

DRAFT CYP LTP RESPONSE

We have been working together to consider what the requirements set out in the NHS Long Term Plan mean for our residents, staff and health and care partner organisations across north central London (NCL). We have a collective commitment to deliver changes that will improve the health and wellbeing of residents and have listened to what residents told us is important to them.

We have developed a draft NCL delivery plan for a strong start in life for children and young people and are now seeking the engagement and involvement of all local partners, stakeholder and residents to refine and finesse these plans. Over the next two months, we will cross-reference, financially cost and finalise our plan for submission in November.

If you have any comments, queries or think we have missed important points relating to any of the sections please get in touch with Sam Rostom (sam.rostom@nhs.net).

CYP Contextual Narrative

North Central London recognise that working collectively and together as a system is imperative in delivering improved care for children and young people. Children, young people and their families will often be known by a range of agencies and services, from preconception into young adulthood and it is **their** needs that connect our organisations together as a system and we will continue to work to develop strong and sustainable system responses to meet the needs of this population.

The population of North Central London has great diversity of ethnicity, culture and socio-economic status. This presents a richness as well as a range of vulnerabilities and differing needs, which will mean that tailored solutions will need to be identified, designed and delivered to support improved outcomes. Our approach is rooted in an understanding of the wider determinants of health for this population, so that we continue to work across all parts of the health and care system and recognising that each part plays an integral role in reducing health inequalities for children, young people and their families.

Description of how local leadership has been established: named clinical and management leaders:

The Children & Young People's Programme Board in North Central London has been established since November 2016, to work in partnership to design, develop and deliver improvements in health and care for children and young people. In 2018 the programme board recognised the need to enhance system leadership and revised its terms of reference and membership to better reflect the whole health and care system. This ensured appropriate local leadership representation from each of the boroughs within the STP footprint from a range of organisations working with children and families to deliver better outcomes.

The CYP Programme board has strong clinical and managerial leadership, which has significantly benefitted the programme and enabled a clear ambition and vision as well as robust leadership and accountability.

The Senior Responsible Owner for the programme is Charlotte Pomery, Assistant Director of Commissioning from Haringey Council, the clinical lead is Dr Oliver Anglin from Camden CCG and the Programme Director is Sam Rostom. The board also includes representation from a range of partners from across the system and we have ambitions to include representation from young people and parents.

Current membership includes:

- Local Authority
- Public Health
- Education
- Early Years
- Secondary Care
- Primary Care
- Pharmacy
- Tertiary Care
- Community Health
- Commissioning
- Safeguarding

Individual boroughs have also established system-wide leadership forums to support and deliver the improvement agenda within their local footprint and sensitive to local context. These also include a wide range of stakeholders from across the system to focus on delivery of improved outcomes for this population. These systems will continue to be developed and refined as part of the broader integration agenda, ensuring that the needs of children and young people are fully embedded across all areas of improvement.

...co-production with children, young people, families and carers

The Children and Young People's programme board is committed to ensuring the views and experiences of children and their families are central in the design and delivery of transformation and improvement. The board has overseen work involving children, young people and families and carers, including recent workshops with young people at Arsenal Football club on their experiences and views of health and care, as well as local parent and carer forums, which informed the development of our whole-system asthma plan and will continue to inform its delivery.

Local borough systems also clearly value the views and experiences of children and families, already utilising resident and patient forums and surveys to engage and inform local transformation and improvement plans across a number of areas, for example, SEND. Dedicated engagement and participation roles in each borough support this work, for example, in Islington, a dedicated participation officer supports young people in sharing their views and in Camden a commissioning engagement officer enables the population to inform local decision-making.

Across Enfield and Haringey local systems, an innovative model of parent education has been co-designed with parents 'ABC Parents' which bring parents with babies and young children together in facilitated sessions to support an increase in health knowledge and confidence and build a peer support network. This work has been welcomed by parents and we will work with parents to understand how this work could be further built upon.

In addition, across the next year we also have plans to utilise experience based design methodologies, to really listen to and understand our patients experiences, including a focus on addressing the wider determinants of health by reducing health inequalities for the most vulnerable, enabling us to co-design a strong and sustainable offer together, centred around family health education which will both empower and enable families to support themselves where most appropriate.

