

NHS Harrow

Review of Paediatrics Contracts

Background

As part of the contract negotiations for 12/13 NHS Harrow has reviewed its contracts for paediatric services. This has involved updating service specifications, refreshing key performance indicators and developing quality incentives (CQUIN). Many of these services have been commissioned without clear specifications in the past and this has in some cases hindered the potential to develop and adapt the services to meet local needs.

The objective of this work has been to ensure that all paediatric services are clearly specified and deliver agreed measurable outcomes for patients. Clear specifications and outcome measures are an essential mechanism for maintaining ongoing dialogue between commissioners and providers. This dialogue is going to be increasingly important as Harrow strives to meet financial challenges while at the same time retaining a focus on improving quality of care to provide a cost effective and sustainable local health economy

Scope of the review

The contract review covered paediatric services delivered by North West London Hospital Trust (NWLHT) and the Ealing Integrated Care Organisation (ICO). These are namely:

- Health Visiting
- School Nursing
- Paediatric Community Nursing
- Paediatric Therapies
- Community Child Health Consultant Clinics

Although the initial contract review phase has been completed there are a number of in year developments planned which are outlined in the report.

Strategic context

The emerging NHS Harrow Out of Hospital Strategy provides the overarching strategic context for all 12/13 commissioning intentions. This sets out plans to strengthen proactive and preventative community based services to deliver care which is integrated across organisational boundaries and focussed on the individual care needs of patients.

For children's services, this translates to providing universal preventative services to all Harrow children, ensuring that targeted services are available to vulnerable children and their families, ensuring that children with complex or enduring health conditions are supported in a way which minimises the risk of complications and unplanned hospital care.

Financial context

NHS Harrow is facing an unprecedented level of financial challenge with an underlying financial deficit of £50million. There is a requirement nationally for CCGs to take over balanced budgets in April 2013 which has created significant pressure to clear underlying debt within a short time period.

NHS Harrow has achieved £14 million savings in 11/12 through a comprehensive Quality, Innovation, Productivity and Prevention (QIPP) Programme. Another £14million savings are set out in detailed QIPP plans for 12/13 and will be delivered through comprehensive service redesign aimed at reducing avoidable hospital activity and reviewing the cost and value of contracting arrangements to improve overall value for money.

QIPP savings plans related to the paediatric contracts listed above total £592k against a funding total of £5.75million. These plans are based on improved productivity and there is no proposal to reduce current service levels. Contracts have still to be signed at this point so achievement of these savings is yet to be determined.

Health Visiting

NHS Brent, NHS Ealing and NHS Harrow have worked jointly to develop a tri-borough core service specification for Health Visiting (appendix 1). This is based on the concept of progressive universalism set out in national guidance and sets out expectations for delivery of the universal Healthy Child Programme and targeted services for vulnerable children and families. There is additional focus transferring health visitor record keeping fully onto the (RiO) electronic record keeping system. Safeguarding requirements have been more clearly stated in specifications and reporting and monitoring arrangements defined in the activity schedule of the community contract.

The Health Visiting service is currently involved in a comprehensive re-design process which is being led by the Assistant Director for Community Nursing and the Health Visiting managers and team leads. Interim proposals for the re-designed services were presented to Harrow commissioners in January and to the NHS London peer review team in March 2012. The outcome of the external review was positive and the objectives of the re-design and progress made to date were commended.

Community contracts include an incentive (CQUIN) scheme which is worth 2.5% of the total contract value. As part of the overall scheme NHS Harrow commissioners have developed a Health Visiting CQUIN, which incentivises case finding and follow up of vulnerable children through regular monthly reviews with GPs. Regular high quality communication between GPs and Health Visitors is seen as a key lever for improving integration between community based children's services and ensuring that GPs are more involved and linked into local children centre provision.

Although concerns have been raised locally about caseload, health visitor numbers in Harrow are currently at and slightly above the targets set out by NHS London in line with national guidance on the future enhanced health visiting role. Productivity levels within the service have been sub-optimal and a key focus of the review is caseload management, integration of specialist leads into the health visiting teams and matching teams more closely to the varying level of need across different parts of the Borough.

