

APPROVAL TO ENTER A SECTION 75 AGREEMENT FOR HEALTH VISITING AND FAMILY NURSE PARTNERSHIP SERVICES (CAMBRIDGESHIRE AND PETERBOROUGH FOUNDATION TRUST)

Councillor Diane Lamb, Cabinet Member for Public Health

February 2017

Deadline date: *N/A*

Cabinet portfolio holder:	Councillor Diane Lamb, Cabinet Member for Public Health
Responsible Director:	Wendi Ogle-Welbourn, Corporate Director for People and Communities
Is this a Key Decision?	YES If yes has it been included on the Forward Plan : Yes Unique Key decision Reference from Forward Plan : KEY/26DEC16/02
Is this decision eligible for call-in?	YES
Does this Public report have any annex that contains exempt information?	NO
Is this a project and if so has it been registered on Verto?	NO

RECOMMENDATIONS

The Cabinet Member is recommended to:

1. Authorise the entering into a Section 75 Agreement with the Cambridgeshire and Peterborough Foundation Trust relating to the lead provision of Health Visiting and Family Nurse Partnership Services, whereby the partners will enter into an agreement which will see the Cambridgeshire and Peterborough Trust exercise the health-related function to the Local Authority. This will be for the annual value of £3,061,826 for a duration period of 1 year, commencing from the 1 April 2017 until 31 March 2018. There will also be an option to extend the agreement by a further year to 31 March 2019, at a value of £3,061,826 for the extension;
and
2. Authorise the Corporate Director of People and Communities, in consultation with the Director of Governance, to agree further changes to the Section 75 Agreement.

1. SUMMARY OF MAIN ISSUES

- 1.1 This report seeks the Cabinet Member's approval to enter into a Section 75 Agreement between the Council and Cambridgeshire and Peterborough Foundation Trust (CPFT). The

agreement relates to the lead provision of Health Visiting Services and the Family Nurse Partnership programme by which CPFT will enter an arrangement in which they will exercise the health-related function to the Local Authority.

- 1.2 Under the National Health Service Act 2006, Local Authorities and NHS bodies can enter into partnership arrangements which permit the exercising of a Local Authority prescribed health function to be delivered by an NHS body in conjunction with the Local Authority. Section 75 gives NHS bodies and Local Authorities the flexibility to be able to improve services through integrated provision and a multi-agency approach to delivering services. In this case the arrangement will be for an integrated provision whereby CPFT will exercise the health-related function of the Local Authority, namely Health Visiting Services and the Family Nurse Partnership programme.

2. PURPOSE OF THIS REPORT

- 2.1 This report is for the Cabinet Member of Integrated Adult Social Care and Health to consider exercising delegated authority under paragraph 3.4.3 of Part 3 of the constitution in accordance with the terms of their portfolio at paragraph (a).

3. TIMESCALE

Is this a Major Policy Item/Statutory Plan?	NO	If Yes, date for relevant Cabinet Meeting	N/A
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4. DETAILS OF DECISION REQUIRED

- 4.1 The statutory responsibility to commission many health related functions was transferred from NHS England to Local Government with effect on the 1 October 2015, including Health Visiting services and acquired statutory responsibilities under the Health and Social Care act 2012.
- 4.2 Following the transfer of these functions, Peterborough City Council and CPFT entered into a contract for the provision of Public Health Services including Health Visiting. The Health Visiting services is a core functionality to support the delivery of the Health Child Programme 0-5 and is a universal service supporting parents, children and families to promote child development, improve child health outcomes as well as ensuring 'at-risk' families are identified at the earliest opportunity and that they receive the necessary interventions and support. Health Visiting is a holistic service that works in partnership with a number of different agencies, a fundamental service that works closely with the Health Visiting service is the Family Nurse Partnership Programme which performs functions similar to that of the Health Visiting Service but offers specialist and intensive support for vulnerable pregnant teenagers. LAC psychology and medical advisor provision is also included in arrangements with CPFT. As such these have become a jointly commissioned service whereby joint monitoring for the contract for Health Visitors and Family Nurse Partnership is undertaken.
- 4.3 The contract for the services is due to expire on the 31st March 2017. In the longer term it is anticipated that the delivery of the Health Visiting Service and Family Nurse Partnership will be undertaken by way of a competitive procurement process which will form part of the procurement of the Health Child Programme 0-19 (HCP). The HCP will combine many related child health services across Peterborough and Cambridgeshire resulting in vast efficiencies and economies of scale. In the interim, whilst the HCP procurement is planned and implemented it has been identified that the Council will enter into a Section 75 Agreement with CPFT. The agreement will be for the lead provision of the Health Visiting service and Family Nurse Partnership Programme to be exercised by CPFT as a health-related function to the Local Authority

- 4.4 The financial sum for the Section 75 Agreement will be £3,061,826 for the annual period between the 1 April 2017 and the 31 March 2018. There will also be an option to extend the agreement by a further year to 31 March 2019, for the financial sum of a further £3,061,826. The proposed end date will coincide with the conclusion of the procurement exercise for the HCP 0-19.