Bringing together local leaders from across the NHS, local government, education and other partners to design and deliver transformation for the system:

The Children and Young People's Programme Board has some strong examples of bringing together local leaders from across the system to design and deliver transformation. Over the last 12 months, a range of whole-system workshops have been facilitated to collaboratively review and understand areas for improvement, share data and intelligence, develop a shared vision and agree collective priorities. Most recently this has been evidenced across paediatric urgent and emergency care and also in the area of asthma.

In addition, North Central London has established its own Asthma Network which models a whole-system approach to asthma and includes members from local authority (children's social care, early help, housing, air quality) as well as schools, early years, public health and tertiary, secondary, primary and community health services and a parent representative. The network is responsible for the design and delivery of the whole-system integrated paediatric asthma plan, which has itself been recognised as a best practice example of integrated partnership working. As part of that work, wider system leaders have also supported

the work at a strategic level via Health and Wellbeing boards, all of whom have endorsed the approach and plan and provided the system mandate required to deliver transformation across the system.

Locally, individual boroughs have also established system-wide leadership forums to support and deliver the improvement agenda within their local footprint. These also include a wide range of stakeholders from across the system, including NHS, local government and education, working in partnership to align strategic priorities which deliver better outcomes for this population.

Improvement plans for performance of childhood screening and immunisation programmes

All boroughs in north central London are working in partnership with NHSE, towards improving immunisation rates in line with NHS England's immunisation strategic objectives (inc. implementation of the London MMR action plan), ensuring that uptake is maximised and there are systems in place to identify opportunities to more effectively target uptake.

Local borough CCGs also have quality improvement initiatives in place for school vision and hearing screening which will also result in more accurate screening and corresponds to current national standards.

The national screening & immunisation programmes are universally NHSE-led and therefore NCL will continue to actively support and contribute to NHSE plans, understand any gaps using benchmarked data and how best to effectively target our population to close gaps.

And meet the base level standard in the NHS public health functions agreements.

Public health teams in local authorities are responsible for the delivery of 5 mandated checks by the commissioned health visiting services and the National Child Measurement Programme (NCMP) by the commissioned school nursing services. These teams of public health nurses are an important workforce contributing to improved outcomes for children and young people through the provision of universal services focussed on prevention and early intervention. At a strategic and planning level local authorities' co-ordinate delivery of the national Healthy Child Programme (0-5 year old and 5-19 year old). These two evidence-based public health programmes require partnership working particularly with children's centres and other early years providers, schools and the voluntary sector and focus prevention and early intervention. All boroughs have partnership working arrangements in place to identify local priorities, improve service delivery by all partners and improve care pathways for children and families.

Health visiting and school nursing services across NCL follow the national specifications produced by Public Health England, although in recognising the different levels of financial constraint, pragmatically there is a need for local interpretation and variance as to provider models based on local need and resources. The challenges across NCL are financial relating to the competing priorities for the public health grant and the workforce (local providers ability to recruit and retain staff). Local service providers work in partnership with the local authority children's services, early years, schools, primary care and secondary care. The services work closely with general practice and there is the opportunity for the services to work with the emerging primary care networks at a larger population footprint.

Public health local priorities across North Central London include; obesity, smoking, emotional health and wellbeing, oral health and sexual health, immunisation uptake and school readiness. The rationale for focussing on these priorities is the Public Health Outcomes Framework and local needs identified through borough based Joint Strategic Needs Assessments.

Additional challenges across NCL relate to the resident population and the challenge to service delivery that this presents. Population challenges include significant population mobility, deprivation, ethnically and culturally diverse, increasing levels of need and increasing population.

Developing age-appropriate integrated care

We recognise that developing age-appropriate models of integrated care for children and young people will be an important part of our transformation journey in North Central London and understand that the needs of children, young people from birth to adulthood will differ, meaning the way in which we support this population will need to reflect this. To support this work, we will be moving towards 0-25 models of care in areas where it makes sense to do so, recognising the complexities for this population and building on established models that can be learned from, including across SEND.

There are already some good examples of age-appropriate integrated care across north central London which will be further built upon across the next few years. These include:

- Enfield are developing an integrated model of care for community paediatricians and therapies
- Islington has established integrated early years offer is delivered through children's centres and has joined up some elements of acute and community health as part of the Hospital @ Home service. In addition, the Islington Asthma Friendly School Programme has created strong cross-sector relationships leading to the provision of more patient centred care closer to home and forming the foundations of a more integrated system
- Barnet CCG is working with the Royal Free London to create integrated clinics between secondary and primary care
- Camden has developed its own integrated paediatric service which draws paediatric expertise into the community. In addition Camden's Integrated Children's Service is a formal partnership between the local authority and four health providers to provide services for children and young people with complex and additional needs
- Haringey has plans to work across health, education and social care to develop an integrated strategy and commissioning model for all-age autism

In addition, the 2-2 ½ year old integrated review which takes place across NCL and is an opportunity for parents to discuss their child's development with a health professional and/or early years setting provider which is a key opportunity to ensure children are on track to be 'school ready' at 4 years of age.

