the child measurement programme in years R and 6
- Early Start Service, e.g. child health development workers who can closely link to early help services, GPs and community pharmacists (see Appendix 2)
- Planned extension of the Children's Community Nursing Team to provide an admissions avoidance service for local children from Oct 2015, 7 days a week, 8am – 10pm

### Families Matter – The Model





- Effective and accessible universal services from 0-19 years including strengthening links with providers of early years' learning, primary and secondary education, health services, youth services and children's centres to enhance resilience and develop protective factors in children, young people and families.
- Services which provide prompt support when problems first emerge where early resolution decreases the risk of the problem escalating to a higher, more serious level of need, or becomes entrenched, and thus more difficult to resolve.
- More intensive services which reduce the number of children and young people who are risk of significant harm and / or being taken into care, enabling more children and young people to live at home with their families.
- Statutory Children's Social Care services for children and young people at risk of or experiencing serious harm.
- A continuum of care that ensures that those who require support at varying levels of intensity receive a seamless service and that support continues to be provided for those leaving care or other statutory interventions.

Southwark Council Families Matters Tiered Approach (see Appendix 3 for definition)

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CP & LAC Statutory Section 47

#### CIN

Statutory Section 17

Targeted services are likely to still be appropriate alongside social work involvement.

#### **Targeted**

Needs cannot be met by universal services.
Families are likely to have some of the following:
Ongoing and problematic substance misuse of parents,
mental health needs of parents, domestic violence,
learning difficulties of parents and children, offending,
risk of offending or ASB, statutory parenting orders.

#### **Universal and Universal Plus**

Services available to everyone to support a good quality of life.

Needs can be effectively addressed at an early stage and commonly involving only one service to prevent problems from escalating.

## **Local Challenges** and Opportunities





- Developing a joint Children and Young People's Strategy across the CCG and the Counc, underpinned by joint commissioning intentions, for example:
  - ✓ We will commission services that, as far as possible, enable children and their families to access support through universal settings within their local community from 0-25 years of age
- Transfer of Health Visiting Services from NHS England to the Council in October 2015
- Partnership working across health and the Council to better meet emerging needs at a local level by looking for alignment between Families Matter and Local Care Networks
- Children and Young People's Health Partnership funded by the Guy's and St Thomas' Charity is leading an integration project for children's health focusing on improving children and young people's outcomes across the system.
- Further development of partnership working across commissioners and providers especially schools
- Build capacity across system to early identify and address triggers and behaviours of emotional wellbeing, poor mental health or potential mental health issues as well as a focus on prevention
- Financial challenges across public services, both the CCG and Southwark Council
- Shifting the balance to preventing problems when they arise to relieve the pressure on specialist services e.g. A&E, specialist clinics

