

**COOPERATION AGREEMENT IN RELATION TO HEALTH VISITING, SCHOOL
NURSING AND FAMILY NURSE PARTNERSHIP SERVICE****Report of the Director of Children's Services****1. INTRODUCTION AND PURPOSE OF REPORT**

- 1.1 At the Children and Families Scrutiny Committee meeting held in June 2021, Members were in favour of progression to a cooperation agreement in respect of the 0-19 Healthy Child Programme funding, which provides Stockport's health visiting, school nursing and family nurse partnership services.
- 1.2 Subsequent to this meeting, a draft Cooperation Agreement was shared at the Children and Families Scrutiny Committee on 1st March 2022, which was endorsed by the Committee.
- 1.3 The purpose of this report is to seek support for entering into such a co-operation agreement, which is due to commence on 1st April 2022.

2. BACKGROUND AND CONTEXT**2.1 Funding and Legal Responsibilities**

Local authorities have a duty under section 2B of the NHS Act 2006, (amended by Health and Social Care Act 2012), to take appropriate steps for improving the health of the people in their area.

Included within these duties is the requirement to provide support for children up to and including the age of 19. The Healthy Child Programme (HCP) is a national public health programme designed to achieve good outcomes for all children from pregnancy through to 19 years of age. The HCP 0-5, led by health visitors and their teams, offers every child a schedule of health and development reviews, screening tests, immunisations, health promotion guidance and support for parents tailored to their needs, with additional support when needed and at key times. The school nursing team continues these services whilst the child is at school. The family nurse partnership provides support for teenagers who become pregnant, up to and including those who are 19 years of age.

Currently, £5.274m is allocated annually to fund these services, most of this comes directly from the Public Health Grant, £99k is allocated from the DSG (dedicated schools grant).

2.2 Strategic Context

In March 2020, the government published "The Best Start for Life: A Vision for the 1001 Critical Days". The vision was based around 6 action areas and at the heart of the vision is the ambition of improving the experiences and outcomes of babies, parents and carers. The action areas are highlighted below and provide a

framework which will allow for further development of the Healthy Child Programme in the context of the wider Stockport Family Partnership.

BEST START FOR LIFE “ACTION AREA”	WHAT THIS MEANS	STOCKPORT’S HEALTHY CHILD PROGRAMME RESPONSE
Publication of a Start for Life Offer and parent and carer panels	Parents and carers know exactly what support they can get and their voices are heard in decision making	People and Communities working group (currently within the ICS shadow governance arrangements) is working to develop an engagement mechanism whereby service users voices are heard in the development of services and there is a means for redress and review where areas for change are identified
Family Hubs	Ensuring services are joined up so that parents and carers can access the services they need at the time they need them	Family Hub bid was submitted end Dec 2021. Awaiting decision.
Digital records and better data access	Making it easier for parents and carers to share and receive information, avoiding having to re-tell traumatic accounts	Collaboration with GMCA is underway to support Stockport in digitally integrated early years working. An App for ASQ3 (Ages and Stages Questionnaire) and Wellcomm that parents can access will be piloted in 2 areas of Stockport with a view to taking the learning across the borough. Data sharing of developmental outcomes of children between health and early years will be developed. Automated sharing of KPI data will be possible through this digitalisation.
Start for life workforce	Ensuring families feel comfortable and confident asking for help by having a skilled workforce that knows how to respond	Early Years workforce development co-ordination is underway through Stockport Family workforce development, public health

		nursing and early years. Mapping and delivery of key practices – Solihull and restorative practice and a range of evidence based early years resource alongside coaching and support will form the foundation of this work.
Shared outcome framework and improving the regulatory framework	Enabling parents and carers to compare LA outcomes and providing reassurance about the quality and impact of services	Work in scope to include the healthy child programme information in the broader One Health and Care Plan outcomes framework, which will be reference in contract monitoring meetings
Local and national accountable leadership	So that parents and carers know who is responsible for high quality, joined up services	Integrated Care System governance arrangements will ensure quality of all related services

The Borough Plan outlines Stockport's vision for the future and sets out ambitions in relation to One Heart, One Home and One Future. The One Health and Care Plan sits directly under the Borough Plan, as the mechanism through which to deliver our ambitions around a "Healthy and Happy Stockport-Stockport is a great place to grow where children have the best start in life". Fundamental to the realisation of these ambitions, is the Stockport Family Partnership.

The Healthy Child Programme sits at the heart of the Stockport Family Partnership and is designed to ensure that children have the best start in life.

