

**YORKSHIRE AND THE HUMBER REGIONAL HEALTH AND WELLBEING COLLABORATIVE IN PARTNERSHIP WITH THE
ASSOCIATION OF DIRECTORS OF CHILDREN'S SERVICES
POLICY WORK STREAM – IMPROVING HEALTH OUTCOMES FOR CHILDREN
ACTION**

LOCAL AUTHORITY AREA/CCG

Rotherham

What needs to be done? The actions we might need to take to improve the systems and processes which lead to better outcomes for children, young people and their families (Taken from 'Initial Recommendations', Health from Mars, Local Authority from Venus?' Dec 2012)	How might we tackle this? (Initial actions)	Who might do it? Who might lead action and who might be involved	Local/sub regional or regional?			When might it be done by? (Take into account is it urgent?)	How will we know it has happened?
			L	SR	R		
1. Develop a clear statement of vision and values and ensure this is reinforced throughout the system. Ensure children feature strongly in the JSNA and Health and Wellbeing Strategy and that your Children and Young Peoples Plan or equivalent aligns.	<ul style="list-style-type: none"> • JSNA covers life cycle • Children and Young People's Plan (CYPP) refreshed • Action plan being developed 	John Radford Joyce Thacker Sue Wilson	L			Complete Complete May 2013	JSNA CYPP
2. Undertake an assurance exercise of the degree to which core vision and values are owned throughout and across the system and from strategic to operational levels.	<ul style="list-style-type: none"> • Focus groups • Questionnaires • Direct contact/telephone • Been to GP reference group • Been to OE for discussion • To attach plan on a page to service specifications and commissioned services • Sent to all in CCG who work on the children's agenda 	DCS/SO David Polkinghorn /Sarah Whittle	L			Sept 2013	Audit completed and feedback to participants / CYP&FP

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3. Undertake activity to develop a mutual understanding of who has authority for decision making and holding responsibility. Locate existing effective partnerships in the new planning framework. If they are not effective review whether they are still needed.	<ul style="list-style-type: none"> Review of governance Still some work to be undertaken in this area, as health commissioning has changed considerably. 	P&Q Team	L			Sept 2013	Report to CYP&FP
4. Develop an understanding of available budget/resources in advance of developing operational plans	<ul style="list-style-type: none"> Annual assessment of partner resources to fund CYPP priorities We will look at this in a different way to previously – and try and apportion costs to age groups e.g 0-5 etc so we can see where the bulk of our resource is being spent – and compare to outcomes in these areas The above suggestion would require benchmarking and should be driven by the JSNA and the Children's Audit 	Joanne Robertson	L			June 2013	Report to CYP&FP
		Joanne Robertson / Chrissy Wright				Sept. 2013	Report to CYP&FP
5. Develop communication strategies to ensure a consistent dissemination of information and on-going engagement in the future development of strategy (For effective communication we need to ensure that we really understand the new commissioning arrangements to ensure that the appropriate parties are involved. (e.g. NCB))	<ul style="list-style-type: none"> CCG hold an internal children's partnership meeting including public health and RMBC Commissioning Team to ensure health messages are communicated across colleagues and the appropriate action is taken by the most appropriate lead. 	Steve Pearson	L			Ongoing	Media report to CYP&FP

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6. Develop strategies to mitigate the risk of pathway fragmentation.	<ul style="list-style-type: none"> CCG will invite the NCB LAT to attend the children's partnership meetings to make sure that continuity remains. KPI dashboard also will look across health to support discussions about performance across health services against the healthy child promotion programme 	Dr. John Radford	L	SR		April 2013	Local Area Team (LAT) representative attends local meetings
7. Exploit the potential of the Health Visitor/School Nurse Offer (DH, 2010), through improved integration and systematic application of a structured framework for meeting child and public health outcomes.	<ul style="list-style-type: none"> We will keep focused on the pathway children move through – and keep engaged with other agencies, as changes in one service may have an impact on another. 	Dr. John Radford	L			July 2013	
8. Develop and apply short- and medium-term impact measures for early intervention and prevention, with jointly agreed outcomes for local achievement	<ul style="list-style-type: none"> We will really focus down on the number of outcome measures and ensure that they are specific to priority areas and are measurable and achievable within an identified timeframe The Voluntary Sector CYP&F Consortium are leading on work to develop a social value toolkit which will be Rotherham specific and applicable to early help interventions 	Sue Wilson Sara Graham	L L			May 2013	CYPP Action Plan that sets out the required outcomes

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9. Develop a jointly agreed strategic market management and procurement route shared and understood by all.	<ul style="list-style-type: none"> Service specifications are jointly written/shared across commissioners for all services and all should reflect the shared vision. Develop a process of joint consultation and market management with providers through a series of events that communicate the direction of travel and priorities 	Chrissy Wright/ Sarah Whittle	L			July 2013	Joint Market facilitation plan
10. Prepare the workforce to deliver our aspirations through integrated training events and information sharing workshops.	<ul style="list-style-type: none"> Workshops held on Early Help. Prospectus due to be launched Request that training is focused on priority areas and if not delivered jointly then key messages are agreed and delivered to all. 	Warren Carratt	L			March 2013	Prospectus launched. Review of take up/impact of training.

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11. Plan the transition for commissioning health visiting and school nursing through shared understanding of what this opportunity offers.	<ul style="list-style-type: none"> • Work with the DPH to review. • The impact of transition of HV/SN will affect a number of organisations and it is essential that we have a shared understanding of the opportunities it presents. • E.g – CCG remains the maternity commissioner – changes in this service will impact upon HV and children centres and GP practices. We need to be clear that commissioning organisations have a shared understanding • We need to understand the legacy of HV from LAT. 	DCS DPH Cabinet Member	L			May 2013	Clear SN service specification communicated to key agencies
12. Test the robustness of relationships by turning vision and strategy into action	<ul style="list-style-type: none"> • CYPP reviewed for 2013-2016. • Develop action plan for plan on a page • Ensure inclusion of CYPP in the HWBB as the lead strategic document 	DCS Sue Wilson Sue Wilson	L L L			Completed May 2013	<ul style="list-style-type: none"> • CYPP agreed at CYP&FP. Issued to all stakeholders. • Action plan on agenda for May CYP&FP

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13. Identify ways of understanding cultural differences by investing in building resilient relationships which endure overtime.	<ul style="list-style-type: none"> DCS/Cabinet Member spends time with key partners including VCS 'walk in their shoes'. Need to walk in the shoes of other commissioning organisations and break down cultural commissioning barriers 	DCS/ Cabinet Member	L			Ongoing All Board Members to commit to work shadowing opportunities e.g.: Spend time with: <ul style="list-style-type: none"> CCG Lead for CYP A&E/Children's Ward Meetings with RDASH Meetings with CCG Chief Operating Officer CCG – go to SLT/DLT CCG – shadow education /social services officers etc... commissioners 	
14. Identify blocks to information sharing and test data sharing protocols and processes for robustness and resilience	<ul style="list-style-type: none"> Assurance conversations with key service leads. 	Gary Walsh	L			Sept. 2013 <ul style="list-style-type: none"> Report back to CYP&FP. 	

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15. Maximise the opportunity that commissioners with extensive experience and expertise from a wide range of backgrounds brings to the table.	<ul style="list-style-type: none"> Develop processes to share commissioning information across partners Cross agencies commissioning meetings to share experience and information 	Chrissy Wright/ Sarah Whittle	√	√		April 2013	<ul style="list-style-type: none"> Feedback to local and sub region Jointly commissioned contracts