

Health and Wellbeing Board

21 October 2013

Review of Walsall Children's Services budget plans against Health and Wellbeing Strategy and assessment of progress to date

1. Purpose

The HWB Board has a duty to provide an opinion on whether the budget plans of Walsall Council Children's Services have taken proper account of the Joint Health and Wellbeing Strategy.

2. Recommendations

- 2.1 That the Health and Wellbeing Board considers the attached review undertaken by Children's Services and overall assessment of progress to date
- 2.2 That the Health and Wellbeing Board agrees that Children's Services have taken proper account of the Health and Wellbeing Strategy in their budget plans and resource allocation.
- 2.3 That the Health and Wellbeing Board note that identifying CCG and public health budgets for children and young people requires further work to 'unpack' actual spend on children and young people (see **Appendix**)

3. Report detail

Children's Services have completed a process of self-assessment against the recommendations within each section of the Joint Health and Wellbeing Strategy, recording their assessment in the template provided.

The self-assessment show that there is close alignment between the Children and Young People's Plan and the HWB strategy and that the actions being taken are in support of delivering the recommendations for each section of the HWB strategy. Further work is required to 'unpack' the spend by the CCG and Public Health against each recommendation and priority.

At this stage, only Children's services spend has been shown against recommendations (apart from Public Health spend on school nursing), once spend is unpacked in CCG and Public Health then the next stage is to align all partners spend against priorities in the H&WB Strategy. The total amount is around £250 million including schools and around £90million excluding schools. **Appendix 1** shows the budget in Children's services for 2013/14, Public health Spend and Aggregate PCT Expenditure Figures 2011/12.

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Review of planned spend against sections within Joint Health and Wellbeing Strategy (JHWS)

The Health and Wellbeing Board has the following duties and powers:

- Duty to encourage integrated working between commissioners of health services and commissioners of social care services
- Power to encourage close working (in relation to wider determinants of health):
 - Between itself and commissioners of health related services
 - Between commissioners of health services or social care services and commissioners of health-related services
- Duty to provide opinion on whether a commission plan from either the CCG, Local Authority, NHS Commissioning Board or Local Healthwatch has taken proper account of the Joint Health and Wellbeing Strategy

The planned spend of which organisation/body is being reviewed? Children’s Services.

Name and role of person undertaking review:D. Harman, Head of Children’s Services Commissioning

Section within JHWS	How does the Children’s services planned spend contribute to achieving the Key Recommendations in 13/14 within this section?	In which document is this spend referenced and where? (page no, section etc)	Gaps identified and future plans?
Section 5: Wellbeing in Walsall	No recommendations apply. Once spend is unpacked in CCG and Public Health then the next stage is to align all partners’ spend against priorities		We will apply the NICE guidance on social and emotional wellbeing for Children and Young People LGB12 to help identify gaps in <ul style="list-style-type: none"> • Strategy, policy and commissioning • Home visiting, early education and childcare • social and emotional wellbeing in primary and secondary education across all sections below

Section 6: Give every child the best start in life	<p>2. Better identify and provide early help to vulnerable parents by undertaking a joint Local Authority/NHS review of services and performance within antenatal pathways and Children's Centres to contribute to an effective early help offer for children and their families Existing Resources</p> <p>3. Improve the early years offer across childcare, nurseries and children's centres to increase school readiness and early years foundation score (or equivalent) CC Redesign and prioritisation of £6million</p>	<p>CYPP Delivery Plan page 2</p> <p>CYPP Delivery Plan page 2</p>	See delivery plans for actions to address gaps
Section 7: Enable all children and young people to maximise their capabilities and have control over their lives	<p>4. Work with parents, schools, education and training providers to enhance aspirations and minimise absences to reduce the attainment gap between the least and most deprived children and young people in Walsall School spend DSG (Dedicated Schools Grant) £146 million + Academy spend Education support services; School Improvement £711k Virtual School £629k School nursing £1.273million</p> <p>5. Increase access to evidence-based parenting and family support programmes, targeted at those most in need (Children in need includes those who are looked after (LAC) and those with a child protection plan (CPP)) Parenting Support Programmes £150k</p>	<p>CYPP Delivery Plan page 14-15</p> <p>CYPP Delivery Plan page 21-22</p> <p>CYPP Delivery Plan page 2</p>	See delivery plans for actions to address gaps
Section 8: Employment and improving employability	6. Reduce youth unemployment by working with partners to provide coordinated support to vulnerable young adults & young parents to support them into work and to reduce	CYPP Delivery Plan page 14-15	See delivery plans for actions to address gaps

