

HAMPSHIRE COUNTY COUNCIL**Decision Report**

Decision Maker:	Executive Member for Health and Public Health
Date:	24 November 2015
Title:	Public Health Services for Children 0-5 years
Reference:	6971
Report From:	Director of Public Health

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1. Executive Summary

- 1.1. Although the Health and Social Care Act 2012 transferred responsibility for public health to local authorities from 1 April 2013 responsibility for the commissioning of public health services for children aged 0-5 transferred to NHS England.
- 1.2. This commissioning responsibility has subsequently transferred to local authorities on 1 October 2015. Locally, responsibility for Hampshire residents was transferred from NHS England South (Wessex) to Hampshire County Council.
- 1.3. Public health services for children aged 0-5 deliver the Healthy Child Programme 0-5. In Hampshire delivery of the programme is commissioned from Southern Health NHS Foundation Trust, who provides it from the health visiting service, which includes the Family Nurse Partnership.
- 1.4. The health visiting service is supported by a mandate under section 6C of the NHS Act 2006.
- 1.5. The NHS contract between NHS England and Southern Health NHS Foundation Trust for health visiting services was novated to Hampshire County Council on 1 October 2015.
- 1.6. The novated contract expires on 31 March 2016, with no option to extend.
- 1.7. This report seeks authority to put in place a Hampshire County Council Public Health contract with Southern Health NHS Foundation Trust for health visiting services for 12 months to March 2017 on a single tender basis to ensure continuity of the mandated service. The maximum value of the contract would be up to £17,656,100.
- 1.8. This time period will enable the Council to re-procure this service as soon as possible and supports the Council's Transformation to 2017 programme. It

provides the opportunity to align health visiting services with the Council's proposals for a revised model of services for children and young people that is planned to be in place from April 2017.

2. Contextual information

- 2.1. Although the Health and Social Care Act 2012 transferred responsibility for public health to local authorities from 1 April 2013 responsibility for the commissioning of public health services for children aged 0-5 transferred to NHS England.
- 2.2. To achieve the best possible outcomes for children and young people, responsibility for commissioning public health services for children aged 0-5 transferred to local authorities on 1 October 2015. Locally, responsibility for Hampshire residents was transferred from NHS England South (Wessex) to Hampshire County Council.
- 2.3. These services deliver the Healthy Child Programme 0-5. Hampshire County Council has been responsible for commissioning the Healthy Child Programme for children aged 5-19 since 2013.
- 2.4. In Hampshire the delivery of the Healthy Child Programme 0-5 is commissioned from Southern Health NHS Foundation Trust (SHFT) who provides it from the health visiting service, which includes the Family Nurse Partnership.
- 2.5. The Healthy Child Programme (HCP) 0-5 is an evidence-based prevention and early intervention public health programme that is offered to all families. It aims to support parents, promote child development, reduce inequalities and so contribute to improved child health outcomes and positive health and wellbeing, while ensuring that families at risk are identified at the earliest opportunity.
- 2.6. The Family Nurse Partnership (FNP) is an early childhood preventive programme, targeted at first time mothers aged 19 and under, that is being rolled out nationally. It was developed in the USA and is delivered under a national licence.
- 2.7. There is compelling evidence that what happens at the start of life - prenatal development and the first months and years – is vital in laying the foundations of adult outcomes including good health and wellbeing in later years. A child's early experience and environment significantly influence their brain development during these early years, when warm, positive parenting helps create a strong foundation for the future.
- 2.8. In 2011 the government published the Health Visitor Implementation Plan to expand and strengthen health visiting services. Health visitors are trained nurses with additional specialist skills in family and community public health and are key to meeting the needs of children and families. They ensure that all parents and children have access to the support they need to get off to the best possible start, with early intervention to ensure additional support for those who need it, including the most vulnerable families. Getting this right can affect the child's physical and mental health and wellbeing, their

readiness to learn and their ability to thrive later in life. This matters for the child, their family, local communities and the economy.