There are a number of pieces of work which sit within the framework of the Stockport Family Partnership, all of which contribute to the health and wellbeing of children and young people. The picture is complex and ever changing based on changes in population, the distribution of wealth, national and international issues (COVID 19 pandemic, energy crisis, inflation).

The Stockport Family Partnership provides a holistic approach considers issues relating to, but not limited to; SEND (Special Educational Needs and Disabilities), ACES (Adverse Childhood Experiences), complex safeguarding, looked after children and children in need. The Partnership considers the roles of its workforce, immediate family members and siblings, wider family members, schools and the local community sector as part of its approach. Through this work, an outcomes framework has been developed, based on the voices of children and their families. The Partnership works towards the following outcomes:

- I feel safe
- I feel part of my community
- My voice is heard
- I enjoy good health and wellbeing
- I am happy and have people I can trust
- I am confident and able to reach my goals

- The people who love and care for me are enabled to do this

2.3 Existing Arrangements

In Stockport, the Healthy Child Programme services (health visiting, school nursing and family nurse partnership) are currently delivered, via an NHS standard contract, by Stockport NHS Foundation Trust. Each of the services is fully integrated within the Stockport Family Partnership and staff are embedded within locality teams.

These integrated arrangements have worked well and both parties are wedded to developing these positive relationships further. In order to provide continued stability for families and service staff and to enable the service to develop flexibly, work has been undertaken to ensure this integrated working can continue, without the need to go out to the market directly.

At the Children and Families Scrutiny Committee meeting held in June 2021, Members were in favour of progression to a cooperation agreement in respect of the 0-19 Healthy Child Programme integrated arrangements, which will provide for greater stability in terms of service and workforce.

The existing contract is due to expire on 31st March 2022. As such, it is anticipated that the cooperation agreement will commence on 1st April 2022.

Currently, the Local Authority pay £5.274m directly to the FT. In addition to this, the locality and team I leads for Early Years and Startwell, Parenting practitioners, the COMMA and New Beginnings services and Infant Parent Service all work alongside and complement the work of the Healthy Child Programme, adding additional value.

Despite the service working well, there has been an ongoing issue in respect of cost inflation and pay award funding. The service is largely staff based and so the increase in costs is a year on year issue. Whilst some non-recurrent funding has been made available from different sources at different times, this is an issue that needs to be addressed, if the service is to remain resilient.

As such, the agreement will highlight the collaborative process through which the contract value and funding arrangements should be agreed each year.

2.4 Cooperation Agreement

A cooperation agreement is a formal business document outlining the basic terms of an agreement with another individual, group or entity. This type of agreement, whilst specific in its terms and conditions, allows for more flexibility in relation to the approach to securing services via traditional procurement routes and a more collaborative approach when reviewing specifications and services and directing resources.

Where two or more public authorities conclude a contract that establishes or implements a co-operation between them, with the aim of ensuring public services they provide are provided with a view to achieving common objectives and that co-operation is governed solely by considerations relating to the public interest, then that

contract is not subject to the usual procurement requirements to advertise the contract to the market and run a formal regulated procedure to select a bidder.

Under Regulation 12(7) of the Public Contracts Regulations, the contract will still be legally binding (unlike for example a memorandum of understanding) and commit the parties to working in particular ways to deliver the services for the public benefit and to settle the financial provisions of the contract collaboratively, but will not work in the same way as a s75 agreement where functions may be delegated between the parties, and budgets pooled.

The emerging Integrated Care System advocates for a collaborative rather than competitive approach to commissioning local services. The 0-19 public health service is firmly embedded within the Stockport Family model and since its inception has been based on this collaborative approach. Alongside this, Stockport's commitment to a strong inclusive local economy and a drive to fully embrace social value, is gathering momentum. By further developing the relationship between the existing provider (Stockport NHS Foundation Trust) and the Local Authority, the benefits to Stockport's families, workforce, organisations and communities will continue to grow.

Some of the benefits to developing this type of collaborative approach to securing public services include;

- Existing staff have expertise and knowledge about the area within which they work. Many of the service personnel live within Stockport and are therefore invested in the services they provide, for both professional and personal reasons. This contributes to Stockport's local wealth and builds towards the Social Value Charter priorities of;
 - Promoting local skills and employment and;
 - Healthier, safer and more resilient communities.
- Enhancing the existing arrangements means that, in a time when there are national shortages of health visitors and public health nurses, the Stockport workforce remains stable, staff turnover is low and local expertise and knowledge remains local.
- There are also efficiencies to be made in terms of a wider access to shared resources, skills and talent. And through this, a higher chance of a successful working relationship, given that both parties are working towards a common goal.
- The approach means that competition at a provider level is reduced, which supports the common aim of an increase in collaboration.
- A flexible contractual arrangement means that the cooperation agreement can grow and develop as resources, needs and demands flex and change. This contract specifically seeks to provide services for children and their families and currently works alongside other complementary services and contracts. There is an opportunity within the wider transformation of children's services, to consider the service in the context of the whole Stockport family arrangements-potentially reducing duplication, identifying efficiencies and focussing resources in those areas

which need them most. Crucial to this agreement will be principles of openness and transparency around budgets, capacity and demand.

