

Local Authority Self-Assessment: 0-5 Public Health Commissioning Transfer

National report

April 2015



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Summary

This research report provides analysis of the aggregated data from English single and upper tier councils' self-assessment of their progress in preparing to receive 0-5 public health commissioning responsibilities from NHS England. These responsibilities transfer to local government on 1st October 2015. This marks the final part of the public health transfer which saw wider responsibilities successfully transfer to local government in 2013.

For each council an online self-assessment was completed by the local transition lead or on behalf of the director of children's services (DCS), director of public health (DPH) or a combination of the two to reflect the different arrangements for lead responsibility locally. A response was received from every council.

The purpose of the self-assessment was to develop a collective picture of progress across the country in a way that is useful both nationally and locally. The results highlight outstanding barriers that require national resolution, map progress and identify support needs and opportunities for shared learning. The self-assessment was designed to be as simple and proportionate as possible, recognising the key areas of work that local areas need to develop plans to oversee the transfer and implement changes.

To support councils, nine Regional Oversight Groups (ROGs) were set up to support the transfer locally and provide oversight. The groups are led by local government leads for the region and include representation from local authorities, NHS England and Public Health England local teams and the LGA. The ROGs played a key role in the self-assessment exercise by agreeing an overall assessment of their region, helping to facilitate local discussions and match support needs locally and escalate issues to national partners. Further commentary from the ROGs can be found in the regional reports found in the annex of this report.

For more information about the transfer of 0-5 years public health commissioning responsibilities to local government, please visit <http://www.local.gov.uk/childrens-public-health-transfer>.

Key messages

- The self-assessment received a 100 per cent completion rate, which is indicative of the high levels of attention local authorities are giving to the transfer.
- The findings showed that local authorities have a high level of confidence in a number of key areas and are engaging and working well with their partners. For example:
 - There is strong joint working between local authorities, NHS England teams and providers to plan and deliver a safe and stable transfer;
 - Robust arrangements are in place for managing and delivering the transition and the majority of local authorities are confident that functions will be fully operational from 1st October;
 - There is strong corroboration between the local authority plans to transfer contracts and the NHS England Sender Board assurance

process for contract tracking. The vast majority of local authorities have been involved in influencing discussions around future commissioning intentions;

- There are high levels of confidence that existing contract(s) include the five mandated universal checks and the related children's 0-5 years public health outcomes.
- The results also highlighted a number of key areas where common issues are being experienced across the regions. These are:
 - Data collection, reporting arrangements and concerns about the quality of data;
 - Child Health Information Services (CHIS). Whilst the majority of councils are confident that CHIS is being improved (70%) and will achieve compliance (61%), regional feedback suggested that there is a need for greater clarity about work to improve CHIS, as councils reported low confidence in quality of CHIS data.
 - Concerns about the move from commissioning from a registered to a resident population and the implications this has on cross charging for resident populations that are registered out of area.
- Where issues were identified in specific localities, local authorities are working with their partners in NHS England, supported by PHE to resolve issues. The Regional Oversight Groups are helping to facilitate these discussions where it is needed. The open text comments indicate that some areas are developing regional solutions and are using existing networks to discuss the transfer and deliver sector led support locally.
- The LGA has raised the issues which were identified as outstanding (see above), to the Department of Health and to the 0-5 Transfer Programme Board where national partners are working to address these issues.
- The LGA is following up with the few councils who expressed low confidence levels to offer support, and is working with NHS England and Public Health England to address outstanding issues. It is working with partners to develop support tools to assist councils with the transfer and to represent local government's views at the national 0-5 Programme Board.

Summary of results

Over the past several months NHS England as current commissioners, local authorities as future commissioners and children's 0-5 years public health service providers have been working together to deliver a safe transfer.

- Almost all councils (97 per cent / 145 councils) said they were very or fairly confident that commissioning arrangements for the 0-5 Healthy Child Programme would be fully operational in their council from 1 October 2015. Almost all councils (96 per cent / 143 councils) were either very or fairly confident that the arrangements for managing the transition in their locality were clear and achievable.

- Ninety-nine per cent (147 councils) were working to a great or moderate extent with NHS England
- Ninety seven per cent (145 councils) were working to a great or moderate extent with their providers.
- Eighty five per cent (126 councils) said NHS England and eighty one per cent (121 councils) said providers were working with them to a great or moderate extent to produce and share legacy and handover documents.
- Almost all councils (97 per cent / 145 councils) said they were fairly or very confident that the provider(s) from which they will commission 0-5 public health services will be able to discharge their functions to safeguard and promote the welfare of children.
- Nine councils in 10 (89 per cent / 133 councils) did not have a **funding** agreement in place with their neighbouring council(s) covering their resident population who are registered out of area.
- Also, around nine out of 10 councils did not have a **performance monitoring** agreement in place with their neighbouring council(s) covering their resident population who are registered out of area.
- All but two councils (99 per cent / 147 councils) said they were very or fairly confident that appropriate governance arrangements were in place to oversee the transition of 0-5 public health arrangements.
- Just over half of councils (52 per cent / 77 councils) reported that their health and wellbeing board had discussed the transfer.
- Ninety five per cent (141 councils) said, to a great or moderate extent, that their council had worked with NHS England, as part of commissioning discussions, to agree commissioning intentions for existing contract(s) that were transferring over to their council.
- Around two-thirds (65 per cent / 96 councils) said they would novate contracts from NHS England to their council to ensure there is a mechanism in place for the safe transfer of contracts. Thirty per cent (44 councils) instead put in place two similar but separate six month contract(s) with the provider.
- Half (74 councils) said that they had NHS England contracts that ran beyond 30 September 2015. Only one of these councils indicated that they did not intend to accept novation of these contracts from NHS England to local authority control with effect from 1 October 2015.
- Just over half (55 per cent / 82 councils) said they had put plans in place for minimum standardised data collection and just over half (54 per cent / 80 councils) said they had put plans in place for minimum standardised reporting requirements.
- Seven out of 10 respondents (104 councils) were either very or fairly confident that provider(s) were taking steps to improve their local management of child health information, making use of Child Health Information Systems (CHIS) and other IT systems where appropriate.

- Sixty per cent (91 councils) were either very or fairly confident that provider(s) were taking steps to achieve compliance with the national Maternity and Children's Dataset to ensure data is able to flow in the longer term.
- Most councils (95 per cent / 142 councils) said they were either very or fairly confident that existing contract(s) included the five mandated universal checks and the related children's 0-5 years public health outcomes.
- Eighty five per cent of respondents (127 councils) were either very or fairly confident that baseline data about their resident population for the five mandated universal checks was being shared with them prior to 1 October 2015, against which council performance could be measured in the future.
- All but two respondents (99 per cent / 147 councils) indicated that the information they received about the transfer was either very or fairly useful.

Introduction

On 1 October 2015 commissioning responsibilities for the Healthy Child Programme for 0-5 year olds, which includes the health visiting service and the Family Nurse Partnership, will transfer from NHS England to local authorities (responsibilities will exclude the Child Health Information System and the six to eight week GP check which will remain with NHS England). This marks the final part of the overall public health transfer.

Over the past year NHS England as current commissioners, local authorities as future commissioners and children's 0-5 years public health service providers have been working together to deliver a safe transfer.

In order to assess local progress with this transfer, during March and April 2015 the LGA sent an online self-assessment form to the director of public health (DPH) and the director of children's services (DCS) in each single and upper tier council in England. Each council – or group of councils – completed the self-assessment. This report summarises the findings based on the aggregated data for England. In addition, a sub-report for each of the regions can be found in the annex of this report.

For more information about the transfer of 0-5 years public health commissioning responsibilities to local government, please visit <http://www.local.gov.uk/childrens-public-health-transfer>.

Methodology

The self-assessment exercise was conducted as a survey by the LGA's Research and Information team using an online form. An email containing a self-assessment form was sent to both the DPH and the DCS in each of the 152 single and upper tier councils in England to reflect the different lead responsibility arrangements for this work locally. Directors were asked to work together to complete and return a single response per council. It included a link to the LGA's dedicated webpages on the transfer to signpost councils to further resources, support tools and information.

The survey was available to complete online between 23 March and 20 April 2015.

A small number of councils submitted a joint response because in some local authorities, the DPH is a joint appointment and so for the purposes of this report are treated as one council. The total number of councils in this report is therefore 149, rather than 152. The final response rate achieved was 100 per cent (149 respondents).

Local Authority Self-assessment: 0-5 Public Health Commissioning Transfer

This section of the report contains the full set of results.

Strength of transition planning

Respondents were asked how confident they were that the arrangements for managing the transition in their locality were clear and achievable. Almost all councils were either very or fairly confident that this was the case (96 per cent / 143 councils) with only three per cent (five councils) saying they were not very confident and a single respondent saying they were not at all confident. For those councils who have low confidence levels, the Regional Oversight Groups and the LGA is following up to offer support.