# What difference do we hope to make?

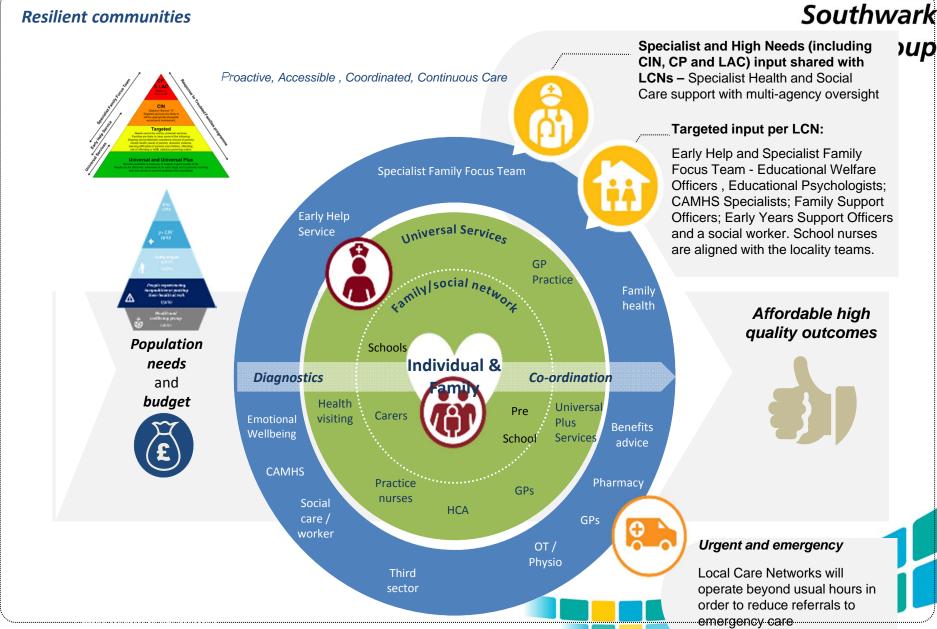




- Commission for and improve outcomes for children and young people across a range of domains including physical health, mental health, social and emotional development and reduce health inequalities.
- Jointly deliver a holistic local offer for children and young people across a range of health and local authority services.
- Strive for true integration of health, social care, housing, education and other partners as required.
- Reduce the demand on acute services across health and social care through moving away from a culture of onward referral and towards a culture of holistic support that enables earlier intervention to resolve issues as soon as they emerge.
- Ensure a clear focus on safeguarding, preventing and reducing the impact of abuse and neglect.
- Work with children, young people and families as equal partners in their services to meet their needs in the most appropriate way.

#### **Local Care Networks + Families Focus**





### **Strategic Framework and Timeframe**



# Southwark Clinical Commissioning Group

Actions	Timeframe
<ul> <li>Develop a high level strategic framework focusing on the following priorities:         <ul> <li>Early Years/Better Start 0-5/School ready</li> <li>Emotional Wellbeing and Mental Health</li> <li>Long Term Physical Conditions (diabetes/asthma/epilepsy/sickle cell)</li> <li>Emergency Admission Avoidance</li> <li>Young Peoples Health 10-25 (sexual health/drugs/self harm/gangs)</li> <li>Vulnerable Children and Young People (LAC/SEND/CIP/Learning Disabilities)</li> <li>Childhood Obesity</li> <li>Neglect</li> </ul> </li> </ul>	Jun - Jul 2015
<ul> <li>Focus - children and young people, families, perinatal mental health and maternity</li> <li>Stakeholder Mapping and Engagement</li> </ul>	

### **Strategic Framework and Timeframe**



# Southwark Clinical Commissioning Group

Actions	Timeframe
Review all CYP services - delivery against quality outcomes and patient experience supporting the transformation to delivery from Local Care Networks with outcomes focused care	Jun – Aug 15
<ul> <li>CYP (including maternity) Joint Strategic Needs Assessment</li> <li>Stage 1 Needs Assessment</li> <li>Stage 2 JSNA report completed</li> </ul>	May – Aug 15 Aug – Nov 15
Review of JSNA against Service Outcomes to inform Strategy development including contract notification/provider development discussions with high level service outcome focused changes (Sept) in in line with overall direction for Local Care Networks	Aug – Dec 15
Finalise Joint Southwark CCG and Council Strategy (up to 5 years)	Dec 2015
Mobilise changes	Jan 16 – Apr 17

### **Engagement**



# NHS Southwark Clinical Commissioning Group

Actions	Timeframe
<ul> <li>Test Strategic Framework Process and Priorities with CCG and Southwark Council:</li> <li>CCG Commissioning Strategy Committee - 11 June 2015</li> <li>Joint Children's Commissioning Board (proposed working group) – 12 June 2015</li> <li>Southwark Health and Wellbeing Board - 18 June 2015</li> </ul>	Jun – Aug 15
<ul> <li>Children and Young People Health Partnership – June 2015</li> <li>Integration and Neighbourhood Models of Care CCG Board (LA representation) – 9 July 2015</li> <li>Engagement and Patient Experience Committee (CCG) – July 2015</li> <li>Southwark Council Young People and Family Engagement Network June/July 2015</li> </ul>	
Family and CYP Engagement Plan to engage on Strategy	Jul – Oct 15



### Appendix 1

# Locally Commissioned Services and Commissioner Responsible



#### **CCG Commissioned Services**



#### **Core Commissioned targeted and specialist mental health services**

- The Children's team (0-12 years)
- Adolescent Service (12-18 years)
- Neurodevelopmental Service (NDS)
- Carelink (Looked after Children)
- CAMHS Early Help Team (within Early Health Locality Teams)
- Specialist Outpatient CAMHS services e.g. Forensic Psychology, OCD treatment

