

Proposed Key Decision to be taken by the Deputy Leader on or after Friday 24 October 2014

Grant Funding to Expand the Family Nurse Partnership Service in Preparation for the Transfer of Commissioning Responsibility for 0-5s from NHS England to Warwickshire County Council

Recommendations

That the Deputy Leader:

1. authorises the allocation of £750,000 from the Council's Public Health budget to increase the capacity and availability of the Family Nurse Partnership service to more eligible women and families in Warwickshire;
2. delegates authority to the Strategic Director of Communities to enter into a grant agreement with NHS England on terms and conditions acceptable to the Strategic Director of Resources.

Introduction

1. From 1st October 2015, the Government intends that Local Authorities (LAs) take over responsibility from NHS England for commissioning Public Health services for children aged 0-5. This includes Health Visiting and Family Nurse Partnership (FNP) - targeted services for teenage mothers
2. The Family Nurse Partnership is a voluntary home visiting programme for first time mums and dads, aged 19 or under. A specially trained family nurse visits the young mum regularly, from early in pregnancy until the child is two. The FNP is delivered in accordance to a license and aims to enable young mums to:
 - Have a healthy pregnancy
 - Improve their child's health and development
 - Plan their own futures and achieve their aspirations.
3. The FNP programme is underpinned by an internationally recognised robust evidence base, which shows it can improve health, social and educational outcomes in the short, medium and long term, while also providing cost benefits.

4. Young mothers and their children are a vulnerable group. Early parenthood is associated with poor health outcomes and an increased risk of social exclusion. Having children at an early age can limit the education, career and economic prospects of young women. Although young people can be competent parents, there is evidence that children born to teenagers are more likely to experience a range of negative outcomes in later life, and are more likely to become a teenage parent themselves.
5. Serious case reviews undertaken in England have identified teenage parents as being vulnerable families who may need additional support to help them achieve positive futures for themselves and their children.
6. A paper outlining the proposed expansion of FNP was approved by WCCs Corporate Board on 17th September 2014.

Proposed Funding to Expand the FNP Service

7. The FNP team in Warwickshire is employed by South Warwickshire Foundation Trust (SWFT) and consists of 1 Nurse Supervisor and 7.4wte trained Family Nurses. Each nurse has a case load of up to 25 families. The FNP license requires that each Nurse Supervisor has 8 or less Family Nurses.
8. The FNP service is currently provided by South Warwickshire Foundation Trust (SWFT) under a contract commissioned by NHS England. As noted above, this commissioning responsibility will transfer from NHS England to Warwickshire County Council on 1st October 2015.
9. The FNP programme is overseen locally by an FNP Board and inspected annually by the National FNP team. The latest annual review was completed in March 2014 and an improvement plan has been agreed to further develop the service. The review concluded that despite local challenges around the lack of sustainability of the service relating to the small staffing numbers, the programme had developed well and was meeting expected standards. The service has a particular strength around client involvement with young parents involved in meetings and in interviewing of new staff.
10. The Council's Public Health service is proposing to increase investment in FNP using the Council's Public Health budget in preparation for the transition of commissioning responsibilities. The proposed investment will enable the service to be more sustainable and will increase the number of families that can benefit, bringing about the additional benefits of early intervention. It is proposed that £750,000 is invested in the programme during the period November 2014 and March 2016 to significantly increase the capacity of the service.

11. The additional investment will cover recruitment, training, license fees, implementation and the salary costs of 1 Nurse Supervisor and 5 Family Nurses who would be trained and in post with developing caseloads by October 2015 and an additional expansion of 1 further Nurse Supervisor and 5 additional Family Nurses between November 2015 and March 2016.
12. With proposed investment, a workforce of 3 Nurse Supervisors and 17.4wte Family Nurses would provide a capacity to support between 415 and 450 families (Nurse Supervisors carry a small caseload of approximately 5 families). If demand increases, each supervisor is able to supervise up to 8 Family Nurses, potentially increasing capacity to between 567 and 615 families. Each family will be supported through pregnancy until their child is aged 2 meaning that caseloads will be mixed for each nurse.
13. For the period until commissioning responsibility transfers to WCC, it is proposed that funding is provided on a grant basis to NHS England to enable them to commission the expansion of the service through SWFT.
14. Public Health will set the terms, conditions and required deliverables of the grant funding and will input to the service specification with the current service provider to ensure that the additional capacity is initially targeted at areas of highest need with the aim to offer the service to all eligible families in Warwickshire.

