



Bristol Clinical Commissioning Group

Bristol Health & Wellbeing Board

Transfer of funding for the 0-5 Healthy Child Programme from NHS England to Public Health, Bristol City Council, October 2015

Author, including organisation	Author: Anne Colquhoun Service Manager Young Peoples Public Health
Date of meeting	27 th November 2015
Report for Information	

1. Purpose of this paper

To update on preparations for the transfer of the 0-5 Healthy Child Programme funding from NHS England to the Local Authority. To outline the services that will be transferred and highlight issues and opportunities that this transfer brings.

2. Executive summary

From October 1st 2015, the Government intends that local authorities will take over responsibility from NHS England for the commissioning of public health services for children aged 0-5. This includes health visiting and family nurse partnerships (FNP).

The transfer of the 0-5 commissioning will join up the local authorities' responsibility for commissioning school nurses, which was transferred from the NHS in April 2013.

This transfers the main responsibility for delivering the 0-19 Healthy Child Programme to local authorities.

3. Overview of current service

Health visitors are registered nurses or midwives who have passed an approved programme in specialist community public health nursing/health visiting (SCPHN/HV).

Health visitors deliver the nationally agreed public health, healthy child programme (HCP), developed as a programme to deliver the best health outcomes for children and young people.

The health visitor implementation plan sets out what families can expect from their health visiting service, and a national service specification has been developed.

- Health visitors will work to develop and make sure families know about a range of services including services that communities can provide for themselves

- Health visitors will provide a universal service providing the healthy child programme to ensure a healthy start for children and their family, support for parents and access to a range of community services and resources.
- The health visiting teams will provide a rapid response when parents need specific expert help, for example post natal depression, a sleepless baby, weaning or answering concerns about parenting.
- The health visiting teams will provide on-going support in partnership with a range of local services working together and with families, to deal with more complex issues over a period of time. These include services provided by Children's Centres, community providers and FNP.

The transfer of funding comes with a mandate to deliver the universal elements of the healthy child programme. These include, antenatal health promotion visits, new baby reviews, assessments of new baby's progress at 6-8 weeks, assessments of baby's progress at 1 year, and a review when the child is aged between 2 and 2.5. To give some idea of the workload, in 2012 there were 6,780 births to women living in Bristol, and 30,600 0-4 year olds.

The FNP is a licensed programme that targets first time teenage parents. It has a well-defined and detailed service delivery model which must be adhered to. Structured home visits, delivered by specially trained FNP nurses, are offered from early pregnancy until the child is 2. When a mother joins the programme, the HCP is delivered by the FNP nurse not the health visiting team. The capacity is limited; In Bristol the programme will work with 25 families per nurse.

3.1 Current capacity

Current health visitor capacity for Bristol is 84.8 WTE and this is expected to increase as part of the Government's commitment to invest in the Healthy Child Programme, to 126.10 WTE by 2015. The increase in numbers was based on a nationally agreed formula. The health visitor posts are supported by a multi-disciplinary team made up of 3.77 WTE band 5 community nurses, 28.3 WTE band 4 nursery nurses, 22.6 WTE Admin Support Workers and they work from 22 bases across Bristol. The FNP capacity is 5 WTE with a 0.5 WTE admin worker.

3.2 Current performance

Health visitors are working against the national service specification, which includes the targets that will be mandated when the commissioning responsibility is transferred to the Local Authority. Currently the service is not meeting its trajectory for numbers of health visitors and is not meeting expected targets. NHS England as the current commissioner is working with the provider to improve the performance reporting.

3.3 Current commissioning arrangements

The services are currently provided by North Bristol Trust as part of the Children's Community Health Partnership (CCHP).

The services are included in the re procurement of children's community health services being led by Bristol CCG, which involves 6 commissioning bodies and which should see newly commissioned services in place by April 2017. Bristol City Council is represented on the Procurement Board, by Netta Meadows, Service Director Commissioning and Performance and Dr Sohail Bhatti, Interim Director of Public Health. The current providers will continue to deliver the services when the funding transfers to the Local Authority and the re-commissioning will continue alongside other services included in the contract with the CCHP.

4. Key risks and opportunities

Health visitor numbers do not yet reach the expected trajectory for investment, but NHS England are working with NBT to ensure capacity is built in readiness for transfer. Performance reports indicate that the service is not currently meeting targets.

The amount of funding that NHS England is proposing to transfer is not sufficient to deliver the 0-5 healthy child programme based on the financial breakdown provided by NBT. There is an approximate shortfall of 1.4 million pounds.

There is a risk that this shortfall will draw funds from other services funded as part of the current block contract with the provider, or the 0-5 healthy child programme will need to reduce staff numbers and be unable to deliver the mandated services. Information is being shared between finance in NHS England, NBT and BCC, to understand and mitigate the risks.

The transfer of commissioning responsibility in 2015 and the procurement by 2017, does offer opportunities to consider how the healthy child programme can be better joined up with other preventative and early intervention services provided by the authority, particularly for the under 5's.

5. Timescale

A financial return was submitted by NHS England to Public Health England on 12th September, this was not signed off by the Local Authority. The authority is fully engaged in the re-procurement process which is being led by the CCG. A small local authority working group will be established to explore the opportunities that this transfer brings.