- 2.9. The health visiting service delivers improvements in six high impact areas where health visitors are known to have the biggest impact on outcome measures at key stages of development:
 - maternal mental health
 - transition to parenthood
 - breastfeeding
 - healthy weight
 - child development and
 - managing minor illness/accident prevention.
- 2.10. The Health Visitor Implementation Plan has been successfully delivered in Hampshire with an 89% increase in the number of Health Visitors, from 122 in March 2012 to 231 in March 2015. This is starting to enable us to support families in the transition to parenthood and in those crucial early years and will contribute to improved outcomes and reduced inequalities, including improved child development and school readiness, better mental health of mothers and children, more children who are appropriately nourished, and improved management of minor illness and accident prevention.
- 2.11. The health visiting service is supported by a mandate under section 6C of the NHS Act 2006. This means there are public health steps prescribed in regulations that all local authorities must take. This is important for the quality and consistency of the programme nationally and locally.

3. Current issues

- 3.1. Public health services for children 0-5 (health visiting and FNP) for Hampshire residents are provided by Southern Health NHS Foundation Trust (SHFT).
- 3.2. SHFT also holds the contract for the recently procured public health school nursing service in Hampshire that went live on 1 August 2015. The public health school nursing contract was procured for three years to 31 July 2018 and has two one year extensions providing options for a total maximum contract term of 5 years.
- 3.3. The NHS contract between NHS England and SHFT for public health services for children 0-5 was novated to Hampshire County Council on 1 October 2015 when the Council assumed responsibility for commissioning these services.
- 3.4. The novated contract expires on 31 March 2016, with no option to extend. Appropriate arrangements must be put in place to ensure continuous provision of this mandated clinical public health nursing service.
- 3.5. This report seeks authority to put in place a Hampshire County Council Public Health contract with Southern Health NHS Foundation Trust for health

visiting services for 12 months to March 2017 on a single tender basis to ensure continuity of the mandated service.

- 3.6. As public health services for children 0-5 represent a significant responsibility and associated commissioning expenditure for Hampshire County Council such an approval is recommended in order to enable the Council to offer this important contract (£17.65m pa) to the market within the next year.
- 3.7. Our local knowledge and intelligence show that the market for this service is limited and that this may be compounded by nearby local authorities potentially re-tendering for these services in a similar time frame. However, the need to go to the market to retender the service needs to be taken into account.
- 3.8. Re-procurement of a new public health nursing service 0-5 would commence in April 2016 with a start date for the new service of April 2017.
- 3.9 This time period will enable the Council to re-procure this service as soon as possible and supports the Council's Transformation to 2017 programme. It provides the opportunity to align health visiting services with the Council's proposals for a revised model of services for children and young people that is planned to be in place from April 2017.

4. Future Direction

- 4.1 Work has already started to transform the existing service. The focus is on delivery of the six high impact areas, the required universal reviews and a move to an 'outcomes – based' service specification, in order to maximise outcomes and achieve best value for the Council and for Hampshire residents.
- 4.2 The need to offer the service to the market within the next year means that the preparatory work required to procure a new service to start in April 2017 has started.
- 4.3 A further report will be brought seeking Executive Member authority in order that a new procurement can commence early in 2016.

5. Finance

- 5.1 The transfer of 0-5 children's public health commissioning to Local Authorities for the six month period between 1 October 2015 and 31 March 2016 was conducted in accordance with a 'lift and shift' approach, to ensure a safe mid-year transfer.

- 5.2 The final allocation of funds for the remaining 6 months of the existing contract 1 October 2015 – 31 March 2016 were announced by the Department of Health in March 2015¹.
- 5.3 The final allocation for Hampshire County Council was £8,843,000. This includes £14,950 to support some of the additional commissioning support that is required for this service.
- 5.4 The contract value for 6 months is £8,828,050.
- 5.5 The maximum value of the approval sought to put in place a Hampshire County Council contract for public health services for children 0-5 for 12 months to April 2017 would be £17,656,100.
- 5.6 The process through which Local Authority funding allocations were originally agreed was that the funding provided to Local Authorities is sufficient to meet the costs of the commissioned services that will be transferring in 2015-16. Therefore, we expect this new service for Hampshire County Council to be fully funded for 2016-2017, although this will not be known with certainty until December 2015/January 2016 after the government Comprehensive Spending Review and the proposed new funding formula are put in place.

