







Agenda

09:00 – 09:30 – Refreshments / Registration

09:30 - 09:35 - Welcome

09:35 - 10.15 - Presentation

Break

10:40 - 10:45 - Presentation

10:45 - 12:00 - Table Discussions

12:00 – 12.30 – Networking



Children and Young People's Health and Wellbeing Services 2020

We believe that all children in Greenwich, regardless of their background or circumstances, should have a happy and fulfilled childhood where they belong, grow and succeed so that they enter adulthood ready, willing and able to achieve their highest potential.

Royal Greenwich currently commissions a number of individual services that support children and their families. We believe we can harness and further strengthen the work of these services by bringing them together within a new model.



Children and Young People's Health and Wellbeing Services 2020

- Through integration, partnership and alignment, we believe we will be able to offer seamless, modern, tailor-made services to children, young people and their families, and identify any issues and offer support at the earliest possible time before they escalate.
- Our future services will need to fully embrace digital technology, data collection and communication in order to meet the challenges of our communities and match their expectations
- Today is part of the consultation programme to develop these services for 2020
- The session today will be focusing on Opportunities and Partnerships

Start Well Greenwich



- Start Well Greenwich is the commissioning programme that will develop the arm of the Greenwich Prevention System (Live Well Greenwich) to support children, young people and their families
- Prevention needs to be delivered at a larger scale and systematically in order to achieve population level impact.
- Improve health & wellbeing through a whole system approach and an integrated system delivery model
- Prevention or early detection and turning the tap down on future demand
- Services working in partnership to deliver shared outcomes
- Outcomes tracked across the services

Our Vision

- Evidence-based innovation transforming our services for the 21st century
- Service modernisation including service delivery partnerships that share the delivery of outcomes
- Detection and support as early as possible
- Embracing community and peer development opportunities
- Consistent offer across the borough and diversity in provision and take-up.
- Getting the best out of our physical assets







Population - Children and Young People



c.73,000

0 to 18 years old live in RBG (as of 2018*, CYP)



This is 24% of the total population in Royal Greenwich



Children and Young People from BME groups account for **over half** of all children living in the area; this compares with 22% in the country as a whole

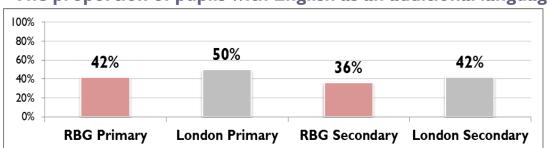
c.43,000 pupils attend a RBG school

c.4,000 2,3 and 4 years olds access funded childcare places

c. 15% of pupils have special educational needs



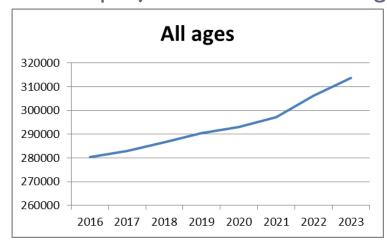
The proportion of pupils with English as an additional language

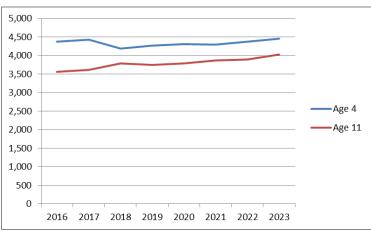


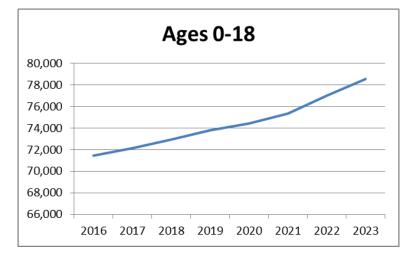
^{**+150} languages are spoken by at least one RBG pupil, the main one after English being Yoruba (c.2,600 speakers; 6% of pupils)

Population projections

The population of Greenwich has seen unprecedented growth in recent years and is projected to continue to grow







% change 2016 to 2023:

All ages: +12%

0 to 18: +10%

4 year olds: +2%

II year olds: + 13%

4 and 11 year old projections feed into school roll projections in terms of planning for current and future pressures

What are our challenges?

- The growing population of secondary school children
- Conflict in relationships and domestic abuse. Both the impact of parental domestic abuse and entering into conflictual/ violent relationships as teens and adults
- Exploitation, particularly through gangs and child sexual exploitation
- Gap in educational attainment with some vulnerable groups, particularly in later key stages
- High levels of childhood obesity
- The challenges of poor mental health and wellbeing
- High levels of teenage pregnancy
- High levels of smoking in pregnancy
- Low levels of breastfeeding in young mothers
- High hospital admissions



What are the key outcomes to achieve (1)

- Improved mental health and wellbeing for children and young people.
- Increased proportion of children with healthy weight through improved nutrition and physical activity.
- Good oral health, reduced admissions due to dental health.
- Reductions in hospital admissions
- Fewer families are in chaotic environments better organisation and skills.
- Reducing smoking rates in pregnancy

What are the key outcomes to achieve (2)

- Improving breastfeeding rates amongst teenage and young mothers and mothers from deprived backgrounds.
- Reducing risky behaviour in children and young people including anti-social behaviour and criminal activity.
- Ensuring all children, particularly vulnerable groups,
 achieve their full potential at educational key stages.
- Increasing the ambition of children and young people.