With this in mind, there is the potential to develop the cooperation agreement to include additional services, which would allow for further collaboration with the FT and integration within the Stockport Family Partnership. This is in harmony with the integrated care system ambitions of provider/commissioner collaboration rather than commissioner led spending and would provide a platform upon which to develop Stockport's health and care services further.

Other local authorities in Greater Manchester are now considering adopting a cooperation agreement approach, for the same reasons as those highlighted above.

2.5 Contract Monitoring Arrangements

The existing contract monitoring arrangements for the service have two elements. The clinical governance arrangements are well established and follow the Foundation Trust's quality assurance framework, which means issues relating to quality and clinical expertise are addressed and monitored. However, from a service performance, financial monitoring and value for money perspective, the arrangements would benefit from strengthening.

The cooperation agreement will allow for a strengthened approach to contract monitoring and sets out clearly the expectations of both parties, aligned to the Greater Manchester Integrated Care System working principles. The new contract monitoring framework will also introduce ways in which to monitor the children's outcomes specifically, in addition to the nationally mandated KPIs that are set out by the Department of Health. This will inform a broader outcomes framework this is being developed to understand the impact of the One Health and Care Plan.

3. DEVELOPMENT OF COOPERATION AGREEMENT

3.1 Engagement

The cooperation agreement has been developed in partnership with colleagues from across the council and the Foundation Trust and has also included a series of engagement sessions with service staff, CCG commissioners and strategic leads within Stockport Family.

3.2 Financial Analysis

A financial analysis was also undertaken to understand contract value. This considered; potential areas for savings and other posts which contribute directly to the healthy child programme (but are not currently costed within the contract's funding envelope).

The analysis also considered the year on year cost increase in terms of the Agenda For Change pay award.

3.3 Health Needs Assessment

A Health Needs Assessment has been developed, which considered the different elements of this service in relation to health outcomes, changes in population, complexity of needs and specifically the impact of COVID 19.

The assessment highlights the stark inequalities in health outcomes that exist across the different neighbourhoods in Stockport. A key challenge and crucial to the work of the cooperation agreement will be how we address these inequalities, whilst maintaining an equitable universal provision across the whole borough.

The Health Needs Assessment is available on request and will also been used to inform opportunities for future development of the service.

4 RISKS

Establishing a cooperation agreement between the Local Authority and the Foundation Trust, provides a legal framework within which to continue to provide a good service to Stockport residents, avoiding disruption to both the workforce and service delivery.

Whilst risks may arise, it is envisaged that the cooperation agreement will provide a robust framework, to which both parties agree.

In addition, the integrated care system and the legislative mandate that will accompany the new Health and Care Act, should also provide reassurance that working in this collaborative way is the direction of travel for all commissioners of health services.

5 NEXT STEPS

Following the sign off of the cooperation agreement, by both the Foundation Trust and the Local Authority, work will be undertaken to:

- Review each of the Healthy Child Programme services and consider their functions and investment, within the context of both the wider children's transformation programme and the ongoing MTFP;
- Confirm new contract monitoring arrangements and
- Confirm governance arrangements, within the context of the new Integrated Care System.

6 CONCLUSIONS AND RECOMMENDATIONS

(1)Members are asked to consider the report and give approval in principle to progress the cooperation agreement (attached at Appendix 1) in relation to the 0-19 Healthy Child Programme, which provides Stockport's health visiting, school nursing and family nurse partnership services.

(2) That authority be delegated the Corporate Director for Children's Services in consultation with the Cabinet Member for Children, Family Services and Education to give approval to the final cooperation agreement.

(3) That authority be delegated to the Strategic Head of Service (Legal & Democratic Governance) to do all things necessary or incidental to the implementation of the above resolutions.

BACKGROUND PAPERS

0-19 Healthy Child Programme Co-operation Agreement (Appendix 1)

<https://www.gov.uk/government/publications/commissioning-of-public-health-services-for-children/health-visiting-and-school-nursing-service-delivery-model>

Anyone wishing to inspect the above background papers or requiring further information should contact Laura Mercer on telephone number Tel: 0161 218 1799 or alternatively email laura.mercer@stockport.gov.uk