	Number	Per cent
Very or fairly confident	143	96
Very confident	86	58
Fairly confident	57	38
Not very confident	5	3
Not at all confident	1	1
Don't know	0	0
Total	149	100

Base (all respondents): 149

Respondents were asked to what extent they were currently working with both NHS England (formerly known as Area Teams) and their provider(s) to ensure commissioning arrangements for the 0-5 Healthy Child Programme would be fully operational in their council from 1 October 2015. All but two councils (99 per cent / 147 councils) were working to a great or moderate extent with NHS England and 97 per cent (145 councils) were working to a great or moderate extent with providers. In some areas the Regional Oversight Groups highlighted in their commentary that some local authorities had raised that the recent restructure within NHS England had impacted on the amount of support some local authorities were able to access, due to staff reductions or a change in footprint in NHS England. In the areas where this was the case access to support was being addressed locally.

	a) NHS England		b) Your provider(s)	
	Number	Per cent	Number	Per cent
To a great or moderate extent	147	99	145	97
To a great extent	114	77	114	77
To a moderate extent	33	22	31	21
To a small extent	2	1	4	3
Not at all	0	0	0	0
Don't know	0	0	0	0
Total	149	100	149	100

Base (all respondents): 149

In addition, respondents were also asked to what extent both NHS England and their provider(s) were working with them to produce and share legacy and handover documents. Eighty five per cent (126 councils) said NHS England was working with them to a great or moderate extent and 81 per cent (121 councils) said providers were working with them to a great or moderate extent.

**Table 3: To what extent are
a) NHS England and
b) your provider(s)
working with you to produce and share legacy handover documents?**

	a) NHS England		b) Your provider(s)	
	Number	Per cent	Number	Per cent
To a great or moderate extent	126	85	121	81
To a great extent	66	44	59	40
To a moderate extent	60	40	62	42
To a small extent	17	11	19	13
Not at all	5	3	6	4
Don't know	1	1	3	2
Total	149	100	149	100

Base (all respondents in): 149

Almost all councils (97 per cent / 145 councils) said they were fairly or very confident that the provider(s) from which they will commission 0-5 public health services will be able to discharge their functions to safeguard and promote the welfare of children. Just over half (52 per cent / 77 councils) were very confident that this was the case. For those councils who demonstrated low confidence levels, the Regional Oversight Groups and local partners are providing support.

Table 4: How confident are you that the provider(s) from which you will commission 0-5 public health services will be able to discharge their functions to safeguard and promote the welfare of children?

	Number	Per cent
Very or fairly confident	145	97
Very confident	77	52
Fairly confident	68	46
Not very confident	2	1
Not at all confident	1	1
Don't know	1	1
Total	149	100

Base (all respondents): 149

Respondents were asked how confident they were that their council has all the named individuals with responsibility for safeguarding children, including designated professionals and senior leads in place at Local Safeguarding Children Board level. Nine out of 10 councils (88 per cent / 131 councils) were very confident that they had the relevant individuals in place, and the remaining 12 per cent (18 councils) were fairly confident.

Table 5: How confident are you that your council has all the named individuals with responsibility for safeguarding children, including designated professionals and senior leads in place at Local Safeguarding Children Board level?

	Number	Per cent
Very or fairly confident	149	100
Very confident	131	88
Fairly confident	18	12
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	149	100

Base (all respondents): 149

Nine councils in 10 (89 per cent / 133 councils) did not have a **funding** agreement in place with their neighbouring council(s) covering their resident population who are registered out of area. However, around a third of all councils (34 per cent / 50 councils) said that this was in progress. Analysis of the open text data shows that issues around the move from commissioning for a registered to a resident population, and the implications this has on cross charging for resident populations that are registered out of area, was a key concern of a number of councils. Many regions are mapping the issue to identify the number of children who are registered out of area and are developing solutions. However, it was strongly felt that attention from national partners is needed. In response to this NHS England and Public Health England are undertaking further work to identify the extent of the problem to inform next steps.

Table 6: Do you have a funding agreement in place with your neighbouring authority(ies) which covers your resident population who are registered out of area?

	Number	Per cent
Yes	11	7
No – but this is in progress	50	34
No – this is not currently in progress	83	56
Don't know	5	3
Total	149	100

Base (all respondents): 149

Around nine out of 10 councils also did not have **performance monitoring** agreement in place with their neighbouring council(s) covering their resident population who are registered out of area. However, twenty nine per cent of all councils (43 councils) said this was in progress.

Table 7: Do you have a performance monitoring agreement in place with your neighbouring authority(ies) which covers your resident population who are registered out of area?

	Number	Per cent
Yes	8	5
No – but this is in progress	43	29
No – this is not currently in progress	93	62
Don't know	5	3
Total	149	100

Base (all respondents): 149

Respondents were asked how confident they were that commissioning arrangements for the 0-5 Healthy Child Programme would be fully operational in their council from 1 October 2015. Almost all councils (97 per cent / 145 councils) said they were very or fairly confident that the arrangements would be fully operational, with three-quarters (112 councils) saying they were very confident. For the small number of councils who demonstrated low confidence levels in tables 8 and 9, the Regional Oversight Groups and local partners are providing support. The commentaries provided by some Regional Oversight Groups highlighted that in some cases this was related to concerns about lack of support following the NHS England restructure; or were related to lack of capacity within the local authority; or were to do with the local context at the time of completing the self-assessment. These issues have since been addressed.

Table 8: How confident are you that commissioning arrangements for the 0-5 Healthy Child Programme will be fully operational in your council from 1st October 2015?

	Number	Per cent
Very or fairly confident	145	97
Very confident	112	75
Fairly confident	33	22
Not very confident	2	1
Not at all confident	2	1
Don't know	0	0
Total	149	100

Base (all respondents): 149

Leadership, vision and governance

Respondents were asked how confident they were that their council has appropriate governance arrangements in place to oversee the transition of 0-5 public health arrangements. All but two councils (99 per cent / 147 councils) said they were very or fairly confident that the arrangements were in place.

Table 9: How confident are you that your council has appropriate governance arrangements in place to oversee the transition?

	Number	Per cent
Very or fairly confident	147	99
Very confident	114	77
Fairly confident	33	22
Not very confident	2	1
Not at all confident	0	0
Don't know	0	0
Total	149	100

Base (all respondents): 149

Just over half of councils (52 per cent / 77 councils) reported that their health and wellbeing board (HWB) had discussed the transfer. However, a further third (34 per cent / 50 councils) said that this discussion was scheduled for a future meeting. It was highlighted by some of the Regional Oversight Groups that this could be seen as a reflection of the different approaches and models used by local health and wellbeing boards and that it did not necessarily mean that the transfer was not being discussed locally or that the HWB was not sighted.

Table 10: Has your Health and Wellbeing Board discussed the transfer?

	Number	Per cent
Yes	77	52
No – but this is scheduled for a future meeting	50	34
No – this discussion is not currently scheduled	21	14
Don't know	1	1
Total	149	100

Base (all respondents): 149

Respondents were asked to indicate which, if any, people or groups they would share their self-assessment with. Almost all councils said they would share their self-assessment with the DCS and the DPH (both 98 per cent / 146 councils). In addition, seven out of 10 said that the self-assessment would be shared with the lead member for children's services (70 per cent / 104 councils) and almost seven out of 10 said it would be shared with the portfolio holder for health (68 per cent / 102 councils).

Table 11: Please indicate which, if any, of the following people and groups you will share this self-assessment with:

	Number	Per cent
Director of public health	146	98
Director of children's services	146	98
Lead member children's services	104	70
Portfolio holder for health	102	68
Health and wellbeing board	63	42
Relevant scrutiny chair	53	36
None of the above	0	0
Don't know	0	0

Note: percentages total to more than 100 per cent, since respondents could select more than one person or group.

Contracting

NHS England and local authorities are working together to agree an approach to safely transfer existing contracts from NHS England to local authorities. Local authorities will need to have contracts in place that cover their obligations from 1st October 2015.

Respondents were asked to what extent their council had worked with NHS England (previously called Area Teams), as part of commissioning discussions, to agree commissioning intentions for existing contract(s) that were transferring over to their council. Ninety five per cent (141 councils) said that they had done so to a great or moderate extent.

Table 12: As part of commissioning discussions, to what extent has your council worked with NHS England (previously called Area Teams) to agree commissioning intentions for existing contract(s) that are transferring over to your council?

	Number	Per cent
To a great or moderate extent	141	95
To a great extent	107	72
To a moderate extent	34	23
To a small extent	8	5
Not at all	0	0
Don't know	0	0
Total	149	100

Base (all respondents): 149

NHS England has set out two options to ensure there is a mechanism in place for the safe transfer of contracts from NHS England to councils for contracts that expire at 31 March 2015. Councils could either novate contracts from NHS England to their council, or they could put in place similar but separate six month contract(s) with the provider. Around two-thirds (65 per cent / 96 councils) said they would novate contracts.