What are the key outcomes to achieve (3)

 Reducing isolation and developing and strengthening positive supportive social networks

- Increasing the skills, confidence and quality of parenting by new and young parents.
- Increasing the skills, confidence and quality
 of parenting, particularly of adolescent children
- Employment, education and training for parents and young people







The new model – which services are in scope?

- Health Visiting (0-4 years)
- Children's Centres (0-4 years)
- School Nursing (5-19 years) including YOS Nursing
- Universal Youth Service (10-18/25 years)
- Universal Youth Summer Programme (10-18/25 years)

The new model

- The new model will encompass significant system change with robust stakeholder engagement – with 6 additional half-day sessions, focusing on key areas and participation of children and young people and families in the design of services.
- Establishment of Start Well Greenwich, a new prevention system for children and young people, aligned with Live Well Greenwich
- Universal services that encourage access, allows for relationships to be developed, needs to be identified and additional support to provided / accessed at the earliest possible time



The new model

- The delivery of outcomes shared and tracked between providers
- Maintain our commitment to 1001 Days, but in addition, expand provision across all age ranges from childhood to employment and strengthen adolescent support
- Services based on robust evidence
- Digital technology and communication to be incorporated across all services



What is proposed?

- Integration of Health Visiting and Children's Centres
- Integration of School Nursing and Universal Youth
- Investment in additional adolescent services to address key priorities (in and out of school settings)
- Development of social prescribing for children and young people
- New service to be aligned with Early Help and NHS networks
- Interactive, borough-wide digital offer, including a new
 Digital Passport at the start of secondary school

Digital Passport - Proposals

- All children starting secondary school offered a digital 'passport'
- Passport to provide information about health, wellbeing and activities in the borough
- Conduct questionnaires and analyse the data, which will identify interests, needs and risks
- Build a 'digital relationship' with young people, and profile risk
- Incorporate social prescribing and promote services, activities, refer and signpost
- Incorporate a Help Button, live chat, messaging
- Aligned with new Adolescent services and Integrated School Nursing and Universal Youth Service
- Strong partnership with all secondary schools
- Utilisation of apps and other digital solutions

New Adolescent Services - Proposals

- Development of new additional services for adolescent children
- In and out of school settings including youth hubs
- Mixed method approach (face-to-face, digital)
- Focus on 4 key areas
 - Healthy food / healthy weight / Physical activity
 - Education attendance and attainment
 - Mental health and wellbeing
 - Risk (drugs and alcohol, exploitation, sexual health, violence)

Quality Assurance

- A quality assurance programme for Start Well Greenwich
- Strengthened voice of children, young people, parents and carers in service review and development
- Systematic feedback opportunities after receiving services
- Digital solutions
- Mystery shopping



Indicative Timetable

Action	Start Date	End Date
Stakeholder Engagement Process (Pre-tender)	19/12/2018	28/02/2019
Publish Tender	01/05/2019	
Tender Period	01/05/2019	30/06/2019
Award of Contract	01/09/2019	30/10/2019
Mobilisation Starts	01/10/2019	31/03/2020
Start of New Contracts	01/04/2020	

Finance

Service	Indicative budget for service area
Children's Centres, integrating Health Visiting	9,500.000
Universal Youth Service, integrating School Nursing	2,300,000
New adolescent services, incorporating current sexual health outreach and weight management services	1,200,000
Digital Passport and quality assurance	500,000

We are currently not in a position to confirm final allocations, therefore, these figures are indicative

Opportunities and partnerships

Proposals

- Integration will mean one contract to deliver both Health Visiting and Children's Centre services
- Integration will mean one contract to deliver both School Nursing and Universal Youth services
- Contracts may be broken down further geographically.
- Wherever possible services need to be co-located
- Bids will need to demonstrate how the service is integrated and delivered by multi-disciplinary teams
- Partners under the same contract will need to have a data-sharing agreement in place

Opportunities and partnerships

Proposals

- A digital offer is critical to these services. Bids will need to demonstrate how they have integrated digital technology within service delivery both capturing outputs, outcomes, delivering KPIs, as well as how the service communicates with children, young people and their families
- The digital offer must link with the Digital Passport
- Service access and client communication must include a digital component (for example, wherever there is a need to book an appointment, there must be a facility to do this online.)
- We will expect the service to demonstrate regular review and adaptation based on the data it is collecting.
- We want to focus on outcomes monitoring and only focus on outputs when performance is below target.