6 Single Tender Approval

- 6.1 A single tender approval is sought to put in place a Hampshire County Council Public Health contract with Southern Health NHS Foundation Trust for health visiting services for 12 months to March 2017 on a single tender basis to ensure continuity of the mandated service. The maximum value of the contract is up to £17,656,100 and will be subject to confirmation of the Public Health Grant Allocation for 2016/17.
- 6.2 This time period enables the Council to re-procure this service as soon as possible to minimise any risk of challenge from other providers and to ensure that the new service is aligned with the Council's Transformation to 2017 proposed service changes.

7 Legal Implications

- 7.1 Contract Standing Orders and the Public Contract Regulations 2015 govern the procurement of services. This request for a Single Tender Approval is a request to apply the modification provisions under the Public Contract Regulations. In particular Regulation 72 (1) (b) (ii) would apply in these circumstances.
- 7.2 The legal implications of the decision being taken are set out in exempt appendix item number 3.

¹ https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/417433/0-5_Public_health_allocations.pdf

- 7.3 It is for the Executive Member as decision maker to have due regard to the need to:

eliminate discrimination, harassment, victimisation and any other conduct prohibited under the Equality Act and advance equality of opportunity and foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

8 Equality Impact Assessment

- 8.1 There is no direct impact as a result of this decision. Any risks to equalities will be mitigated and addressed by detailed service planning.
- 8.2 A detailed Equality Impact Assessment has been undertaken and is summarised at Integral Appendix B. It must be noted that every aspect of Council business led by public health considers the opportunities to reduce inequalities.

9 Recommendation(s)

- 9.1 That the Executive Member for Health and Public Health give approval to put in place a contract on a single tender basis for the health visiting service with Southern Health NHS Foundation Trust for 12 months from April 2016 to March 2017, up to the value of £17,656,100.

CORPORATE OR LEGAL INFORMATION:**Links to the Corporate Strategy**

Hampshire safer and more secure for all:	yes
Maximising well-being:	yes
Enhancing our quality of place:	yes

Other Significant Links

Links to previous Member decisions:		
<u>Title TBC</u>	<u>Reference</u>	<u>Date</u>
Direct links to specific legislation or Government Directives		
<u>The Health and Social Care Act 2012</u> http://www.legislation.gov.uk/ukpga/2012/7/contents/enacted		<u>2012</u>
<u>The Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) and Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) (Amendment) Regulations 2015</u> http://www.legislation.gov.uk/uksi/2015/921/contents/made		<u>2015</u>

Section 100 D - Local Government Act 1972 - background documents

The following documents discuss facts or matters on which this report, or an important part of it, is based and have been relied upon to a material extent in the preparation of this report. (NB: the list excludes published works and any documents which disclose exempt or confidential information as defined in the Act.)

<u>Document</u>	<u>Location</u>
None	

IMPACT ASSESSMENTS:

1. Equalities Impact Assessment:

- 1.1 An Equality Impact Assessment has been undertaken.
- 1.2 The Public Health nursing services for children 0-5 years is well established in Hampshire and provides a universal service to all resident families with children aged 0-5 years. Overall this proposal will have low or no impact on people who fall within the protected characteristics groups.
- 1.3 The requirement (through Regulation, Section 6C NHS Act 2006) to provide and improve access to 5 universal evidence based assessments/reviews will increase access and have a positive impact. The targeted Family Nurse Partnership Programme is established in the areas of Hampshire known to have higher rates and numbers of teenage mothers and aims to improve health and educational outcomes.
- 1.4 There will be a small positive impact for pregnant women as the service is required to increase uptake of the antenatal health promoting assessment within year.
- 1.5 In taking forward this contracting plan any potential risks to equalities will be mitigated and addressed by detailed service planning.
- 1.6 It must be noted that every aspect of Council business led by public health considers the opportunities to reduce inequalities.

2. Impact on Crime and Disorder:

- 2.1. By definition, interventions considered to improve and protect the public's health are designed to support the citizen's of Hampshire to live safely and have improved health and health outcomes.

3. Climate Change:

- 3.1. Consideration of climate change and its impacts on the population and its current and future health forms part of the evidence informing interventions to improve and protect the public's health.