#### **Acute and Community services**

- Emergency care within hospitals (Evelina and King's College NHS Foundation Trust)
- Outpatient care including paediatric diabetes services
- GP services in a co-commissioning arrangement with NHS England from April 2015
- Child protection
- Nutrition and Dietetics services (within Children's Centres in partnership with Local Authority)
- Speech and Language Therapy
- Occupational therapy
- Community Paediatricians
- Special Nurse Nursing
- Continuing Care



### Other Health Services and Commissioners

# NHS Southwark Clinical Commissioning Group

#### **NHS England**

- Public health services for children from pregnancy to age 5 (Healthy Child Programme 0-5), including health visiting, responsibility for Child Health Information Systems. (Responsibility for children's public health 0-5 due to transfer to local authorities in October 2015)
- Specialist CAMHS inpatient services
- General Practice GMS/PMS/APMS Core Contract in co-commissioning arrangement with CCG from April 15
- Specialist services including cancer and rehabilitation
- Immunisation programmes including childhood immunisation programme under 5 and in schools
- National screening programmes
- Dental services

#### Local Authority Public Health Transfer, commissioned by CCG on the LAs behalf

- School nursing services
- National Measurement Health Programme
- Healthy eating, activity and obesity services
- Accident prevention
- Nutrition
- Dental public health
- Prevention/advice e.g. smoking, sexual health
- Infant mortality
- Families Matters early help
- Functional Family Therapy
- Parental Mental Health Team





### Appendix 2 - Early Start Service

Early Start is a 2 year test and learn programme aimed at the promotion of health literacy and well-being for children aged 0-5 years and their families. The service will be expected to evolve during these 2 years and the commissioners will be keen to work closely with the provider during this pilot.

Health literacy is reported as being essential to make the best decisions regarding your health. Poor or limited health literacy is associated with:

- reduced use of preventive services such as screening, immunisation
- Reduced ability to seek out treatment and management of long term conditions such as diabetes or asthma
- Inability to interpret food nutrition labels, complete insurance forms, or understand directions on prescriptions and other medicines
- Inability to locate health care providers and services

**Health literacy** can be defined as the ability to understand and have access to basic health information and services to make informed health decisions.

#### Key Outputs include:

- Developing, supporting and promoting engagement with a programme of information to be provided by the relevant clinician
- Providing direct `named` link to specific GP practices and pharmacy offering advice re non clinical matters such as
  access to voluntary sector support, benefits, housing etc.
- Improving achievement of key heath targets e.g. immunisation, dental check-ups, smoking cessation
- Improved school readiness
- Increased equitable access to appropriate services and confident management of their health by `vulnerable` families
- Provide/ facilitate behaviour awareness and support sessions for parents of children





### Appendix 3 - Families Matters

Families Matter is Southwark's approach to ensuring we have the right pathways and range of services to ensure that children, young people and families are provided with the right support at the right time to prevent problems from escalating to higher levels of intervention at greater detriment to their wellbeing and at greater cost to the public. We want to ensure that children, young people and families receive the best possible support at times of need in order to address and resolve issues rapidly and effectively. The

#### What is the Tiered Approach?



Families Matter is being delivered through a tiered approach ranging from children, young people and families with no additional needs to those requiring support at the acute end of Children's Social Care. The visual representation indicates broadly the different levels of support that are available to respond to the needs of children, young people and families for a range of reasons. It is acknowledged that families may move between these levels of support and it is not suggested that the levels are finite. This is key reason for ensuring that all parties working with families are joined up in the service delivery process, that communication is transparent, thresholds and pathways clear, and information is shared in a professional and informed environment. The model builds upon the strengths of the existing Multi-Agency Safeguarding Hub (MASH) and Team Around the Child & Family approach. The Southwark Safeguarding Children Board is responsible for publishing a multi-agency thresholds document that outlines the criteria for each of the thresholds and the pathways for accessing support and these thresholds are fully integrated with the Families Matter approach.

#### What is the Families Matter Offer?

Families Matter ensures that there is a range of service availability at every tier of support as follows:

#### Level One: Universal and Universal Plus

The Universal level of the model acknowledges our commitment to deliver high quality services for all residents of Southwark regardless of their level of need and reflects the aims of the Council's Fairer Future vision. These services are provided through open access and are the platform for all of Southwark's children, young people and families to enjoy their entitlement to a safe, happy and fulfilling life experience. The services provided at this level help children, young people and families to develop resilience and the protective factors which enable them to manage their own needs within the community.