Table 13: Which of the following has your council opted to do?		
	Number	Per cent
Novate contract(s) from NHS England to your council	96	65
Put in place two similar but separate 6 month contract(s) with the provider. (This option includes one contract for April to September 2015 between NHS England and the provider and another for October 2015 to March 2016 between the local authority and the provider)	44	30
Not applicable	8	5
Don't know	0	0
Total	148	100

Base (all respondents): 148¹

Respondents were asked if any of the NHS England contracts that required transferring to their council ran beyond 30 September 2015. Half (74 councils) said that contracts ran beyond 30 September 2015. For the councils who responded don't know, this is being followed up locally.

Table 14: Do any of the NHS England contracts that require transferring to your council run beyond 30 September 2015?		
	Number	Per cent
Yes	74	50
No	70	47
Don't know	4	3
Total	148	100

Base: (all respondents): 148²

Of those respondents who said they had contracts that ran beyond September 2015, all but one (99 per cent / 73 councils) indicated that they intended to accept novation of these contracts from NHS England to local authority control with effect from 1 October 2015. For the one council who said they do not intend to accept novation, this is being followed up locally and support is being offered.

Table 15: Does your council intend, in principle, to accept novation of these contracts from NHS England to local authority control with effect from 1 October 2015?		
	Number	Per cent
Yes, we intend to accept novation	73	99
No, we don't intend to accept novation	1	1
Don't know	0	0
Total	74	100

Base (all respondents who had contracts that ran beyond 30 September 2015): 74

¹ One council did not respond to this question.

² One council did not respond to this question.

Respondents were asked if their council had communicated its intended approach to contract transition to the current children’s 0-5 years public health service provider(s). Ninety five per cent (141 councils) said they had done so.

Table 16: Has your council communicated its intended approach to contract transition to the current children’s 0-5 years public health service provider(s)?		
	Number	Per cent
Yes	141	95
No – but plans for this are being developed	6	4
No – plans for this have not yet been developed	2	1
Don’t know	0	0
Total	149	100

Base (all respondents): 149

Respondents were asked whether they had any other comments in relation to contracts. Around half of respondents provided an answer to this question, with many taking the opportunity to provide an explanation of the approach that they have taken locally. Amongst the small number of respondents that highlighted specific issues, there were two main themes, and these are outlined below.

Funding

A small number of respondents mentioned concerns around funding and in particular whether their allocations will cover costs. Specific issues that were mentioned within this were varied but included:

- providers being unable to cost the service, or identifying higher costs after the baseline allocation was agreed, leading to a funding gap
- a concern that the funding levels means that terms and conditions for staff will not be able to be maintained, and some questions about future funding for training from Health Education England
- concern as to whether the allocations would meet any cost pressures that may arise due to changes such as growth and turnover with moving to a resident population
- an example of a social enterprise provider that will no longer qualify for Clinical Negligence Scheme for Trusts (CNST) insurance once they are commissioned by the council and that will require more expensive private insurance, the cost of which will not be met by the council
- one council highlighted a lack of clarity and stability in relation to the funding arrangements beyond March 2016, which for them poses a significant risk to future planning and stability for their service.

Timescales

Some others had concerns around the timescales that they had been required to meet, for example:

“The NHS 2015/16 contract was very late coming out which made it hard to meet contracting and governance deadlines.” – County, East of England

“The late publication (mid-March) of the NHS Contract 2015/16 did not allow sufficient time for [the council] to complete a due diligence exercise for Option 1 (novation of NHS Contract).” – Unitary authority, West Midlands

Other

In addition, a number of very specific issues were mentioned by a range of authorities. These included, for example, issues such as varying interpretations of the guidance, difficulty in some areas engaging with NHS England following reorganisation and staff departures, complexities being caused by contracts that were being delivered across more than one council, and concern that processes are not in place to allow councils to secure service improvement once they inherit the services from 1 October 2015 and that this needs to be strengthened in the contracts.

Data, information and mandated elements

The Department of Health has mandated five universal health visitor reviews for 18 months. The regulations make it clear that there is no expectation of an uplift in performance at the point of transfer, and that councils will be expected to take a reasonably practicable approach to delivery and continuous improvement over time.

The capture of data from providers is key to establishing the current baseline performance. In some cases current data could be incomplete and may not cover the whole population. Discussions with current service provider(s) and insertion of data collection for the mandated services and wider 0-5s services into contracts will help to provide an accurate pre-transfer baseline.

Respondents were asked if their council had put plans in place for minimum standardised a) data collection and b) reporting requirements that support the effective commissioning of children's 0-5 years public health services. Just over half (55 per cent / 82 councils) said they had put plans in place for minimum standardised data collection. A further 40 per cent (60 councils) said plans were in development. Just over half (54 per cent / 80 councils) also said they had put plans in place for minimum standardised reporting requirements. A further 40 per cent (60 councils) said plans were in development.

Table 17: Has your council put plans in place for minimum standardised a) data collection and b) reporting requirements that support the effective commissioning of children's 0-5 years public health services?

	a) data collection		b) reporting requirements	
	Number	Per cent	Number	Per cent
Yes	82	55	80	54
No – but plans are in development	60	40	60	40
No – plans for this have not yet been developed	7	5	8	5
Don't know	0	0	1	1
Total	149	100	149	100

Base (all respondents): 149

Respondents were asked how confident they were that the provider(s) from which their council will commission services are taking steps to:

- a) improve their local management of child health information, making use of Child Health Information Systems (CHIS) and other IT systems where appropriate

- b) achieve compliance with the national Maternity and Children’s Dataset in order to be able to submit a standard set of data to the Health and Social Care Information Centre, from where national and local benchmarked reporting of Key Performance Indicators will flow in the longer term.

Seven out of 10 respondents (104 councils) were either very or fairly confident that the provider(s) were taking steps to improve their local management of child health information. Sixty per cent (91 councils) were either very or fairly confident that provider(s) were taking steps to achieve compliance. The results provided a mixed picture of understanding and levels of confidence.

Table 18: How confident are you that the provider(s) from which your council will commission services are taking steps to:
a) Improve their local management of child health information systems (CHIS) and other IT systems where appropriate
b) Achieve compliance with the national Maternity and Children’s Dataset in order to be able to submit a standard set of data to the Health and Social Care Information Centre from where national and local benchmarked reporting of Key Performance Indicators will flow in the longer term?

	a) Improve CHIS and IT systems		b) Achieve compliance	
	Number	Per cent	Number	Per cent
Very or fairly confident	104	70	91	61
Very confident	25	17	27	18
Fairly confident	79	53	64	43
Not very confident	19	13	20	13
Not at all confident	3	2	5	3
Don’t know	23	15	33	22
Total	149	100	149	100

Base (all respondents): 149:

Most councils (95 per cent / 142 councils) said they were either very or fairly confident that existing contract(s) included the five mandated universal checks and the related children’s 0-5 years public health outcomes. In fact, three quarters (76 per cent / 113 councils) were very confident.

Table 19: How confident are you that existing contract(s) include the five mandated universal checks and the related children’s 0-5 years public health outcomes?

	Number	Per cent
Very or fairly confident	142	95
Very confident	113	76
Fairly confident	29	19
Not very confident	3	2
Not at all confident	2	1
Don’t know	2	1
Total	149	100

Base (all respondents): 149

Respondents were asked how confident they were that baseline data about their resident population for the five mandated universal checks was being shared with them prior to 1 October 2015, against which council performance could be measured in the future. Eighty five per cent of respondents (127 councils) were either very or fairly confident.

Table 20: How confident are you that baseline data about your resident population for the five mandated universal checks is being shared with you prior to 1 October 2015, against which council performance can be measured in the future?

	Number	Per cent
Very or fairly confident	127	85
Very confident	60	40
Fairly confident	67	45
Not very confident	19	13
Not at all confident	1	1
Don't know	2	1
Total	149	100

Base (all respondents): 149

Communications and support

All but two respondents (99 per cent / 147 councils) indicated that the information they received about the transfer was either very or fairly useful.

Table 21: How would you rate the usefulness of the information you have received about the transfer?

	Number	Per cent
Very or fairly useful	147	99
Very useful	52	35
Fairly useful	95	64
Not very useful	1	1
Not at all useful	1	1
Don't know	0	0
Total	149	100

Base (all respondents): 149

Respondents were asked to identify which communication routes they normally used to receive information and which they found useful. All communication routes were used by a majority of councils, but the most widely used route was bulletins by the professional associations (81 per cent / 121 councils), followed Department of Health website (79 per cent / 117 councils). In addition, the communication route found useful by the highest number of respondents was the Department of Health website (81 per cent / 120 councils), followed by bulletins from the professional associations (72 per cent / 108 councils).

Table 22: Which of the following communication routes do you normally a) receive information through b) find useful?