	<p>poverty and become capable parents Connexions Contract and Personal Advisers £1.5 million (2013-14) 8.Reduce child poverty by targeting worklessness reduction on parents of young children and enhancing access to childcare as well as mitigating the impact by supporting income maximisation, food banks, high quality housing and fuel poverty reduction through a collaborative approach Child Poverty Officer £40k + Food Bank contributions</p>	<p>CYPP Delivery Plan page 29-30</p>	
<p>Section 9: Creating and developing healthy and sustainable places and communities</p>	<p>No recommendations apply. Once spend is unpacked in CCG and Public Health then the next stage is to align all partners' spend against priorities</p>		
<p>Section 10: Improving health and wellbeing through healthy lifestyles: Making 'healthier choices easier'</p>	<p>No recommendations apply. Once spend is unpacked in CCG and Public Health then the next stage is to align all partners' spend against priorities</p>		
<p>Section 11: Reducing the burden of preventable disease, disability and death</p>	<p>No recommendations apply. Once spend is unpacked in CCG and Public Health then the next stage is to align all partners' spend against priorities</p>		
<p>Section 12: Healthy ageing and independent living</p>	<p>No recommendations apply. Once spend is unpacked in CCG and Public Health then the next stage is to align all partners' spend against priorities</p>		

Appendix – First stage spend analysis

A. Childrens Services

Figure 1; Childrens Services Budget 13-14

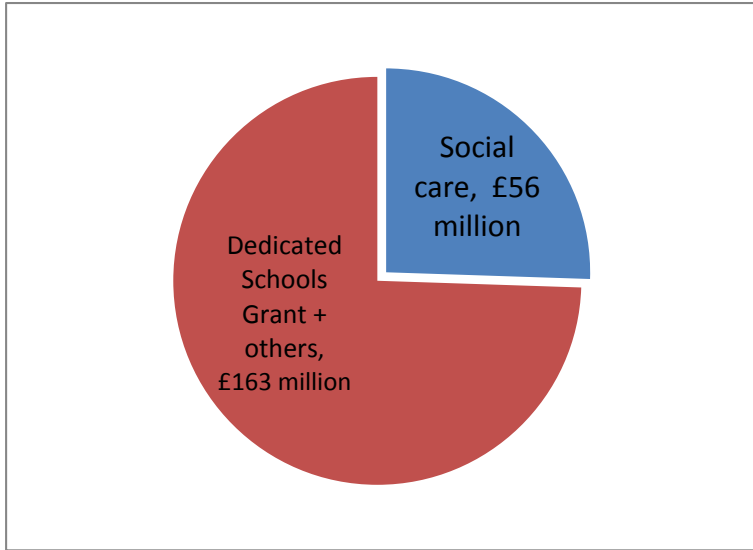
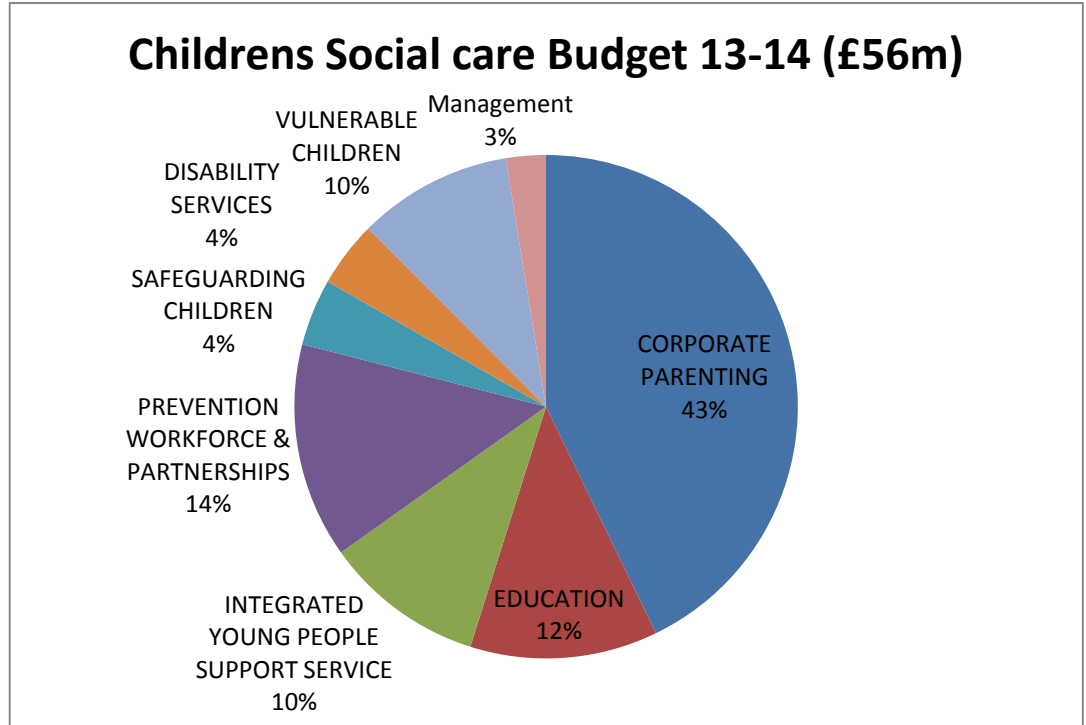