Across North Central London our whole-system paediatric asthma plan is also an example of our strategic approach to integrated care for this population.

By 2021, we will develop paediatric networks of care in a way that makes sense for young people and families and builds on the learning and emerging opportunities from primary care networks. This will enable more effective oversight and management of children's health in the community, enhancing the skills of primary care for paediatrics and utilising a population health approach to support the delivery of integrated care for children and young people in North Central London, which will also reflect an understanding of the wider determinants of health for this population.

Integrating physical and mental health services enabling joint working between primary, community and acute services

Being drafted in conjunction with Mental Health leads through September 2019

Improving care for children with long-term conditions

There is a significant focus across NCL on improving outcomes for children with long term conditions, which will be further supported via the population health analytics tool HealthIntent. A range of health registries will enable a more proactive offer of care for these populations to improve clinical outcomes and we are currently developing a paediatric asthma registry for this particular population, with further registries being considered with the potential to develop a specific registry for children and young people with long term conditions.

A key part of this work is greater recognition of the importance of transition in ensuring effective continuing care for children with long term conditions. Clinical teams across the STP are increasingly embedding arrangements to make transition points as safe as possible for children and young people and their families and carers and promote a more positive experience of transfer of care.

Such as asthma;

In the STP, paediatric asthma is a key priority for the children and young people programme due to the relative high levels of respiratory related attendance and admissions, the subsequent morbidity and mortality risks for children and young people and the recognition as a system that these instances are largely avoidable. We have worked together as a partnership over the last year to develop an integrated whole-system asthma plan which has been endorsed by senior system leaders across the footprint via Health and Wellbeing boards.

As part of this approach, a shared vision alongside common strategic outcomes and objectives have been developed and agreed at an NCL level whilst we have recognised that local systems are best placed to understand the needs of their population. To reflect this, the approach to developing the plan has been based on local borough-based workshops to map, design and develop the asthma plan. This process, which has been replicated across all five NCL boroughs, has in itself been incredibly helpful for local systems, enabling a greater understanding of the relationships across the local system and has generated further insight into how organisations can work more effectively together to drive improvement.

A strategic workplan is now in place and being delivered by the NCL Paediatric Asthma Network and this includes; development of a whole-system asthma dashboard to monitor our progress in delivering better outcomes, an asthma education toolkit for non-health professionals (i.e. housing and early help workers), a shared focus on continuous improvement and learning together, an NCL-wide pathway, a consistent asthma management plan format, as well as well as delivery an NCL-wide campaign and conference annually.

Locally, a significant amount of work is already underway to improve the outcomes of children with asthma, including the roll-out of asthma friendly schools, asthma self-management programmes, delivery of asthma group consultations, 48 hour review triage and enhanced community asthma services, as well as hosting an annual asthma conference, amongst a host of other activities and initiatives. We have plans to further build on this work across the next year, delivering our ambition for children and young people with asthma in north central London.

Complex needs;

The children and young people programme is also focussed on improving outcomes for children with complex needs across a wide partnership and current work looks to enhance the care and support for children with complex and challenging behaviours. We are working across NCL to develop an offer of care which flexibly includes respite and crisis beds locally and reduces the need for residential placements outside the footprint, enabling families to remain in their communities and close to their support networks.

In addition, there is a focussed piece of work to improve the outcomes for long-term ventilated children, working in conjunction with pan-London critical care networks to reduce delayed transfers of care and provide a more consistent offer for these children and their families across North Central London. This also

includes specific work with partners in housing and children's social care to identify solutions that we can develop in partnership in order to support better outcomes for this vulnerable population.

Diabetes

Children and young people with diabetes and their families want a high quality, responsive out-of-hospital diabetes service that supports them in optimal care. Our vision across North Central London is centred upon a model of care which will deliver personalised patient specific pathways, increased clinic capacity and development of a value based healthcare platform in partnership focusing on measured outcomes that matter to patients and their families. We will continue developing further integration between health and diabetes education to optimise health, wellbeing and transition outcomes and include the learning from the recognised UCLH family-based intervention The Getting Ready for Transition (GReaT) group, which aims to increase confidence and reduce the concerns of children and parents¹.

