



Derby City Council

HEALTH AND WELLBEING BOARD
8 May 2014

ITEM 10

Report of the Strategic Director of Children &
Young People

Children and Young People Commissioning Arrangements

SUMMARY

- 1.1 The current configuration of children's health services needs improving. It needs to be more closely aligned across Public Services as well as focusing more on outcomes. The current configuration of provision is complicated and confusing for professionals and service users.
- 1.2 There are different commissioning arrangements for children's health provision in the north and the south of the County with the City Council fulfilling this role for Southern Derbyshire Clinical Commissioning Group. The recent departure of a senior manager in the County who fulfilled this role in the north has resulted in fresh discussions across all four CCGs and the County.
- 1.3 The current financial climate and need to make further savings in 2015 across Local Authorities and the NHS will require capacity and capability if we are to maximise savings opportunities and improve outcomes. However, opportunities for economies of scale need also to be considered.
- 1.4 Initial discussions have taken place with the CCGs, Public Health and County colleagues as to options for how we can improve the current provision and outcomes. The development of an integrated commissioning team/hub is seen as a means of developing integrated provision across health and local authority provision.

RECOMMENDATION

- 2.1 The Health and Well-being Board support the discussions taking place with the CCGs and County.
- 2.2 The Health and Well-being Board is asked to support the greater integration of CYP commissioning arrangements.

REASONS FOR RECOMMENDATION

- 3.1 The current financial climate requires innovative approaches and thinking if we are to manage the triple challenges of improving outcomes, improving quality and achieving financial balance. The next wave of savings from 2015-2018 are different to the previous as it include significant savings across the health economy.
- 3.2 The financial challenge needs to be put alongside the increasing level of demand not just in terms of aspects such as a higher birth-rate but also due to increasing expectations from Citizens.
- 3.3 The current service model is based around historic funding-streams and silo approaches. However, such boundaries and silos are not recognised by our service users and patients. The current service configuration is not integrated with Local Authority provision and is difficult to navigate for professionals and service users.
- 3.4 The current policy direction from both the Coalition Government and the Labour Party are recognising the importance of integration as part of the solution to the current triple challenge. We are seeing integration as a key strategic objective for the Health and Well-being Board.
- 3.5 New integrated commissioning approaches have been tested over the last year. This thinking has resulted in commissioning focusing on care pathways and patient journeys rather than traditional service based commissioning. The Behaviour pathway work has already been presented to this board.
- 3.6 The four Clinical Commissioning Groups (CCG) in Derbyshire have initiated a discussion regarding the commissioning arrangements for children's health services. For Southern Derbyshire CCG we have a joint arrangement with the CCG funding an integrated commissioning team. There are different arrangements across the CCGs, the County and Derby City.
- 3.7 There is considerable work already underway to reshape children's health provision and to create a more integrated approach and delivery model. This reflects a very illogical arrangement of children's health services as a result of the transformation of community services three years ago. A drive towards a simpler and more streamlined approach is already being driven from our commissioning team.
- 3.8 An initial discussions have taken place initiated by the CCGs but support by the City and County. This has resulted in an opportunity to result some of the complex arrangements in terms of delivery and commissioning functions. Three options have resulted from the initial discussions:
 - Option 1: Status Quo – do nothing option
 - Option 2: Two commissioning functions one for the north and one for Southern Derbyshire. Both would cover two CCGs and one Local Authority.
 - Option 3: One commissioning function covering all four CCGs and both the County and City Local Authorities.

A number of criteria have been produced to help make a decision as to the best way

forward, they are:

- Strategic fit for the future
- Ability to make savings
- Ability to integrate provision
- Workforce capability and capacity.

Option 3 is seen as the option most meeting these criteria and it is the most coherent and integrated option.

This report has been approved by the following officers:

Legal officer Financial officer Human Resources officer Service Director(s) Other(s)	Frank McGhee – Director of Commissioning (CYP)
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IMPLICATIONS

Financial and Value for Money

- 1.1 The options will confirm financial arrangements and contributions from all partners. Saving may be possible through the merging of commissioning functions.

Legal

- 2.1 Arrangements will be put in place using either a Memorandum of Understanding or a Section 75 agreement.

Personnel

- 3.1 There could be HR considerations depending on the option supported.

Equalities Impact

- 4.1 N/A

Health and Safety

- 5.1 N/A

Environmental Sustainability

- 6.1 N/A

Asset Management

- 7.1 N/A

Risk Management

- 8.1 A risk assessment is being completed as part of this development.

Corporate objectives and priorities for change

- 9.1 This is in line with the Health and Well-being Strategy and will put Derby ahead of current thinking nationally.