

HEALTH AND WELLBEING BOARD		AGENDA ITEM No. 8
10 SEPTEMBER 2015		PUBLIC REPORT
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UPDATE ON JOINT COMMISSIONING MEMORANDUM OF UNDERSTANDING (MOU)

R E C O M M E N D A T I O N S	
FROM: Wendi Ogle-Welbourn - Corporate Director	Deadline date : N/A
1. To note the MOU agreement and priorities. 2. Comment on the priorities and work plan.	

1. ORIGIN OF REPORT

- 1.1 This report is submitted to Board following a request from Director of People and Communities to provide an update on the Joint Commissioning Memorandum of Understanding. (MOU).

2. PURPOSE AND REASON FOR REPORT

2.1 Purpose

This MOU sets out the role of each partner organisation and explains how they intend to work together towards the common objective of commissioning high quality services which meet the health and wellbeing needs of children and young people, across Cambridgeshire and Peterborough, whilst demonstrating value for money.

This joint commissioning arrangement is based on three guiding principles:

1. **Clear accountability;** each party must be accountable for its actions, so each must have unambiguous and well defined responsibilities;
2. **Transparency;** each party, together with the public, must know who is accountable for what; and
3. **Regular information exchange;** this helps each party to discharge its responsibilities as efficiently and effectively as possible.

The arrangements for joint commissioning shall be effective as of the 1st June 2015 subject to the approval of the work plan and the contents of this memorandum of understanding.

3. STATEMENT OF INTENT

All three organisations are committed to working together to develop integrated services for children and families that reduce health inequalities and promote better outcomes. Whilst each of the parties has its own explicit mandate, and remains separately accountable for its actions, the agreed strategic direction will be through the Maternity, Children and Families Programme Board for the CCG, the Children and Families Joint Commissioning Board for PCC and the

Joint Commissioning Board for CCC.

- 3.1 It is envisaged that a shared commissioning function will offer a more integrated approach to the commissioning of services for children, young people and their families and link to the wider whole system approach to developing services for children, families and communities.

4. BACKGROUND

- 4.1 This Memorandum of Understanding (MOU) has been developed in recognition of the requirement for a jointly commissioned approach for children and young people's services, which is widely accepted as key to a progressive, system-led commissioning landscape.
- 4.2 The creation of a Joint Commissioning Unit will achieve an improved and more comprehensive analysis of need, a whole system approach to planning and investment, ultimately leading to the clear alignment of commissioning cycles and commissioning intentions which will ensure the effective use of resources. In turn, this will enable improved pathways and early intervention solutions to increase efficiencies and prevent duplication, improving the quality and performance of commissioned services.
- 4.3 This MOU establishes a framework for cooperation and collaboration between Peterborough City Council (PCC) Cambridge County Council (CCC) and, NHS Cambridgeshire and Peterborough Clinical Commissioning Group (CCG) and sets out how the organisations will work together to maintain and strengthen joint working arrangements, including furthering joint commissioning of services to meet identified health and well-being needs, and ensuring, wherever practicable, the promotion of integrated service models.
- 4.4 The MOU is a statement of intent largely for internal purposes for each organisation but it is intended that it is noted and supported by the Health & Well Being Boards across Cambridgeshire and Peterborough and periodically reviewed. It is not intended to be legally binding or create any legal obligation.
- 4.5 Peterborough City Council is the lead for the JCU and the Corporate Director for People and Communities is the lead officer

Roles

4.6 Peterborough City Council

The Corporate Director for People and Communities will be the lead officer for Peterborough City Council, and shall lead on the commissioning of the health and wellbeing services for children and young people

The Head of Commissioning for Children's Health and Wellbeing and the Head of Business and Commercial Operations, will undertake the necessary commissioning activity

The Head of Commissioning for Children's Health and Wellbeing, along with the Head of Business and Commercial Operations will monitor service provision to ensure performance is in line with service specification.

The Head of Business and Commercial Operations, along with the Head of Commissioning for Children's Health and Wellbeing will report quarterly to CPCCG, CCC and PCC advising on the performance of the commissioned services

4.7 Cambridge County Council

PCC will, on behalf of CCC undertake the performance monitoring and joint commissioning responsibility for the services

CCC will provide specialist Public Health Consultant (children and families) input to the JCU

through the shared public health arrangements. This consultant will provide a strategic link to the Director of Public Health, who has statutory responsibility for the Council's public health services in both CCC and PCC.

The strategic lead and accountability will remain with CCC under the Service Director of Strategy and Commissioning and for statutory public health commissioned services, under the Director of Public Health, delegated to the Public Health Consultant (children and families).