Alignment with WCC Objectives

15. The FNP programme fits with the purpose and aims of WCCs One Organisational Plan through providing targeted support to vulnerable mothers, fathers and children. The early intervention approach enables families to remain independent for longer and the intervention they receive improves the health and wellbeing of family and supports the mother to access training, develop skills and find employment.
16. The FNP programme fits with the aims of WCCs Better Care Fund submission, particularly work stream 2 by improving community resilience through supporting a vulnerable group to “feel good and function well”.
17. The FNP programme meets the priorities outlined in the draft Health and Wellbeing Strategy and the local Children’s Plan.
18. There is support for the FNP within the various partnerships in Warwickshire, for example, the Respect Yourself Programme, the Children’s Centre Advisory Board and the Priority Families Steering Group.

Outcomes and Deliverables

19. Warwickshire County Council will set out a number of required deliverables under the terms of the grant funding to NHS England. Deliverables will include:

Phase 1 expansion: 1 x Supervisor, 5 x practitioners	
November 2014 – March 2015	<ul style="list-style-type: none"> Recruitment of Nurse Supervisor by November 2014 Nurse Supervisor to complete training – November 2014 Nurse Supervisor to take on supervision role of 2 wte Family Nurses Nurse Supervisor to take on small caseload (2-3 families)
January 2015 - March 2015	<ul style="list-style-type: none"> Recruitment of 5 Family Nurses by January 2015 Family Nurses to complete training – February 2015 Family Nurses to begin to build caseload (at least 1 family by March 2015) Nurse Supervisor to take on supervision role of additional 4 wte Family Nurses
April 2015 – October 2015	<ul style="list-style-type: none"> Build caseloads of Family Nurses to at least 15 families per family nurse (pro rata) Report on performance against Fidelity Goals in line with license requirements

20. Following move of commissioning arrangements to WCC, the second phase of expansion will require the following deliverables:

Phase 2 expansion: 1 x Supervisor, 5 x practitioners	
Nov 2015 - March 2016	<ul style="list-style-type: none"> Development of caseloads of Family Nurses recruited in February 2015 to full caseload. Recruitment and training of additional Nurse supervisor and between 5 – 11 additional family nurses (dependant on need) Establishment of caseloads for Family Nurses recruited as part of Phase 2 expansion. Review the impact of the service expansion.

Financial Arrangements

21. The expansion will be funded using £750,000 from the 2014/15 Public Health budget to pump prime the programme. Funds will be drawn down by NHS England as capacity expands, until transfer of commissioning responsibilities mid-year (October 2015). The remaining funds will be held in reserve until the programme reaches the fully expanded position. The amount transferred to NHS England is expected to be £347,323 however this may vary depending on pace of delivery. Any variance to the expected amount will be made in liaison with Legal, Finance and Procurement teams. Public Health is working with the current commissioner (PHE), the National FNP team and the current provider to agree final details.

22. After the FNP programme reaches full expansion, the service will be funded by the allocation transferred as part of the national transfer of Health Visiting and FNP services in October 2015 and through the prioritisation of resources from within the Public Health Business Unit's budget allocation.

Proposed Next Steps

23. WCC's Finance, Legal and Procurement teams have supported the costing and arrangements for the proposed funding.

24. Following approval, the proposal will be developed under a grant basis with associated finance and deliverables to enable implementation within the short timescales available.

Background Papers

None

Supporting Papers

Health Visiting and Family Nurse Partnership, Corporate Board, 17th September 2014

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