School Nursing

NHS Brent, NHS Ealing and NHS Harrow have worked jointly to develop a tri-borough core service specification for School Nursing (appendix 2) including robust KPIs. Safeguarding requirements have been more clearly stated in specifications and reporting and monitoring arrangements defined in the activity schedule of the community contract

The Ealing ICO is planning to carry out a comprehensive review of School Nursing services early in 12/13. This will be an opportunity to address some of the current challenges of the service and look at opportunities for re-investing productivity savings to commission 'core plus' school nursing services in response to specific Harrow requirements. This will tie in with a current review of nursing support to special schools in Harrow currently provided by the school nursing service and community paediatric community nursing team.

Paediatric Community Nursing

A draft service specification has been developed for Paediatric Community Nursing in conjunction with NWLH including robust KPIs and a service improvement plan to record all activity data electronically.

As a result of the current review of nursing support for special schools, a new requirement for the paediatric nurses is to take responsibility for leading the nursing requirements for special schools. The team is being asked to support the school in establishing up to date policies and procedures for managing health needs within the school environment, that the school has information on the health needs of new children in the school, that the school has a management plan for each child with known health needs and that all parties involved with the child have appropriate access to management plans and appropriate training to support health needs in the school environment.

A number of issues were raised relating to the clinical governance arrangements between NWLH and Ealing ICO delivering care within the school environment and the additional resources required to provide the service as NWLH views this as a request for a new service provision. NHS Harrow accepts that further work needs to be undertaken to align the support delivered to special schools and agreed to provide further clarity to NWLH.

A signal to provide 365 day nursing was included as part of the core service requirement however this is not part of the current service provision. NWLH agreed to provide the commissioners with the number of admissions taking place at weekends to gain a better understanding of what the weekend requirements for the service may be. Ealing and Brent are in similar discussions about a possible move to a 365 day service and it was agreed that Harrow providers would be part of this process to look at opportunities for providing weekend cover across the three boroughs.

Paediatric Therapies

NHS Harrow commissions Speech & Language Therapy (SLT), Occupational Therapy and Physiotherapy services for 0-18years of age. Services are delivered in a variety of acute and community settings including children centres, pre-schools and schools and will continue to commission services at the current level.

Draft service specifications for all therapy services have been developed in conjunction with NWLH with clear outcome measures.

The Local Authority also commissions SLT for Children & Young People (CYP) with statements of special educational needs and has done so since the Harrow Case (1996). Harrow has a higher overall proportion of children with special educational needs (21.2%) than the national average for primary schools (19.9%). Currently 1,700 CYP access the service.

Although both organisations commission this service separately it was agreed that a better understanding of what is being commissioned by each organisation was necessary to support an integrated and sustainable service model. It has been recognised that the demand for SLT service has continued to increase across the age groups and there is a need to review service provisions.

NHS Harrow is actively working with the Local Authority, NWLH and representative head teachers to clarify commissioning arrangements and address how to collectively use resources to meet the needs of children with SLCN.

The Occupational Therapy service has seen an increased demand from school aged children with ASD. Clinical evidence indicates that OT is more effective if provided in the early years and consequently services have been targeted at primary aged CYP. However CYP with physical disability or long term health conditions continue to access the service until 18 years of age when they are transitioned to adult services.

Child Health Consultants

NHS Harrow needs to ensure that the Child Health service is providing proactive planned care for children with complex health needs to keep them

stable and reduce their need for unscheduled hospital based care whilst delivering best value for money.

The numbers of new and follow-up appointments in the consultant's clinics were benchmarked against the guidelines set out in the British Association for Community Child Health (BACCH) and the number of children seen in the clinics was well below the recommended guidelines. The analysis also highlighted that productivity within the service is sub-optimal with high numbers of DNA and cancelled clinics. It further suggests that the savings can be released from the overall Child Health budget which includes consultant and the administrative funding as the overall cost appears to be high for the level of service provided.

The impending Ealing ICO merger offers the Trust a unique opportunity to realign resources across three boroughs and deliver more cost effective services in line with objectives set out in the Trust's own merger business case.

NHS Harrow has taken on board the on-going concerns raised by NWLH regarding the CAMHS pathway. Commissioners are working to resolve these problems and to strengthen the pathway and we welcome the involvement of the Child Health consultants in this objective.

Conclusion

The recent merger of community health teams within the ICO has created both opportunities and challenges. The further proposed merger of the Ealing ICO with NWLHT means that this situation will continue for a further year. It is essential that commissioners continue an ongoing dialogue with service leads over the next year as all parties undergo this transition. Governance and assurance systems are key to ensuring the quality of services for patients while at the same time making the most of this period to recognise opportunities to deliver services in a more integrated and joined up way across the larger organisation.