

## **Children and Young People's Health and Wellbeing Commissioning Group**

A meeting of Children and Young People's Health and Wellbeing Commissioning Group held on Thursday, 22<sup>nd</sup> August, 2013.

**Present:** Peter Kelly (Chairman) and

Sarah Bowman, Lynda Brown, Shaun McLurg, Dr Paul Williams, Liz Greer, Kate Birkenhead, Emma Thomas, Ian Coates and Simon Willson

**Officers:** Peter Bell.

Also in attendance: Sajda Nawazbhatt (Headliners UK).

**Apologies for absence** were submitted on behalf of Jane Humphreys and Hilary Hall.

### **CHW 10/13      Declarations of Interest**

There were no declarations of interest

### **CHW 11/13      Draft Minutes of the Meeting of the Children and Young People's Health and Wellbeing Group held on 31 July 2013**

The draft minutes of the meeting held on 31 July 2013 were agreed as a correct record.

### **CHW 12/13      Presentation – Headliners UK**

Sajda Nawaz (Partnership Manager – Headliners UK) was in attendance at the meeting and gave Members a presentation on the work of Headliners UK. Headliners UK was a charity which inspired and encouraged the personal development of young people through journalism.

Young people with physical and / or mental health needs were trained to research and produce stories on issues important to them for publication and broadcast in national and local newspapers, magazines, television, radio and online.

The presentation covered the following key areas:-

- The work of Headliners
- SEN/D Project
- Project Objectives
- Process
- Commitment

The Head of Children & Young People's Services felt that this should be considered by Jane Harvey (Early Years & Complex Needs Manager) as it aligned with her responsibilities. Health Watch is working with and complimenting Headliners UK. On this work Members agreed that any communication with this group would be worthwhile and should build on existing engagement activity and priorities. The Consultant in Public Health noted that she had identified, with Sajda, some specific work where Headliners could engage quickly e.g. the health needs assessment of children and young people's mental health.

RESOLVED that the report be noted.

**CHW  
12/13**

### **Early Help Strategy**

Members were presented with an updated copy of the Early Help Strategy for Children, Young People and their Families / Carers document. The document had been commissioned by Children, Education & Social Care with the aim of reducing the flow of children into social care and fulfilling the Ofsted requirement to demonstrate strategic direction and co-ordination of Early Help Services.

The changes that had been made to the document were detailed for Members. Members felt that the document was now a much more strategic document with clear priorities and actions.

Members wished their thanks to be recorded to Sarah Bowman and Simon Willson for all of their hard work in producing the document.

RESOLVED that the Corporate Director of CESC, Head of Education, Early Years & Complex Needs and the Head of Performance CESC view Version 10 for final agreement.

**CHW  
13/13**

### **Commissioning Intentions Process**

Consideration was given to a report on the process by which commissioning intentions could be discussed by the Children and Young People Health and Wellbeing Commissioning Group (CYPHWCG), to inform commissioning rounds for 2014/15.

The CYPHWCG was responsible for a strategic overview of commissioning in relation to children and young people's health and wellbeing; in order to deliver on the relevant elements of the Joint Health and Wellbeing Strategy on behalf of the Health and Wellbeing Board. The work plans for each HWB member organisation flow from the JHWS, describing the role and responsibility of the member organisations in delivering on the JHWS priorities and delivery plan e.g. SBC Public Health team plans and the CCG health and wellbeing workstream plans. There was a national policy driver for pursuing joint commissioning opportunities, which also fits with the local need to ensure evidence-based, joined-up and cost-effective care.

The Health and Wellbeing Board would discuss commissioning intentions from an overarching strategic perspective, looking at the priorities required to deliver on the JHWS. HWB member organisations would also propose commissioning intentions from their detailed understanding of current services commissioned and how these meet need. It was proposed the CYPHWCG acts to tie these two approaches together, taking an overview of how commissioning intentions specific to children and young people would deliver on the priorities in the JHWS delivery plan. The CYPHWCG would also act as a forum for discussion on joint commissioning intentions. It was important that joint commissioning discussions were held early in the process and joint commissioning intentions developed as needed, particularly to facilitate any strategic shifts in resource e.g. from acute care to preventative activity.