Figure 2 Social Care Budget



2. Public Health 13-14

School Nursing £1.3 million

Breastfeeding and family support services £0.3 million

4. PCT/CCG

Aggregate PCT Expenditure Figures 2011/12

Need to extract spend on children in each line

Source 2011-12 Programme Budgeting PCT Benchmarking
Tool version 1.0

Programme budgeting category		Aggregate PCT level expenditure (£million)													
		Prevention & Health Promotion	Primary care		Secondary care					Urgent / emergency care		Community Care	Care Provided in other setting	Non-health / social care	Total gross expenditure
			Primary Care	Primary prescribing	Inpatient: Elective and Daycase	Inpatient: Non-elective	Outpatient	Other secondary care	Total Secondary Care	Ambulance	A&E				
01	Infectious diseases	194.0	13.7	251.1	33.9	213.0	63.0	508.2	818.1	1.2	17.7	51.6	85.9	49.6	1,483.0
02	Cancers and tumours	158.3	4.1	394.2	1,664.0	704.0	513.5	1,190.2	4,071.6	0.9	-	355.0	331.4	185.7	5,501.1
03	Disorders of blood	0.8	1.1	49.5	133.1	160.6	301.9	370.5	966.1	0.9	9.1	45.2	34.0	39.9	1,146.7
04	Endocrine, nutritional and metabolic problems Mental health disorders	49.2	11.4	1,710.7	122.8	230.6	193.4	138.8	685.7	26.4	7.0	316.1	37.2	94.4	2,938.0
05		217.5	13.8	1,012.6	367.7	360.0	210.9	4,225.3	5,163.8	28.7	16.6	2,090.2	2,226.3	387.7	11,157.2