5. CONSULTATION

- 5.1 The power to enter into a Section 75 Agreement is conditional on the partners having jointly consulted people likely to be affected by such arrangements.
- 5.2 Consultation is the key to continued successful commissioning of services and in keeping with good practice and NHS Act requirements, consultation has been undertaken with the service provider.
- 5.3 In the developing and drafting of the agreement aims, outcomes, and service specifications, financial contributions and linking of objectives in the agreement to the delivery plan, there were detailed discussions between the partners.

6. ANTICIPATED OUTCOMES

- 6.1 A robust Section 75 agreement is approved that ensures the integrated provision of Health Visiting services and the Family Nurse Partnership by CPFT
- 6.2 A continuation of current services being provided to ensure that parents, children, and families are supported to achieve positive child health and development outcomes and any necessary interventions needed are identified at the earliest opportunity.

7. REASONS FOR RECOMMENDATIONS & ANY RELEVANT BACKGROUND INFORMATION

- 7.1 The Section 75 agreement will provide value for money and lead to an improvement in the way in which this function is exercised based on the timeframe of the agreement. It is recommended that the Section 75 is a one year agreement with an option to extend for a further year enable synchronisation with the commencement of the proposed Healthy Child Programme 0-19 procurement strategy.
- 7.2 The Health Visiting service and the Family Nurse Partnership is a fundamental part of the Healthy Child Programme 0-5. The HCP provides a framework to support collaborative work and more integrated service delivery. The HCP 0-5 aims to:
- Support parents to transition into parenthood and support their journey through the early weeks of their infants life including maternal mental health and perinatal depression as well as support with breastfeeding initiation and sustainment;
 - Safeguarding children and families including ensuring the child is a healthy weight, well nourished, engages in physical activity and supports parents to manage minor illnesses and reducing hospital attendance and admission; and
 - Working to promote health and development in the 'high impact' areas for early years development though supporting the health, wellbeing and development of the child up until the 2-2.5 year old review ensuring they are 'school ready'.
- 7.3 The Council will retain responsibility for the functions, with the scope of activities to be performed by each partner being clearly defined, together with the provision for management and monitoring.

8. ALTERNATIVE OPTIONS CONSIDERED

- 8.1 To do nothing. This was rejected as the Council has a statutory requirement to maintain the continuity of the Health Visiting service which is required under the Council's mandated responsibility for Public Health. Responsibility for this service was transferred to the Local Authority under the Health and Social Care Act 2012.
- 8.2 Competitive procurement process – this was rejected in the interim as the Health Visiting service and Family Nurse Partnership will both be included within the long term procurement of the Healthy Child Programme 0-19 (HCP). The HCP will combine many health related child services across Peterborough and Cambridgeshire resulting in vast efficiencies and economies of scale. It would therefore not represent value for money to carry out a procurement process for these service alone at this time.

9. IMPLICATIONS

9.1 Legal implications:

The Council currently commissions Health Visiting Services under its statutory responsibility for Public Health. Responsibility for this service transferred to the Council under the Health and Social Care Act 2012. The proposals set out in this report are consistent with statutory guidance relating to Public Health functions in respect of the NHS Act 2006.

Under the NHS Act 2006 local authorities and NHS bodies can enter into partnership arrangements to provide a more streamlined service and to pool resources, if such arrangements are likely to lead to an improvement in the way their functions are exercised. These powers permit the exercise by an NHS body of a local authority's prescribed health related function in conjunction with the exercise of the NHS body of its prescribed functions (section 75(2)(b), NHS Act 2006).

The local authority may also be empowered to make payments to the NHS, voluntary organisations or any other body under section 111 of the Local Government Act 1972, or the general power of competence under section 1 of the Localism Act 2011.

10. DECLARATIONS / CONFLICTS OF INTEREST & DISPENSATIONS GRANTED

None

11. BACKGROUND DOCUMENTS

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985) and The Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012



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