

Brighton & Hove City Council

For general release

Meeting: Children's Trust Board

Date: Monday 18 October 2004

Report of: Director of Children, Families and Schools

Subject: Integrated Area Based Working and Children's Centres

Ward(s) affected: ALL

The special circumstance for non-compliance with Council Procedure Rule 19, Access to Information Rule 5 and Section 100B(4) of the 1972 Local Government Act as amended, (items not to be considered unless the agenda is open to inspection at least five days in advance of the meeting) is that there were resourcing issues to be resolved before this report could be completed.

1. Purpose of the report

1.1 To ask the Board to endorse the principles set out in Annex 1.

2. Recommendations

2.1 That the Board endorse the principles set out in Annex 1 as summarised below.

3. Information/background

3.1 The way in which health, education and social care for children is being delivered and the method of how it is being delivered is being changed to provide a much more effective service. The changes are intended to make the service integrated and to provide a service that will meet the needs of children and their families. Work is still in progress and the model described is not

finalised, but some key principles of the model are presented in the attached paper at Annex 1. In summary these are as follows:

- 3.2** The Chief Officers of the partner organisations have agreed a policy framework within which the development and redesign of children's services will take place.

This has four parts to it

Tacking poverty and disadvantage

- 3.3. It is known that a poor start in life has a long term negative impact on health and well-being. Hence, developing and prioritising services that tackle poverty and disadvantage will be a way of providing more effective services that will produce positive outcomes for children and families.

Prevention

- 3.4. By investing in preventative approaches there will be a long term, positive impact on health and well-being. Services will aim to use early intervention to avoid situations getting to crisis point through early intervention.

Parenting

- 3.5. Parents have responsibility for their children our aim must be to enable and support people to be effective parents. This will be by helping them when they need it to provide positive experiences for their children to aid social physical mental and emotional development of their children.

Whole system analysis

- 3.6. The children's and family service is a complex range of different parts and the whole picture cannot be seen from looking at at one piece of the jigsaw. So in assessing how services are to be provided in the future it is necessary to look at all the pieces and see how they link together. This is a whole systems approach and will be used to redesign the service.

3.7. The above is the platform on which our future children and family service will be built.

Service delivery

3.8. Work has been going on to try and define what the pattern of service might be in the future. A number of key founding principles to services redesign has been developed and agreed at chief officer level.

Levels of service

3.9. The chief officers thought it helpful to define services in the following way

- Core services that will be accessible to all
- Enhanced services provided on the basis of assessed needs
- Intensive services provided on the basis of assessed needs

3.10. The enhanced and intensive services will be provided for the following

- Communities in need¹ – we know that certain communities and geographical areas in the city are disadvantaged compared to others and hence will have higher levels of need. We will target resources to meet these communities' needs.
- Families in need. - through the common assessment framework the whole families needs will be addressed and then met through the delivery of a family health² plan coordinated by a lead professional
- Children in need. - through the common assessment framework the childs needs will be addressed then met through the delivery of an individual health plan

3.11. These levels of service will be used to help determine the service redesign by identifying which services are already core, enhanced and intensive services and what changes need to be made for the future in order to deliver better services for children and families.

Area and cluster working

¹ Communities in need might be locality based e.g. Moulscomb, or particular groups like asylum seekers, black and minority ethnic communities, looked after children, homeless families or young people.

² Health in this context means health and well-being

- 3.12. The Chief officers want to bring as many services as close as we can to where children live or where they frequently go e.g. schools. In order to do this the project teams are proposing to redesign the way most services are delivered into areas and clusters (sub areas) so they are serving geographical patches across the city and hence where people live or go to school.
- 3.13. The city will be split into 3 areas, an area in east, west and central. These areas will be further sub divided into smaller areas called clusters, making nine clusters in total. Cluster services can be tailored to the needs of the population in their local catchment areas so it is expected that different clusters will provide different services.