	Receive information through		Find useful?	
	Number	Per cent	Number	Per cent
Bulletins from the professional associations	121	81	108	72
Department of Health website	117	79	120	81
LGA bulletins	112	75	103	69
LGA website	95	64	92	62
Regional oversight groups	80	54	68	46
None of the above	2	1	2	1
Don't know	0	0	1	1

Note: percentages total to more than 100 per cent, since respondents could select more than one communication route.

Respondents were also asked whether they had any further comments about how the transfer of responsibilities had been communicated. Just over half of councils provided a response. Comments were divided roughly equally between four main themes.

Timeliness of communications

Around a quarter of comments concerned the timeliness of communications, with many councils pointing out some important information was received too late to be of use. For example one county council in the East of England said:

“It would have been useful to have had the national contract specification at least two weeks ahead of March 31st”.

Others pointed out that while communication was slow to begin with, this had eventually improved.

Organisation of communications

Another theme was around concerns councils had with the organisation of communications. Problems mentioned included:

- lack of version control, where documents were re-released containing changes without notice
- information communicated through too many sources, resulting in duplication and confusion which meant key issues, new information or actions were missed
- information was not always sent to the most appropriate officer.

Information of higher quality needed

The third theme was simply around concerns that the quality or quantity of the information was not sufficient. There was a range of comments that the information received was not broad enough, leaving key information out. For example, one council in London said they “would have valued more face to face contact with boroughs and more time to build relationships with providers”.

Happy with the information received

There were, however, some councils who were more satisfied with the information communicated to them, and around a quarter of councils commented positively including references to the good working relationships built with NHS England local colleagues. For example, a metropolitan district in the North West said:

“the support from local NHS England colleagues has been very helpful and [we] would hope that good working relationships would be maintained post transition.”

Further information and support

Respondents were asked what further information and support they needed to help them deliver a safe transfer. Around half of councils provided a response to this question and the comments fell under five broad themes.

- **Funding** – the largest theme to emerge from the comments was around concerns with the budget. In particular councils would like information about the final budget settlement for 2016/17.
- **Peer support / sharing best practice** – a number of councils indicated that they would benefit from opportunities to receive peer support and share best practice.
- **Ongoing support from NHS England** – several councils commented that the support they had been offered by NHS England had been very useful, and it was hoped that this support could continue into the transfer phase.
- **Changes from registered to resident population** – a number of councils requested more information about the implications of moving from the population that was registered to an area to the population that was resident in an area.
- **Further information** – various other comments requested miscellaneous information, including information about contracts and performance, continued bulletins on key updates in a simple format, and more detailed information regarding governance and data reporting.

Respondents were also asked what further information and support they needed to help them transform and improve 0-5 public health services. Again, around half of councils provided a response to this question and the comments fell under four broad themes.

- **Benchmarking, information sharing and best practice** – by far the largest theme was around comments from councils who would find opportunities to engage in benchmarking useful, and to have facilities in place to share information and best practice.
- **Performance information, research and evidence** – a number of councils commented that quality performance information and access to evidence was important for service transformation or improvement.
- **Funding** – it was felt by a number of councils that sufficient funding – or at least clarity about the level of funding, particularly for future years – was important to be able to transform or improve 0-5 public health services.

- **Further information and support** – to ensure transformation and improvement in 0-5 public health commissioning, a number of councils specified that they need continued support, usually in the form of information from NHS England. Some councils further specified that they would like more information in relation to the integration of children’s services.

Other comments

Finally, respondents were asked if they had any other concerns in relation to the transfer of 0-5 public health commissioning responsibilities. Around half of councils provided a response to this question. The vast majority of responses concerned financial considerations, and most of these comments were specifically about the funding allocation, which was considered to be too small or uncertain.

For example, a unitary authority in the North East said:

“The only main concern which we have at the moment is the funding and how the situation will be managed within the LA if we have to agree an uplift or if we have to do a short term re-design of the service to fit the current budget.”

Other councils related their lack of funding specifically to performance and capacity to deliver services. For example, a unitary authority in the South East said:

“The costs of maintaining the growth in health visitors in line with the birth rate and the need for sufficient staff to manage the universal plus interventions required in our diverse and highly mobile communities.”

Some councils, while aware of the funding allocation for 2015/16, expressed concern that their allocation for 2016/17 was uncertain. For example, a county council in the South East said:

“Our main concern is that while we know the budget for 2015/16 we do not know what it will be for 2016/17. This could be a real problem if the formula or amounts are varied.”

There were also some other smaller themes to emerge from the funding:

- The largest theme after concerns about funding was the issue of moving from a population based on GP registration to one based on residence in a council area.
- Councils highlighted the need for access to health data to ensure good performance management.
- Some councils expressed concern that there may be a lack of commissioning capacity.
- A small number of councils expressed unhappiness at the timeframes set by NHS England, which were not seen as being met.

Annex

This annex contains the results tables and commentary for each of the nine English regions.

Results tables for East Midlands

Respondents were asked how confident they were that the arrangements for managing the transition in their locality were clear and achievable. All councils were either very or fairly confident that this was the case.

Table 23: How confident are you that the arrangements for managing the transition in your locality are clear and achievable?

	Number	Per cent
Very or fairly confident	9	100
Very confident	5	56
Fairly confident	4	44
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	9	100

Base (all respondents in East Midlands): 9

Respondents were asked to what extent they were currently working with a) NHS England (formerly known as Area Teams) and b) their provider(s) to ensure commissioning arrangements for the 0-5 Healthy Child Programme will be fully operational in their council from 1st October 2015. All 10 responses given said they were working to a great or moderate extent with NHS England and nine said they were working to a great or moderate extent with providers.

Table 24: To what extent are you currently working with a) NHS England (formerly known as Area Teams) and b) your provider(s) to ensure commissioning arrangements for the 0-5 Healthy Child Programme will be fully operational in your council from 1st October 2015

	c) NHS England		d) Your provider(s)	
	Number	Per cent	Number	Per cent
To a great or moderate extent	10	100	9	90
To a great extent	8	80	8	80
To a moderate extent	2	20	1	10
To a small extent	0	0	1	10
Not at all	0	0	0	0
Don't know	0	0	0	0

Base (all respondents in East Midlands): 10³

Respondents were asked to what extent a) NHS England and b) their provider(s) were working with them to produce and share legacy and handover documents. Eight out of the 10 responses said they were working to a great or moderate extent with NHS England and seven said they were working to a great or moderate extent with providers.

³ Please note that for this question there is a base of 10 rather than nine. This is because one respondent council had taken over commissioning responsibility from two NHS England local area teams, meaning they had to make two separate responses for this question.

Table 25: To what extent are a) NHS England and b) your provider(s) working with you to produce and share legacy handover documents?

	c) NHS England		d) Your provider(s)	
	Number	Per cent	Number	Per cent
To a great or moderate extent	8	80	7	70
To a great extent	5	50	4	40
To a moderate extent	3	30	3	30
To a small extent	2	20	2	20
Not at all	0	0	1	10
Don't know	0	0	0	0

Base (all respondents in East Midlands): 10⁴

Respondents were asked how confident they were that the provider(s) from which they will commission 0-5 public health services will be able to discharge their functions to safeguard and promote the welfare of children. All were either very or fairly confident.

Table 26: How confident are you that the provider(s) from which you will commission 0-5 public health services will be able to discharge their functions to safeguard and promote the welfare of children?

	Number	Per cent
Very or fairly confident	9	100
Very confident	6	67
Fairly confident	3	33
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	9	100

Base (all respondents in East Midlands):9

Respondents were asked how confident they were that their council has all the named individuals with responsibility for safeguarding children, including designated professionals and senior leads in place at Local Safeguarding Children Board level. All nine councils were either very or fairly confident.

Table 27: How confident are you that your council has all the named individuals with responsibility for safeguarding children, including designated professionals and senior leads in place at Local Safeguarding Children Board level?

	Number	Per cent
Very or fairly confident	9	100
Very confident	6	67
Fairly confident	3	33
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	9	100

Base (all respondents in East Midlands): 9

Respondents were asked if they had a **funding** agreement in place with their neighbouring council(s) which covers their resident population who are registered out

⁴ Please note that for this question there is a base of 10 rather than nine. This is because one respondent council had taken over commissioning responsibility from two NHS England local area teams, meaning they had to make two separate responses for this question.

of area. None of the nine councils had a funding agreement in place, but three said that this was in progress.

Table 28: Do you have a funding agreement in place with your neighbouring authority(ies) which covers your resident population who are registered out of area?		
	Number	Per cent
Yes	0	0
No – but this is in progress	3	33
No – this is not currently in progress	6	67
Don't know	0	0
Total	9	100

Base (all respondents in East Midlands): 9

Respondents were asked if they had a **performance monitoring** agreement in place with their neighbouring council(s) which covers their resident population who are registered out of area. None of the nine councils had a performance monitoring agreement in place, but four said that this was in progress.