Opportunities and partnerships

- It is up to providers how you develop partnerships and who you do this with
 - How can we help to support this process?
- Bids will need to demonstrate they have developed innovation in service development, including digital development.
- We are considering a payment by results contract in relation to the delivering of outputs and outcomes
 - How could each of these work across a partnership?

Answering questions

What is the current situation regarding estates? What is the situation regarding property leases?

- We will be pulling together a list of properties included within the tender
- Currently including 23 Children's Centres and 3 Youth hubs
- Majority will be under a peppercorn lease arrangement.

How much integration is already in place? Does the whole workforce strategy need to be reviewed?

- CCs and Health Visiting services are currently geographically aligned, but are not integrated.
- Yes, a new integrated workforce strategy will need to be developed by providers and a draft submitted as part of their bid

Answering questions

Is lead-in time (six months) enough for the mobilisation period?

- The 6 months mobilisation is predominately for the transfer of staff and initial establishment of provision.
- We acknowledge that further development and mobilisation work will be necessary in the first year/s of the contract.

Will RBG still be following Healthy Child Programme?

- Yes
- The mandated checks are likely to be contracted with Payment by Results

Tracking is a challenge due to confidentiality. Clarity is required on how it is done and who data is shared with.

- While tracking will take place on an individual level for services, outcome reporting will predominately occur on an aggregate/anonymised basis.
- Providers will be required to submit case studies in line with consent agreements
- We would like to explore sharing of data to inform tracking of risk and outcomes in line with GDPR

Answering questions

Are services open to those young people from other boroughs who attend schools in Greenwich?

- Services will be open to young people from other boroughs who attend schools in Greenwich.
- As part of the output reporting, we will be monitoring services through take up by Greenwich residents.
- The integrated Health Visiting and Children Centre service is resident based. Non-residents may access CCs, but the contract will monitor registration and participation rates on the basis of Greenwich postcode, as is currently the case.

Is money being taken out of school health services to fund the new pathway?

 No, we are allocating more money from the overall budget into school aged services and the adolescent pathway

How long will the contract be for?

We cannot confirm that at the current time, but we are considering 5 years +2
+2. We continue to welcome feedback on contract length.

Schedule for the rest of the day

Break now and networking opportunity

The rest of the morning

- Outline engagement process and themed sessions
- Start Well Greenwich website and portal
- Facilitated table discussions

Break for 20 minutes





Engagement sessions

- 30th Jan 12.30-4pm
- 6th Feb 9.30-lpm
- 18th Feb 12.30-4pm
- 25th Feb 12.30-4pm
- 26th Feb 12.30-4pm

- Schools and the Service Model
- Technology, Innovation and
- **Outcomes**
- Early Years and Integration
- School-aged years and Integration
- Adolescent Services

Start Well Greenwich webpage

- The Royal Borough of Greenwich has just launched a new webpage where interested parties and members of the public can find out more on Start Well Greenwich, including our vision, plans, engagement events and the procurement timetable. You can also download the presentations about the proposals.
- Organisations interested in bidding to deliver the Start Well Greenwich 2020 services will need to register on the Royal Borough of Greenwich e-tendering site to ensure that they receive all future communications regarding the engagement and tendering process;

Start Well Greenwich webpage

 https://www.royalgreenwich.gov.uk/info/200234/children_young_people_ and_families/2092/developing_future_health_and_wellbeing_services_for_ children_and_young_people

Where to send your questions and comments

Feedback to Joint Commissioning Team email:

childrens-commissioning@royalgreenwich.gov.uk

Ideas for innovative services and models
Ideas for how to measure the success of the service

Ideas of effective use of digital platforms

Ideas on integrated models of service delivery

We will post our responses to questions at: https://royalgreenwich.proactishosting.com/ (You will need to register or login)



Facilitated Table discussions

- Each Table has a Facilitator and Scribe
- Questions on each of your tables to discuss
- Your views and ideas will inform development of the specification and tender along with further feedback from engagement sessions, children and young people and their families
- We're capturing your questions
- Don't worry No volunteers to feedback

Table discussion - questions

We want providers to collaborate in relation to KPIs, outputs, outcomes.

- How can this be achieved and what kind of arrangements do we need to consider?
- Contractually how can this work?
- What are the challenges and how can these be overcome?

Service Model

- What does an integrated CC and HV service look like?
- What does an integrated SN and UY service look like?
- What IT considerations and solutions can we think of to support the delivery of an integrated service?

Table discussion - questions

Digital and Partnerships

How can providers deliver digital solutions to service users as part of an integrated service offer?

Staffing

What staffing implications do we need to consider in respect of an integrated team? E.g. administration, specialisms etc.

Outcomes

What outcomes should we focus on in measuring the impact that these services make?