It is proposed that each cluster will provide

- A multidisciplinary team
- Core, enhanced and intensive services to meet local needs
- Local schools
- General practices/ primary care
- Outreach from city-wide services
- Voluntary and community sector services

City wide services

- 3.14. Some services are too small or specialised to be provided or based in every area or cluster. So these services will be organised and based centrally in the city. Some will provide outreach into the areas and clusters but for others, because of their specialised nature, families may have to travel to central locations.

Children's centres

- 3.15. Five new centres are being planned in areas of deprivation across the city and these will be one of the important elements of service to meet the needs of families with children aged five or under. The Government has specified that that there centres will provide integrated health, social care and early education and child care services from one easily accessible building or group of buildings.

Further development

- 3.16. The patterns of services in areas cluster or city-wide have not be finalised or set as the service redesign work is just commencing. Hence there is an opportunity to influence and help shape thing for

the future. Ways of working in the cluster has also to be worked out as has the exact composition of the multidisciplinary team and how is it going to work.

4. Consultation

- 4.1 The report in Annex 1 was agreed by the Chief Officers Group on 1 June 2004
- 4.2 A copy of the report has been made available to all staff across partner organisations via their Intranet sites. Staff were encouraged to feed back their comments.
- 4.3. A condensed version of the report has been produced in a leaflet format and this has gone to all staff in partner organisations, asking for their comments.
- 4.4. A joint briefing is being organised for the Patient and Public Involvement Forums and the Health Overview and Scrutiny Committee and their comments sought.
- 4.5. A series of seminars are being held with the community and voluntary sector (the first of which was held on 16 July) to keep them informed and seek comments

COMMITTEE REPORT APPENDIX



Meeting/Date	Children's Trust Board – 18 October 2004
Report of	David Hawker, Director of Children, Families and Schools
Subject	Integrated Area Based Working and Children's Centres
Wards affected	All

Financial implications

Work is currently being undertaken to calculate the costs involved in moving towards area based working. Detailed costings are not yet available but it is likely that there will be a cost implication to this process. Funding will need to be identified if it cannot be contained within the existing resource base across the partner agencies.

David Ellis. 5 October 2004

Legal implications

This report is asking the Board to endorse key principles which will provide the framework for redesigning the way that health, education and social care services for children are delivered in the city. The principles are in line with the Government's targets for councils as set out in the DfES (Feb 2004) document Every Child Matters: Next Steps.

There are clearly human rights implications in the review and development of children's services. The rights to private and family life, freedom from inhuman and degrading treatment, the right to a fair hearing and the prohibition of discrimination in the exercise of these rights are all particularly relevant for the Committee to consider when children's services are being planned.

A written s31 Partnership Agreement will be required if the new services seek to make use of pooled budgets with the NHS, and/or lead commissioning and/or integrated provision and this will need to be in place before those flexibilities can be used. Preparing a Section 31 agreement will involve significant financial and legal resources.

It is important to note that, however the services are developed, the council will remain accountable for the discharge of its existing statutory functions in relation to children. Therefore the council must continue to play a central role in the decision making processes, monitoring and review of these services.

Lawyer consulted: Elizabeth Culbert

Date: 8th October 2004

Corporate/Citywide implications	Risk assessment
----------------------------------------	------------------------

COMMITTEE REPORT APPENDIX



<p>Patterns of services delivery will change</p>	<p>There are risk in devolving services to areas and clusters and the financial viability of this approach needs to be determined by the finance project group especially in a time of significant financial pressures across the whole health and social care economy</p>
<p>Sustainability implications All developments and changes must be sustainable in the long term</p>	<p>Equalities implications Equity of access based on defined needs is a principle that underpins integration of services</p>
<p>Implications for the prevention of crime and disorder None to specifically mention in relation to the principles outlined in the paper</p>	

<p>Background papers <i>[Part 1 reports only]</i> 1. No background papers</p>
<p>Contact Officer Sally Wadsworth, Children’s Commissioning Manager. 5060</p>