The Regional Oversight Group (ROG) identified this as a significant issue. In response the region is working with NHS England to work through issues arising from the move from commissioning from a registered to a resident population basis. The ROG highlighted that this appears to be an issue in other areas across the country, and it would be helpful to have a clear national steer to inform consistent approaches and timelines.

Table 29: Do you have a performance monitoring agreement in place with your neighbouring authority(ies) which covers your resident population who are registered out of area?		
	Number	Per cent
Yes	0	0
No – but this is in progress	4	44
No – this is not currently in progress	5	56
Don't know	0	0
Total	9	100

Base (all respondents in East Midlands): 9

Respondents were asked how confident they were that commissioning arrangements for the 0-5 Healthy Child Programme would be fully operational in their council from 1 October 2015. All nine councils said they were very or fairly confident that the arrangements would be fully operational.

Table 30: How confident are you that commissioning arrangements for the 0-5 Healthy Child Programme will be fully operational in your council from 1st October 2015?		
	Number	Per cent
Very or fairly confident	9	100
Very confident	9	100
Fairly confident	0	0
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	9	100

Base (all respondents in East Midlands): 9

Respondents were asked how confident they were that their council has appropriate governance arrangements in place to oversee the transition. All nine councils said they were very or fairly confident that these arrangements were in place.

Table 31: How confident are you that your council has appropriate governance arrangements in place to oversee the transition?

	Number	Per cent
Very or fairly confident	9	100
Very confident	7	78
Fairly confident	2	22
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	9	100

Base (all respondents in East Midlands): 9

Respondents were asked if their Health and Wellbeing board had discussed the transfer. Five councils (55 per cent) said that the board had not discussed the transfer, but one said this was scheduled for a future meeting.

Table 32: Has your Health and Wellbeing Board discussed the transfer?

	Number	Per cent
Yes	4	44
No – but this is scheduled for a future meeting	1	11
No – this discussion is not currently scheduled	4	44
Don't know	0	0
Total	9	100

Base (all respondents in East Midlands): 9

Respondents were asked to indicate which, if any, people or groups they would share their self-assessment with. All nine councils said that they would share their self-assessment with Directors of public health, Directors of Children's Services and Lead members of children's services.

Table 33: Please indicate which, if any, of the following people and groups you will share this self-assessment with:

	Number	Per cent
Director of public health	9	100
Director of children's services	9	100
Lead member children's services	9	100
Total	9	100
Portfolio holder for health	8	89
Relevant scrutiny chair	3	33
Health and wellbeing board	2	22
None of the above	0	0
Don't know	0	0

Note: percentages total to more than 100 per cent, since respondents could select more than one person or group.

Respondents were asked to what extent their council had worked with NHS England (previously called Area Teams), as part of commissioning discussions, to agree commissioning intentions for existing contract(s) that were transferring over to their council. All nine councils said that they had done so to a great or moderate extent.

Table 34: As part of commissioning discussions, to what extent has your council worked with NHS England (previously called Area Teams) to agree commissioning intentions for existing contract(s) that are transferring over to your council?

	Number	Per cent
To a great or moderate extent	9	100
To a great extent	7	78
To a moderate extent	2	22
To a small extent	0	0
Not at all	0	0
Don't know	0	0
Total	9	100

Base (all respondents in East Midlands):9

Respondents were asked to indicate which option for the transfer of contracts from NHS England to councils for contracts that expired at 31 March 2015 their council had taken. The highest number, 67 per cent (6 councils) stated that they would Novate contract(s) from NHS England to their council.

Table 35: Which of the following has your council opted to do?

	Number	Per cent
Novate contract(s) from NHS England to your council	6	67
Put in place two similar but separate 6 month contract(s) with the provider. (This option includes one contract for April to September 2015 between NHS England and the provider and another for October 2015 to March 2016 between the local authority and the provider)	3	33
Not applicable	0	0
Don't know	0	0
Total	9	100

Base (all respondents in East Midlands): 9

Respondents were asked if any of the NHS England contracts that required transferring to their council ran beyond 30 September 2015. Five councils (56 per cent) said that contracts ran beyond 30 September 2015.

Table 36: Do any of the NHS England contracts that require transferring to your council run beyond 30 September 2015?

	Number	Per cent
Yes	5	56
No	4	44
Don't know	0	0
Total	9	100

Base: (all respondents in East Midlands): 9

Those respondents who specified that they did have contracts that ran beyond 30 September 2015, were then asked if their council intended in principle to accept novation of these contracts from NHS England to local authority control with effect from 1 October 2015. All five said that they intended to accept novation.

Table 37: Does your council intend, in principle, to accept novation of these contracts from NHS England to local authority control with effect from 1 October 2015?

	Number	Per cent
Yes, we intend to accept novation	5	100
No, we don't intend to accept novation	0	0
Don't know	0	0
Total	5	100

Base (all respondents in East Midlands who had contracts that ran beyond 30 September 2015): 5

Respondents were asked if their council had communicated its intended approach to contract transition to the current children's 0-5 years public health service provider(s), and all said yes they had done so.

Table 38: Has your council communicated its intended approach to contract transition to the current children's 0-5 years public health service provider(s)?

	Number	Per cent
Yes	9	100
No – but plans for this are being developed	0	0
No- plans for this have not yet been developed	0	0
Don't know	0	0
Total	9	100

Base (all respondents in East Midlands): 9

Respondents were asked if their council had put plans in place for minimum standardised a) data collection and b) reporting requirements that support the effective commissioning of children's 0-5 years public health services. Eight out of nine councils said that they had put plans in place for minimum standardised data collection. Eight out of nine councils had also put plans in place for reporting requirements that support the effective commissioning of children's 0-5 years public health services.

Table 39: Has your council put plans in place for minimum standardised a) data collection and b) reporting requirements that support the effective commissioning of children's 0-5 years public health services?

	b) data collection		b) reporting requirements	
	Number	Per cent	Number	Per cent
Yes	8	89	8	89
No – but plans are in development	1	11	1	11
No – plans for this have not yet been developed	0	0	0	0
Don't know	0	0	0	0
Total	9	100	9	100

Base (all respondents in East Midlands): 9

Respondents were asked how confident they were that the provider(s) from which their council will commission services are taking steps to:

- c) Improve their local management of child health information, making use of Child Health Information Systems (CHIS) and other IT systems where appropriate.
- d) Achieve compliance with the national Maternity and Children's Dataset in order to be able to submit a standard set of data to the Health and Social

Care Information Centre from where national and local benchmarked reporting of Key Performance Indicators will flow in the longer term.

Sixty-seven per cent (six councils) were either very or fairly confident that the provider(s) are taking steps to improve their local management of child health information, making use of CHIS and other IT systems where appropriate. Seven of the nine councils were either very or fairly confident that the provider(s) are taking steps to achieve compliance.

Table 40: How confident are you that the provider(s) from which your council will commission services are taking steps to: a) Improve their local management of child health information systems (CHIS) and other IT systems where appropriate b) Achieve compliance with the national Maternity and Children’s Dataset in order to be able to submit a standard set of data to the Health and Social Care Information Centre from where national and local benchmarked reporting of Key Performance Indicators will flow in the longer term?

	c) Improve CHIS and IT systems		d) Achieve compliance	
	Number	Per cent	Number	Per cent
Very or fairly confident	6	67	7	78
Very confident	1	11	1	11
Fairly confident	5	56	6	67
Not very confident	0	0	0	0
Not at all confident	0	0	0	0
Don’t know	3	33	2	22
Total	9	100	9	100

Base (all respondents in East Midlands): 9

Respondents were asked how confident they were that existing contract(s) include the five universal checks and the related children’s 0-5 year’s public health outcomes. All nine councils were either very or fairly confident.

Table 41: How confident are you that existing contract(s) include the five mandated universal checks and the related children’s 0-5 year’s public health outcomes?

	Number	Per cent
Very or fairly confident	9	100
Very confident	8	89
Fairly confident	1	11
Not very confident	0	0
Not at all confident	0	0
Don’t know	0	0
Total	9	100

Base (all respondents in East Midlands): 9

Respondents were asked how confident they were that baseline data about their resident population for the five mandated universal checks was being shared with them prior to 1 October 2015, against which council performance could be measured in the future. Eight out of the nine councils (eight councils) were either very or fairly confident.

Table 42: How confident are you that baseline data about your resident population for the five mandated universal checks is being shared with you prior to 1 October 2015, against which council performance can be measured in the future?

	Number	Per cent
Very or fairly confident	8	89
Very confident	3	33
Fairly confident	5	56
Not very confident	1	11
Not at all confident	0	0
Don't know	0	0
Total	9	100

Base (all respondents in East Midlands): 9

Respondents were asked how they would rate the usefulness of the information that they have received about the transfer. All nine councils of respondents rated the information that they had received as very or fairly useful.