The proposed process for discussing and agreeing commissioning intentions was as follows:

- CYPHWCG member organisations propose suggested commissioning intentions to the CYPHWCG October meeting for discussion and endorsement / amendment. It is recommended that partner organisations share their proposed commissioning intentions with each other prior to the September and October meetings, to enable discussion re: synergies across organisations.
- The HWB discusses and agrees the proposed commissioning intentions, together with those proposed by the Adults Health and Wellbeing Commissioning Group at, or prior to the November HWB meeting. The HWB will be asked to consider these intentions in light of their agreed strategic priorities.

- If agreed, the commissioning intentions are incorporated into commissioning plans for the year 2014/15.
- The work programmes for each CYPHWCG member organisation are built around the agreed commissioning intentions, flowing from the strategic priorities agreed at CYPHWCG and HWB.

To facilitate the discussions, the following principles were suggested for agreeing commissioning intentions:

- The priorities for commissioning in 2014/15 should flow directly from the agreed priorities in the JHWS delivery plan.
- The commissioning intentions should be based on the content of the JSNA (on which the JHWS delivery plan is based).
- The commissioning intentions will therefore propose evidence-based interventions to address the areas of greatest need in the population.
- Joint commissioning intentions and pooled budgets will be considered where possible; to facilitate joined-up planning, aligned outcomes and more integrated pathways of care. The CYPHWCG is responsible for making decisions regarding joint commissioning.

The next steps in the process would be:

- The CYPHWCG is asked to consider and agree the proposed process and principles outlined above.
  - Should CYPHWCG agree these process and principles, members are asked to lead implementing the process in their organisations.
- Should CYPHWCG agree these process and principles, this will be tabled for information at the September joint HWB / Health and Wellbeing Partnership meeting.

RESOLVED that the report be noted.

**CHW  
18/13**

### **TaMHS Update**

Head of Education, Early Years & Complex Needs updated Members on TaMHS. It was outlined that there was more data collection to be done through the Health Needs Assessment process and this may not all be done by November due to the comprehensive nature of the work and historical challenges in accessing data required.

Members felt that the Group needed to be clear about the aim and scope of the TaMHS Service and what was expected from it as other TaMHS hadn't gone down the counselling route. The Head of Education, Early Years & Complex Needs and Public Health colleagues felt it was important to ensure commissioners worked together where possible (through shared planning and / or joint commissioning) to ensure a coordinated service for service users and value for money.

Dr Paul Williams reported that he would need further advice before he could agree to any commitment as he wasn't sure how much flexibility there was as the alliance had stopped receiving referrals from GPs. Members agreed that further discussions take place to try and resolve the issue.

Members agreed in principle to the approach to potential joint commissioning to meet the needs around prevention and early intervention in mental health.

RESOLVED that:-

1. The update be noted.

2. Further discussions take place.
3. The approach be agreed in principle.

**CHW  
19/13**      **School Nursing-Update**

An update was given on the review of School Nursing in the context of Healthy Child Programme. It was reported that the survey questionnaires which are part of the consultation process on the school nursing review would be emailed to Members after the meeting for their comment. The questionnaires were similar but varied slightly according to the target group. They would be produced in paper format and also loaded onto SurveyMonkey.

It was important that all partners commissioning services for children and young people worked together to ensure service pathways are commissioned, to meet the needs of children and young people, and the requirements of the Healthy Child Programme.

RESOLVED that the update be noted.

**CHW  
21/13**      **Forward Plan/Work Programme**

Members were presented with the Forward Plan/Work Programme. Members made some minor amendments to the Forward Plan/Work Programme and this would be presented to Members at the next meeting.

RESOLVED that the Forward Plan/Work Programme be amended accordingly.

**CHW  
22/13**      **Date and Time of next meeting**

25<sup>th</sup> September 2013 – 2pm  
Conference Room 2, Municipal Building