The Universal Plus element of this tier recognises the crucial role that universal services play in delivering swift additional support to children, young people and families as soon as a need emerges. Our commitment ensures that, wherever possible, the optimum place for additional support to be provided is within the local community. Effective resolution of low-level issues at this stage can prevent them from escalating to more complex local authority intervention and should give children, young people and families the best possible chance to return to accessing universal provision. The terminology of Universal Plus aligns with the tiers of support used within health services and therefore creates a clear identity for working with our partners.

#### What is the Tiered Approach



#### Level Two: Targeted (Early Help Service and Specialist Family Focus Team)

Where needs escalate beyond the level that universal services can address then we are committed to providing a range of targeted local authority services in partnership with others to continue to address problems as soon as they emerge and prevent them from escalating to requiring statutory intervention from Children's Social Care.

The local authority services that operate at this level are the Early Help Service and Specialist Family Focus Team working collaboratively with a range of partners both within the Council and including schools, early years' settings, children's centres, health professionals, criminal justice professionals and the voluntary sector.

The Early Help Service operates four locality-based teams comprising Educational Welfare Officers, Educational Psychologists; CAMHS Specialists; Family Support Officers; Early Years Support Officers and a social worker. School nurses are also aligned with the locality teams. The teams link directly into Children's Centres for early years' intervention and support, and to primary and secondary schools providing support to families on matters including attendance, exclusions, SEN advice and support, and behaviour support. All cases are referred through CAFs and are recorded in case files, monitored and followed through to resolution. Early Help Teams predominately work with Children's Centres, PVI settings, the voluntary sector and schools. Early Help sits within the Education arm of Children's and Adults' Services.

The Specialist Family Focus Team (SFFT) focuses on the more complex cases which require more intensive specialist support. It sits within the Children's Social Care arm of Children's and Adults' Services and works intensively with families at severe risk of breakdown, providing alternatives to care and solutions to resolve family crisis. Referrals for this team are received from a range of sources including Children's Social Care, the Youth Offending Service, the Early Help Service, schools and other agencies. SFFT provides a number of intensive interventions such as family work, parenting skills and one to one advice and support. The team comprises Outreach and Family Intervention Project keyworkers, Parenting Coordinators, Rapid Response keyworkers, an Adult Mental Health / Substance Misuse practitioner and a Specialist Community Nurse, all supervised by a social work management team. There are also three co-located voluntary sector commissioned organisations to deliver family intervention. The team provides intervention and intensive parenting or family work in the home or within group settings.

#### What is the Tiered Approach

# NHS Southwark Clinical Commissioning Group

#### Level 3: Children in Need

Services at the Children in Need level of the model focus predominantly on the delivery of services to children, young people and their families where risks are even greater and where longer term support may be necessary.

A child in need (CIN) is a child who is unlikely to achieve or maintain a satisfactory level of health or development, or their health and development will be significantly impaired without the provision of services; or a child who is disabled. Children who are privately fostered, who are seeking asylum or whose parents are in prison are also classed as children in need. The majority of cases allocated to Children's Social Care are at Child in Need level and social work intervention at this level is carried out in agreement with the child's parents/carers.

The service provided at CIN level includes an allocated social worker, a full social work Single Assessment, a multi-agency Child in Need network and a child in need plan support plan with outcomes and goals. The support plan involves a number of agencies and specific interventions. Services at this level are designed to prevent escalation into tier 4.

#### Level 4: Child Protection and Looked After Children

he Child Protection and Looked After Children level of support encompasses statutory Child Protection, and services for children looked after by the local authority.

A child in need of protection is a child that is suffering, or is likely to suffer, significant harm. The local authority investigates under Section 47 of the Children Act 1989. If the significant harm or the risk of significant harm is evident, a child protection conference takes place and a Core Group is established. Child Protection Conferences are chaired independently. The conference agrees a multi-agency child protection strategy which is subject to regular and rigorous review.

A child will be taken into local authority care either following court order, or with parental consent (Section 20), in cases where the child's safety cannot be maintained in the family home, even with statutory child protection intervention. A multi agency care plan is agreed and closely monitored, with specific contributions from all partners.