Table 43: How would you rate the usefulness of the information you have received about the transfer?

	Number	Per cent
Very or fairly useful	9	100
Very useful	2	22
Fairly useful	7	78
Not very useful	0	0
Not at all useful	0	0
Don't know	0	0
Total	9	100

Base (all respondents in East Midlands): 9

Respondents were asked to identify which communication routes they normally used to receive information and which they found useful. All nine councils normally received information through LGA bulletins, however most also normally received information through the regional oversight groups, the LGA website and the Department of Health website (eight respondents, seven respondents and seven respondents, respectively). The communication routes found useful by the highest number of councils (all of them) were the LGA bulletins and the Department of Health website.

Table 44: Which of the following communication routes do you normally a) receive information through b) find useful?

	Receive information through		Find useful?	
	Number	Per cent	Number	Per cent
LGA bulletins	9	100	9	100
Total	9	100	9	100
Regional oversight groups	8	89	8	89
Bulletins from the professional associations	8	89	8	89
LGA website	7	78	7	78
Department of Health website	7	78	9	100
None of the above	0	0	0	0
Don't know	0	0	0	0

Note: percentages total to more than 100 per cent, since respondents could select more than one communication route.

Results tables for East of England

Respondents were asked how confident they were that the arrangements for managing the transition in their locality were clear and achievable. All 10 councils were either very or fairly confident that this was the case.

Table 45: How confident are you that the arrangements for managing the transition in your locality are clear and achievable?

	Number	Per cent
Very or fairly confident	10	100
Very confident	9	90
Fairly confident	1	10
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	10	100

Base (all respondents in East of England): 10

Respondents were asked to what extent they were currently working with a) NHS England (formerly known as Area Teams) and b) their provider(s) to ensure commissioning arrangements for the 0-5 Healthy Child Programme will be fully operational in their council from 1st October 2015. All 10 councils said they were working to a great or moderate extent with NHS England. All councils also said they were working to a great or moderate extent with providers.

Table 46: To what extent are you currently working with a) NHS England (formerly known as Area Teams) and b) your provider(s) to ensure commissioning arrangements for the 0-5 Healthy Child Programme will be fully operational in your council from 1st October 2015

	e) NHS England		f) Your provider(s)	
	Number	Per cent	Number	Per cent
To a great or moderate extent	10	100	10	100
To a great extent	9	90	10	100
To a moderate extent	1	10	0	0
To a small extent	0	0	0	0
Not at all	0	0	0	0
Don't know	0	0	0	0
Total	10	100	10	100

Base (all respondents in East of England):10

Respondents were asked to what extent a) NHS England and b) their provider(s) were working with them to produce and share legacy and handover documents. Ninety per cent (nine authorities) were working to a great or moderate extent with NHS England and 90 per cent (nine authorities) were working to a great or moderate extent with providers.

Table 47: To what extent are a) NHS England and b) your provider(s) working with you to produce and share legacy handover documents?

	e) NHS England		f) Your provider(s)	
	Number	Per cent	Number	Per cent
To a great or moderate extent	9	90	9	90
To a great extent	7	70	7	70
To a moderate extent	2	20	2	20
To a small extent	0	0	0	0
Not at all	1	10	1	10
Don't know	0	0	0	0
Total	10	100	10	100

Base (all respondents in East of England):10

Respondents were asked how confident they were that the provider(s) from which they will commission 0-5 public health services will be able to discharge their functions to safeguard and promote the welfare of children. All 10 councils said they were either very or fairly confident.

Table 48: How confident are you that the provider(s) from which you will commission 0-5 public health services will be able to discharge their functions to safeguard and promote the welfare of children?

	Number	Per cent
Very or fairly confident	10	100
Very confident	6	60
Fairly confident	4	40
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	10	100

Base (all respondents in East of England):10

Respondents were asked how confident they were that their council has all the named individuals with responsibility for safeguarding children, including designated professionals and senior leads in place at Local Safeguarding Children Board level. All councils were either very or fairly confident.

Table 49: How confident are you that your council has all the named individuals with responsibility for safeguarding children, including designated professionals and senior leads in place at Local Safeguarding Children Board level?

	Number	Per cent
Very or fairly confident	10	100
Very confident	9	90
Fairly confident	1	10
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	10	100

Base (all respondents in East of England): 10

Respondents were asked if they had a **funding** agreement in place with their neighbouring local authority(ies), which covers their resident population who are registered out of area. None of the 10 councils said they had a funding agreement in place, but four said that this was in progress.

Table 50: Do you have a funding agreement in place with your neighbouring authority(ies) which covers your resident population who are registered out of area?

	Number	Per cent
Yes	0	0
No – but this is in progress	4	40
No – this is not currently in progress	6	60
Don't know	0	0
Total	10	100

Base (all respondents in East of England): 10

Respondents were asked if they had a **performance monitoring** agreement in place with their neighbouring local authority(ies) which covers their resident population who are registered out of area. Again, none of the 10 councils said they had a performance monitoring agreement in place, but four said that this was in progress.

Table 51: Do you have a performance monitoring agreement in place with your neighbouring authority(ies) which covers your resident population who are registered out of area?

	Number	Per cent
Yes	0	0
No – but this is in progress	4	40
No – this is not currently in progress	6	60
Don't know	0	0
Total	10	100

Base (all respondents in East of England): 10

Respondents were asked how confident they were that commissioning arrangements for the 0-5 Healthy Child Programme would be fully operational in their council from 1 October 2015. All respondents (10 councils) said they were very or fairly confident that the arrangements would be fully operational.

Table 52: How confident are you that commissioning arrangements for the 0-5 Healthy Child Programme will be fully operational in your council from 1st October 2015?

	Number	Per cent
Very or fairly confident	10	100
Very confident	9	90
Fairly confident	1	10
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	10	100

Base (all respondents in East of England):10

Respondents were asked how confident they were that their council has appropriate governance arrangements in place to oversee the transition. All respondents (10 councils) said they were very or fairly confident that the arrangements were in place.

Table 53: How confident are you that your council has appropriate governance arrangements in place to oversee the transition?

	Number	Per cent
Very or fairly confident	10	100
Very confident	9	90
Fairly confident	1	10
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	10	100

Base (all respondents in East of England): 10

Respondents were asked if their Health and Wellbeing board had discussed the transfer. Half of respondents (five councils) said indicated that they had discussed the transfer with their board. Of the five who said the transfer had not been discussed at the board, three said that this was scheduled for a future meeting.

Table 54: Has your Health and Wellbeing Board discussed the transfer?

	Number	Per cent
Yes	5	50
No – but this is scheduled for a future meeting	3	30
No – this discussion is not currently scheduled	2	20
Don't know	0	0
Total	10	100

Base (all respondents in East of England):10

Respondents were asked to indicate which, if any, people or groups they would share their self-assessment with. Nine out of 10 councils said the self-assessment would be shared with the director of public health, seven respondents said it would be shared with the director of children's services six would be sharing it with the portfolio holder for health.

Table 55: Please indicate which, if any, of the following people and groups you will share this self-assessment with:

	Number	Per cent
Health and wellbeing board	1	10
Director of public health	9	90
Director of children's services	7	70
Portfolio holder for health	6	60
Lead member children's services	4	40
Relevant scrutiny chair	1	10
None of the above	0	0
Don't know	0	0

Note: percentages total to more than 100 per cent, since respondents could select more than one person or group.

Respondents were asked to what extent their council had worked with NHS England (previously called Area Teams), as part of commissioning discussions, to agree commissioning intentions for existing contract(s) that were transferring over to their council. All 10 councils said that they had done so to a great or moderate extent.

Table 56: As part of commissioning discussions, to what extent has your council worked with NHS England (previously called Area Teams) to agree commissioning intentions for existing contract(s) that are transferring over to your council?

	Number	Per cent
To a great or moderate extent	10	100
To a great extent	9	90
To a moderate extent	1	10
To a small extent	0	0
Not at all	0	0
Don't know	0	0
Total	10	100

Base (all respondents in East of England): 10

Respondents were asked to indicate which option for the transfer of contracts from NHS England to councils for contracts that expired at 31 March 2015 their council had taken. All but one council stated that they would novate contract(s) from NHS England to their council. One other council said that this question was not applicable.

Table 57: Which of the following has your council opted to do?

	Number	Per cent
Novate contract(s) from NHS England to your council	9	90
Put in place two similar but separate 6 month contract(s) with the provider. (This option includes one contract for April to September 2015 between NHS England and the provider and another for October 2015 to March 2016 between the local authority and the provider)	0	0
Not applicable	1	10
Don't know	0	0
Total	10	100

Base (all respondents in East of England):10

Respondents were asked if any of the NHS England contracts that required transferring to their council ran beyond 30 September 2015. Seven out of the 10 councils indicated that this was the case.