Epilepsy

There is also a focus on children with epilepsy in North Central London, with links to the North Thames Paediatric Epilepsy Network (NTPEN), a clinical network of paediatric neurologists, paediatricians and other health professionals who have a responsibility for providing comprehensive care for children and young people with epilepsy in the region². We have clear ambitions for children and young people with epilepsy and are developing our vision for integrating clinical teams across both the community and the hospital. We will continue to work towards:

- Children and young people with epilepsy and their families being involved in the development of their local epilepsy services
- Children and Young People with suspected epilepsy being seen by a paediatrician with epilepsy expertise within two weeks
- Support children and young people with epilepsy to access the full range of educational and recreational activities.
- Enabled prompt access to psychology, psychiatry or psychotherapy input in a timely manner and through coordinated care with their health providers.
- Develop clear transition pathways to adult care to enable seamless transfer of care into adulthood

Preventing, treating and managing childhood obesity;

Strategically all boroughs are working across local partnerships to prevent, treat and manage childhood obesity, recognising that it is a system issue which cannot be addressed in isolation. Examples include;

- Haringey's Obesity Alliance leading a systems-wide approach to support people to maintain a healthy weight; promoting healthier choices in community settings and creating healthy weight workplaces.
- The 'School Superzone' project, led by local authority public health teams, to focus on specific areas based upon schools estates, where the lived environment could better support health behaviours in children and their families (i.e. healthy foods, environmental harms).
- Haringey has reviewed and revised its obesity pathway and developed extensive guidelines for all frontline practitioners. A training and education programme is underway across primary care, community health services, secondary care and the voluntary sector.

¹ Source: Quality in Care awards;

http://www.qualityincare.org/diabetes/awards/results/qic_diabetes_2018_results/type_1_specialist_service_children_young_people_and_emerging_adults

² Source: <https://www.gosh.nhs.uk/medical-information/clinical-specialties/north-thames-paediatric-epilepsy-network-information-health-professionals>

- Barnet is introducing a 0-19 healthy weight pathway
- Haringey, Islington and Enfield's adoption of the Local Government Declaration and launched Sugar Smart with key partners.
- Enfield Council are focusing on a system wide approach using Health in All Policies to address obesity (including childhood obesity), supported by a commitment within a new HWB Strategy as well as within Enfield's Obesity Strategy.
- All boroughs across NCL are working to improve the wellbeing of very young children and their families. Each borough works with Midwifery, Health Visiting, Early Years and other partners to increase the numbers of children who experience a healthy start to life. Part of this work is to embed healthy behaviours including breastfeeding, healthy nutrition and physical activity.
- Increasing numbers of schools increasing physical activity by adopting the 'daily mile' initiative.

In addition, good partnership working with schools and early years across North Central London has enabled the development of other initiatives which supports healthy weight in children and young people. This includes Healthy Schools and the Healthy Early Years London programme, both are accreditation schemes that support schools and early year's settings to achieve specific standards to improve health outcomes including healthy weight.

However, there is a challenge in the ability to deliver prevention 'at scale' to improve population health. Expenditure and investment varies across North Central London due to available resources and competing demands, which make designing and developing a consistent and equitable offer of support very challenging.

Improving outcomes for children and young people with cancer.

The Children and Young People's Cancer Network covering NCL is led by the Principal Treatment Centre, hosted by UCLH (teenage and young adults) and GOSH (children). The key challenge for the network in the coming years is the full implementation of a new specification for paediatric shared care units, where children and young people receive treatment and support closer to home, outside the principal treatment centre. A new specification is currently out for consultation, expected to be finalised in autumn 2019 that will set quality standards that all shared care units must meet. It will be implemented in the following year.

More children and young people will be supported to take part in clinical trials, so that participation among children remains high, and the NHS is on track to ensure participation among teenagers and young adults rises to 50% by 2025.

From 2019, whole genome sequencing will begin to be offered to all children with cancer. The Genomic Laboratory Hub at GOSH working with the cancer alliance will ensure local strategies are in place to provide all eligible patients with access to appropriate cancer genomic testing. From 2020/21, more extensive genomic testing should be offered to patients who are newly diagnosed with cancers.