06	Problems of learning disability	6.4	1.1	0.1	28.6	14.5	8.5	168.8	220.4	-	-	254.1	1,058.3	74.9	1,615.2
07	Neurological	2.4	1.3	755.6	564.7	1,240.8	289.1	550.9	2,645.5	99.9	39.3	372.9	211.3	136.5	4,264.6
08	Problems of vision	2.2	495.6	203.0	483.1	53.1	677.0	169.1	1,382.4	1.3	51.1	30.8	19.4	69.2	2,255.0
09	Problems of hearing	2.7	1.1	10.1	109.0	22.4	117.6	118.6	367.7	0.1	-	58.3	8.8	15.4	464.1
10	Problems of circulation	13.5	42.9	1,652.8	876.2	1,905.8	505.8	850.3	4,138.0	266.0	92.2	362.5	120.2	230.9	6,919.0
11	Problems of the respiratory system	7.4	7.2	1,380.9	347.8	1,558.5	247.9	197.7	2,351.8	201.0	82.2	193.3	47.9	140.4	4,412.1
12	Dental problems	13.8	2,841.7	2.2	175.8	17.5	95.0	21.8	310.1	0.1	-	151.1	10.7	85.2	3,415.0
13	Problems of the gastrointestinal system	2.0	2.5	814.0	1,098.8	1,570.7	516.5	226.2	3,412.1	5.5	95.3	89.9	32.7	145.8	4,599.8
14	Problems of the skin	3.1	4.4	511.8	225.7	350.1	442.8	133.3	1,151.8	4.9	32.0	289.4	21.8	66.0	2,085.2
15	Problems of the musculoskeletal system	2.2	6.6	437.4	2,255.4	278.9	827.1	555.7	3,917.1	1.8	97.9	410.3	125.7	160.6	5,159.6
16	Problems due to trauma and injuries	1.8	14.8	122.4	247.4	1,472.0	319.4	157.2	2,196.1	422.3	566.7	226.4	97.5	116.0	3,764.0
17	Problems of the genitourinary system	110.2	3.1	524.5	851.8	889.2	887.0	806.0	3,434.1	5.6	56.5	298.9	32.8	155.8	4,621.3
18	Maternity and reproductive health	90.9	8.5	120.2	187.3	1,856.6	527.0	244.9	2,815.7	21.9	7.9	358.2	30.5	119.5	3,573.2
19	Conditions of neonates	18.0	1.7	1.4	31.5	330.4	7.8	447.3	817.0	0.9	-	31.6	30.8	34.7	936.2

20	Adverse effects and poisoning	1.3	4.4	1.6	282.5	466.5	3.4	24.6	777.0	91.4	48.1	10.8	7.3	31.5	973.4
21	Healthy individuals	1,842.3	-	-	-	-	-	-	-	-	-	-	-	171.0	2,013.3
22	Social care needs	39.6	2.3	4.4	12.7	7.8	0.7	58.9	80.0	0.5	5.4	407.0	1,979.8	307.5	2,826.5
23	Other	-	7,541.9	245.8	217.9	477.4	1,581.8	2,391.6	4,668.8	552.4	490.2	1,487.9	428.9	843.0	16,258.9
23a	GMS/PMS	-	7,541.9	13.7	-	-	-	-	-	-	-	-	-	297.5	7,853.1
23x	Miscellaneous Other	-	-	232.1	217.9	477.4	1,581.8	2,391.6	4,668.8	552.4	490.2	1,487.9	428.9	545.5	8,405.7
All	Total expenditure	2,779.6	11,025.0	10,206.4	10,317.7	14,180.5	8,337.0	13,555.7	46,390.9	1,733.6	1,715.5	7,891.6	6,979.0	3,661.1	92,382.67

Notes on interpretation of data:

- Expenditure data included within this workbook are taken from PCT programme budgeting returns to the Department of Health for 2011/12.
- Calculating programme budgeting data is complex and not all healthcare activity or services can be classified directly to a programme budgeting category or care setting. When it is not possible to reasonably estimate a programme budgeting category, expenditure is classified as 'Other'. Expenditure on General Medical Services and Personal Medical Services cannot be reasonably estimated at disease specific level, and is separately identified as a subcategory of 'Other' expenditure.
- The allocation of expenditure to programme budgeting subcategories is not always straightforward, and subcategory level data should therefore be used with caution.
- Estimates of expenditure are calculated using price paid for specific activities and services purchased from healthcare providers. PCTs follow standard guidance, procedures and mappings when calculating programme budgeting data.
- The analysis of programme budgeting data by care setting was introduced for the first time in 2010/11. For this reason, programme budgeting data within individual care settings should be interpreted with caution.
- Due to differences in the level of information available to PCTs on A&E attendances a national split has been applied to PCT total A&E expenditure to apportion it across programme budgeting categories.

