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?		regional or might it		How will we know it has happened?
			L	SR	R		
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.	 Review of governance Still some work to be undertaken in this area, as health commissioning has changed considerably. Governance Structures currently being mapped 	P&Q Team Commissio ning	L			Nov 2013	Report to CYP&FP

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Develop an understanding of available budget/resources in advance of developing operational plans	 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 Develop a Joint Commissioning Strategy 	Joanne Robertson Joanne Robertson / Chrissy Wright	L	SR	R	Nov 2013 Oct 2013	Report to CYP&FP Report to CYP&FP

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Identify blocks to information sharing and test data sharing protocols and processes for robustness and resilience	Assurance conversations with key service leads. NHS Standards of Connectivity issues to be resolved (ICT issues)	Gary Walsh	L	SR	R	Oct. 2013	Report back to CYP&FP.

The actions below are deemed as completed or part of other areas of work / developments

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.

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.

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))

Develop strategies to mitigate the risk of pathway fragmentation.
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.
Develop and apply short- and medium-term impact measures for early intervention and prevention, with jointly agreed outcomes for local achievement
Develop a jointly agreed strategic market management and procurement route shared and understood by all.
Prepare the workforce to deliver our aspirations through integrated training events and information sharing workshops.
Plan the transition for commissioning health visiting and school nursing through shared understanding of what this opportunity offers.
Test the robustness of relationships by turning vision and strategy into action
Identify ways of understanding cultural differences by investing in building resilient relationships which endure overtime.
Maximise the opportunity that commissioners with extensive experience and expertise from a wide range of backgrounds brings to the table.