Table 58: Do any of the NHS England contracts that require transferring to your council run beyond 30 September 2015?

	Number	Per cent
Yes	7	70
No	3	30
Don't know	0	0
Total	10	100

Base: (all respondents in East of England):10

Those respondents who specified that they did have contracts that ran beyond 30 September 2015, were then asked if their council intended in principle to accept novation of these contracts from NHS England to local authority control with effect from 1 October 2015. All seven of these respondents said that they intended to accept novation.

Table 59: Does your council intend, in principle, to accept novation of these contracts from NHS England to local authority control with effect from 1 October 2015?

	Number	Per cent
Yes, we intend to accept novation	7	100
No, we don't intend to accept novation	0	0
Don't know	0	0
Total	7	100

Base (all respondents in East of England who had contracts that ran beyond 30 September 2015): 6

Respondents were asked if their council had communicated its intended approach to contract transition to the current children's 0-5 years public health service provider(s). All 10 said that they had done so.

Table 60: Has your council communicated its intended approach to contract transition to the current children's 0-5 years public health service provider(s)?

	Number	Per cent
Yes	10	100
No – but plans for this are being developed	0	0
No- plans for this have not yet been developed	0	0
Don't know	0	0
Total	10	100

Base (all respondents in East of England):10

Respondents were asked if their council had put plans in place for minimum standardised a) data collection and b) reporting requirements that support the effective commissioning of children's 0-5 years public health services. Half of respondents (five councils) said that they had put plans in place for minimum standardised data collection. However, of those who did not have plans in place, four had plans in development. Half of respondents (five authorities) had also put plans in place for reporting requirements that support the effective commissioning of children's 0-5 years public health services, and of those did not have these plans in place four had plans in development.

Table 61: Has your council put plans in place for minimum standardised a) data collection and b) reporting requirements that support the effective commissioning of children's 0-5 years public health services?

	c) data collection		b) reporting requirements	
	Number	Per cent	Number	Per cent
Yes	5	50	5	50
No – but plans are in development	4	40	4	40
No – plans for this have not yet been developed	1	10	1	10
Don't know	0	0	0	0
Total	10	100	10	100

Base (all respondents in East of England): 10

Respondents were asked how confident they were that the provider(s) from which their council will commission services are taking steps to:

- e) Improve their local management of child health information, making use of Child Health Information Systems (CHIS) and other IT systems where appropriate.
- f) Achieve compliance with the national Maternity and Children’s Dataset in order to be able to submit a standard set of data to the Health and Social Care Information Centre from where national and local benchmarked reporting of Key Performance Indicators will flow in the longer term.

Seven out of the 10 councils were either very or fairly confident that the provider(s) are taking steps to improve their local management of child health information, making use of CHIS and other IT systems where appropriate. Eight out of 10 councils were either very or fairly confident that the provider(s) are taking steps to achieve compliance.

Table 62: How confident are you that the provider(s) from which your council will commission services are taking steps to: a) Improve their local management of child health information systems (CHIS) and other IT systems where appropriate b) Achieve compliance with the national Maternity and Children’s Dataset in order to be able to submit a standard set of data to the Health and Social Care Information Centre from where national and local benchmarked reporting of Key Performance Indicators will flow in the longer term?

	e) Improve CHIS and IT systems		f) Achieve compliance	
	Number	Per cent	Number	Per cent
Very or fairly confident	7	70	8	80
Very confident	2	20	2	20
Fairly confident	5	50	6	60
Not very confident	0	0	0	0
Not at all confident	0	0	0	0
Don't know	3	30	2	20
Total	10	100	10	100

Base (all respondents in East of England): 10

Respondents were asked how confident they were that existing contract(s) include the five universal checks and the related children’s 0-5 year’s public health outcomes. All 10 councils were very confident that contracts included the mandated universal checks and related outcomes.

Table 63: How confident are you that existing contract(s) include the five mandated universal checks and the related children’s 0-5 year’s public health outcomes?

	Number	Per cent
Very or fairly confident	10	100
Very confident	10	100
Fairly confident	0	0
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	10	100

Base (all respondents East of England): 10

Respondents were asked how confident they were that baseline data about their resident population for the five mandated universal checks was being shared with them prior to 1 October 2015, against which council performance could be measured in the future. Eight of the 10 councils were either very or fairly confident.

Table 64: How confident are you that baseline data about your resident population for the five mandated universal checks is being shared with you prior to 1 October 2015, against which council performance can be measured in the future?

	Number	Per cent
Very or fairly confident	8	80
Very confident	7	70
Fairly confident	1	10
Not very confident	2	20
Not at all confident	0	0
Don't know	0	0
Total	10	100

Base (all respondents east of England): 10

Respondents were asked how they would rate the usefulness of the information that they have received about the transfer. All respondents (10 councils) rated the information that they had received as very or fairly useful.

Table 65: How would you rate the usefulness of the information you have received about the transfer?

	Number	Per cent
Very or fairly confident	10	100
Very useful	7	70
Fairly useful	3	30
Not very useful	0	0
Not at all useful	0	0
Don't know	0	0
Total	10	100

Base (all respondents in East of England) 10

Respondents were asked to identify which communication routes they normally used to receive information and which they found useful. Most respondents normally received information through the LGA website LGA bulletins, the Department of Health web and bulletins from the professional associations (eight, seven and seven councils, respectively),. One council indicated received information through none of the communication routes listed. Most councils also found the LGA website, the Department of Health website, bulletins from the professional associations and the LGA bulletins useful (ten, nine eight and seven councils, respectively).

Table 66: Which of the following communication routes do you normally a) receive information through b) find useful?

	Receive information through		Find useful?	
	Number	Per cent	Number	Per cent
LGA website	8	80	10	100
LGA bulletins	7	70	7	70
Regional oversight groups	4	40	3	30
Department of Health website	7	70	9	90
Bulletins from the professional associations	7	70	8	80
None of the above	1	10	0	0
Don't know	0	0	0	0

Note: percentages total to more than 100 per cent, since respondents could select more than one communication route.

Results tables for Greater London

Please note that, one group of three London boroughs provided a joint response and so for the purposes of this report are treated as one council. The total number of councils reported here are therefore 31 rather than 33.

The Regional Oversight Group (ROG) highlighted a number of significant risks were found in relation to funding, data and reporting, FNP and coordinated working with neighbouring boroughs to address issues of resident vs. registered populations.

Whilst the self-assessment did not have a specific question on funding there were a number of boroughs who reported significant concerns in the free text section about; funding allocations, health visitor trajectories that are below target and the impact of this on funding and concerns about the quality of services that are transferring.

A degree of risks applies to all of the London boroughs but the most significant risk lies with a smaller number of boroughs representing between a quarter and a third. Local discussions are taking place and where necessary are involving the Department of Health and NHS England in order to resolve outstanding issues.

As a result of the self-assessment NHS England London is using the findings to inform a plan of action to support boroughs on a bespoke basis and will continue to provide support across the region.

Respondents were asked how confident they were that the arrangements for managing the transition in their locality were clear and achievable. Eighty four per cent (26 respondents) were either very or fairly confident that this was the case.

Table 67: How confident are you that the arrangements for managing the transition in your locality are clear and achievable?

	Number	Per cent
Very or fairly confident	26	84
Very confident	11	35
Fairly confident	15	48
Not very confident	4	13
Not at all confident	1	3
Don't know	0	0
Total	31	100 ⁵

Base (all respondents in Greater London): 31

Respondents were asked to what extent they were currently working with a) NHS England (formerly known as Area Teams) and b) their provider(s) to ensure commissioning arrangements for the 0-5 Healthy Child Programme will be fully operational in their council from 1st October 2015. All 31 respondents said they were working to a great or moderate extent with NHS England and 94 per cent (29 respondents) were working to a great or moderate extent with providers.

Table 68: To what extent are you currently working with a) NHS England (formerly known as Area Teams) and b) your provider(s) to ensure commissioning arrangements for the 0-5

⁵ Whilst the individual answer options displayed in Table 1 appear to sum to 99 per cent, this is due to the fact the figures in the table have been rounded to the nearest whole number. Please note that this may also occur in other parts of the report.

Healthy Child Programme will be fully operational in your council from 1st October 2015				
	g) NHS England		h) Your provider(s)	
	Number	Per cent	Number	Per cent
To a great or moderate extent	31	100	29	94
To a great extent	20	65	20	65
To a moderate extent	11	35	9	29
To a small extent	0	0	2	6
Not at all	0	0	0	0
Don't know	0	0	0	0
Total	31	100	31	100

Base (all respondents in Greater London): 31

Respondents were asked to what extent a) NHS England and b) their provider(s) were working with them to produce and share legacy and handover documents. Eighty four per cent (26 councils) were working to a great or moderate extent with NHS England and 77 per cent (24 councils) were working to a great or moderate extent with providers.