The Service Director of Strategy and Commissioning and Public Health Consultant (Children and families) will review the work plan every 6 months to ensure it reflects the needs of CCC.

4.8 **Cambridgeshire and Peterborough Clinical Commissioning Group (CPCCG)**

The Director of Quality and Nursing will review the work plan every six months to ensure it reflects the needs of the CCG.

The Director of Quality agrees to the Head of Business and Commercial Operations and the Head of Commissioning for Children's Health and Wellbeing being named as the authorised representatives in the contracts for the services.

5. **KEY ISSUES**

The Main key priorities in the work plan for the JCU are:

A redesign of Emotional Health and Wellbeing Services, including:

- Addressing waiting times for specialist Child and Adolescent Mental Health Services (CAMHS).
- Addressing waiting times for assessment of Autistic Spectrum Disorders and Attention Deficit Hyperactivity Disorder.
- Develop robust crisis support for emergency CAMHS assessment.
- Multiagency single point of referral for early help and CAMH.
- Review of service specifications to reflect current needs and service redesign.
- Review Children Looked after service (CLA) against new statutory guidance.
- Transitions for children to adult services.
- Lead Children and Maternity Workstream for System wide Transformation Programme
- Embed health services within SEND pathway
- Develop clear pathways for Child Protection medicals
- Ensure Continuing Care pathway is effective

6. **STRATEGIC FUNCTIONS**

6.1 The strategic aim for the JCU will be to align commissioning activity and improve children's provider performance by:-

6.2 **Integrating and co-ordinating the commissioning intentions of CCG/LCG's and Councils to reflect local priorities:** commissioning intentions and priorities will be aggregated and will form the basis for developing the overall commissioning strategy of the JCU. This will ensure the JCU strategy is grounded in local priorities and reflects local development needs and fully aligns to the Health and Wellbeing Board strategies and action plans. In addition, NHS Commissioning Board child health developments will be reflected in the strategy ensuring comprehensive commissioning.

6.3 **Ensuring equity and quality of service delivery:** the JCU will determine the required delivery approach to deliver on the integrated commissioning intentions. This goal ensures that the children's services are aligned to meet the needs of the local population, close gaps in current service provision and enables children and young people to receive quality services in their community. Achieving this goal will also mean that children and families experience a seamless pathway regardless of the different organisations providing services or who commissions them. All those services in the pathway of care will be involved in shaping the work of JCU.

- 6.4 **Increasing children’s services performance and delivering improved health outcomes:** the JCU will work with providers and develop a performance framework by which local and national targets and outcome based performance indicators will be measured. Quality and experience of early access and appropriate support will be monitored while effective delivery models will be explored reduce admission rates to acute and specialist services and address inequalities in access. This will enable an effective delivery of QIPP plans as a system wide approach to commissioning and delivery will be adopted.
- 6.5 **Ensuring services offer quality and value for money:** by developing close collaboration and commissioning relationships with a variety of providers, the JCU will be able to drive up quality and value for money through identification and dissemination of best practice.
- 6.6 **Ensuring that the children, young people & families/carers experience continually improves:** through improved feedback mechanisms the JCU will fully understand children & young people’s concerns such as dignity, choice and quality of care, access, clean and safe environments, and the JCU will be able to address these priorities through improved commissioning relationships and more effective performance management of providers.
- 6.7 **Delivery of effective children’s commissioning function to the partners:** the JCU will enable all partners to significantly improve their commissioning competencies relating to children’s commissioning. The JCU will operate as a delivery vehicle, which serves its partners equally whilst recognizing their varying needs. It will consider and align its functions with other commissioning priorities and cycles i.e. Health and Well Being Board and Children’s Joint Commissioning and Delivery Board and work with Public Health and the NHSCB to deliver on the Outcomes Framework, inform the JSNA and facilitate the Healthy Child Programme.

7. CONSULTATION

- 7.1 All Partners were consulted with during the development of the JCU. The Leads of the JCU are working with Healthwatch and local parent partnership groups to ensure the priorities are taken forward with strong Parent/service user involvement.

8. NEXT STEPS

- 8.1 The JCU will monitor the work plan and priorities and will receive a bi monthly report on progress.

9. BACKGROUND DOCUMENTS

- 9.1
- JSNA Performance and Delivery plan.
 - Cambridge and Peterborough’s Emotional Wellbeing and Mental Health Strategy 2014.
 - “Future in mind” 2015.

10. APPENDICES

- 10.1 Appendix 1 – Memorandum of Understanding between Peterborough City Council, Cambridgeshire County Council and Cambridgeshire and Peterborough Clinical Commissioning Group for Children and Young People Services.