Table 69: To what extent are a) NHS England and b) your provider(s) working with you to produce and share legacy handover documents?

	g) NHS England		h) Your provider(s)	
	Number	Per cent	Number	Per cent
To a great or moderate extent	26	84	24	77
To a great extent	10	32	9	29
To a moderate extent	16	52	15	48
To a small extent	4	13	6	19
Not at all	1	3	1	3
Don't know	0	0	0	0
Total	31	100	31	100

Base (all respondents in Greater London): 31

Respondents were asked how confident they were that the provider(s) from which they will commission 0-5 public health services will be able to discharge their functions to safeguard and promote the welfare of children. Ninety per cent (28 councils) were either very or fairly confident.

Table 70: How confident are you that the provider(s) from which you will commission 0-5 public health services will be able to discharge their functions to safeguard and promote the welfare of children?

	Number	Per cent
Very or fairly confident	28	90
Very confident	13	42
Fairly confident	15	48
Not very confident	1	3
Not at all confident	1	3
Don't know	1	3
Total	31	100

Base (all respondents in Greater London): 31

Respondents were asked how confident they were that their council has all the named individuals with responsibility for safeguarding children, including designated professionals and senior leads in place at Local Safeguarding Children Board level. All 31 councils) were either very or fairly confident.

Table 71: How confident are you that your council has all the named individuals with responsibility for safeguarding children, including designated professionals and senior leads in place at Local Safeguarding Children Board level?

	Number	Per cent
Very or fairly confident	31	100
Very confident	27	87
Fairly confident	4	13
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	31	100

Base (all respondents in Greater London): 31

Respondents were asked if they had a **funding** agreement in place with their neighbouring council(s) which covers their resident population who are registered out of area. One council said they did have a funding agreement in place, and of the 29 that did not, two said that this was currently in progress. The ROG highlighted this as a major area of concern and a potential risk with safeguarding implications.

Table 72: Do you have a funding agreement in place with your neighbouring authority(ies) which covers your resident population who are registered out of area?

	Number	Per cent
Yes	1	3
No – but this is in progress	2	6
No – this is not currently in progress	27	87
Don't know	1	3
Total	31	100

Base (all respondents in Greater London): 31

Respondents were asked if they had a **performance monitoring** agreement in place with their neighbouring council(s) which covers their resident population who are registered out of area. One council said they did have a performance monitoring agreement in place, and of the 29 that did not, three said that this was in progress.

Table 73: Do you have a performance monitoring agreement in place with your neighbouring authority(ies) which covers your resident population who are registered out of area?

	Number	Per cent
Yes	1	3
No – but this is in progress	3	10
No – this is not currently in progress	26	84
Don't know	1	3
Total	31	100

Base (all respondents in Greater London): 31

Respondents were asked how confident they were that commissioning arrangements for the 0-5 Healthy Child Programme would be fully operational in their council from 1 October 2015. Eighty seven per cent (27 councils) said they were very or fairly confident that the arrangements would be fully operational.

Table 74: How confident are you that commissioning arrangements for the 0-5 Healthy Child Programme will be fully operational in your council from 1st October 2015?

	Number	Per cent
Very or fairly confident	27	87
Very confident	18	58
Fairly confident	9	29
Not very confident	2	6
Not at all confident	2	6
Don't know	0	0
Total	31	100

Base (all respondents in Greater London): 31

Respondents were asked how confident they were that their council has appropriate governance arrangements in place to oversee the transition. All but one respondent (30 councils) said they were very or fairly confident that the arrangements were in place.

Table 75: How confident are you that your council has appropriate governance arrangements in place to oversee the transition?

	Number	Per cent
Very or fairly confident	30	97
Very confident	24	77
Fairly confident	6	19
Not very confident	1	3
Not at all confident	0	0
Don't know	0	0
Total	31	100

Base (all respondents in Greater London): 31

Respondents were asked if their Health and Wellbeing board had discussed the transfer. Sixty one per cent (19 councils) said yes they had discussed the transfer. Of the 11 councils who had not discussed the transfer with their board, nine said that this was scheduled for a future meeting.

Table 76: Has your Health and Wellbeing Board discussed the transfer?

	Number	Per cent
Yes	19	61
No – but this is scheduled for a future meeting	9	29
No – this discussion is not currently scheduled	2	6
Don't know	1	3
Total	31	100

Base (all respondents in Greater London): 31

Respondents were asked to indicate which, if any, people or groups they would share their self-assessment with. All councils said that this would be shared both with the director of public health and the director of children's services. A majority also said the self-assessment would be shared with the lead member for children's services, the health and wellbeing board and the portfolio holder for health (19, 18 and 18 councils, respectively)

Table 77: Please indicate which, if any, of the following people and groups you will share this self-assessment with:

	Number	Per cent
Health and wellbeing board	18	58
Director of public health	31	100
Director of children's services	31	100
Portfolio holder for health	18	58
Lead member children's services	19	61
Relevant scrutiny chair	9	29
None of the above	0	0
Don't know	0	0

Note: percentages total to more than 100 per cent, since respondents could select more than one person or group.

Respondents were asked to what extent their council had worked with NHS England (previously called Area Teams), as part of commissioning discussions, to agree commissioning intentions for existing contract(s) that were transferring over to their council. Ninety per cent (28 councils) said that they had done so to a great or moderate extent.

Table 78: As part of commissioning discussions, to what extent has your council worked with NHS England (previously called Area Teams) to agree commissioning intentions for existing contract(s) that are transferring over to your council?

	Number	Per cent
To a great or moderate extent	28	90
To a great extent	19	61
To a moderate extent	9	29
To a small extent	3	10
Not at all	0	0
Don't know	0	0
Total	31	100

Base (all respondents in Greater London):31

Respondents were asked to indicate which option for the transfer of contracts from NHS England to councils for contracts that expired at 31 March 2015 their council had taken. A majority of respondents (20 councils) stated that they would novate contract(s) from NHS England to their council.

Table 79: Which of the following has your council opted to do?

	Number	Per cent
Novate contract(s) from NHS England to your council	20	67
Put in place two similar but separate 6 month contract(s) with the provider. (This option includes one contract for April to September 2015 between NHS England and the provider and another for October 2015 to March 2016 between the local authority and the provider)	10	33
Not applicable	0	0
Don't know	0	0
Total	30	100

Base: (all respondents in Greater London):30⁶

Respondents were asked if any of the NHS England contracts that required transferring to their council ran beyond 30 September 2015. Just over half (16 councils) indicated that that contracts would not run beyond 30 September 2015.

Table 80: Do any of the NHS England contracts that require transferring to your council run beyond 30 September 2015?

	Number	Per cent
Yes	13	43
No	16	53
Don't know	1	3
Total	30	100

Base: (all respondents in Greater London):30⁷

Those respondents who specified that they did have contracts that ran beyond 30 September 2015, were then asked if their council intended in principle to accept

⁶ One council did not respond to this question.

⁷ One council did not respond to this question

novation of these contracts from NHS England to local authority control with effect from 1 October 2015. All 13 of those respondents said that they intended to accept novation.

Table 81: Does your council intend, in principle, to accept novation of these contracts from NHS England to local authority control with effect from 1 October 2015?

	Number	Per cent
Yes, we intend to accept novation	13	100
No, we don't intend to accept novation	0	0
Don't know	0	0
Total	13	100

Base (all respondents in Greater London who had contracts that ran beyond 30 September 2015): 13

Respondents were asked if their council had communicated its intended approach to contract transition to the current children's 0-5 years public health service provider(s). Eight seven per cent (27 councils) said they had done so.

Table 82: Has your council communicated its intended approach to contract transition to the current children's 0-5 years public health service provider(s)?

	Number	Per cent
Yes	27	87
No – but plans for this are being developed	4	13
No- plans for this have not yet been developed	0	0
Don't know	0	0
Total	31	100

Base (all respondents in Greater London):31

Respondents were asked if their council had put plans in place for minimum standardised a) data collection and b) reporting requirements that support the effective commissioning of children's 0-5 years public health services. Forty two per cent of respondents (13 councils) said that they had put plans in place for minimum standardised data collection and 39 per cent of respondents (12 councils) had put plans in place for reporting requirements that support the effective commissioning of children's 0-5 years public health services.

Table 83: Has your council put plans in place for minimum standardised a) data collection and b) reporting requirements that support the effective commissioning of children's 0-5 years public health services?

	d) data collection		b) reporting requirements	
	Number	Per cent	Number	Per cent
Yes	13	42	12	39
No – but plans are in development	16	52	16	52
No – plans for this have not yet been developed	2	6	3	10
Don't know	0	0	0	0
Total	31	100	31	100

Base (all respondents in Greater London): 31

Respondents were asked how confident they were that the provider(s) from which their council will commission services are taking steps to:

- g) Improve their local management of child health information, making use of Child Health Information Systems (CHIS) and other IT systems where appropriate.

- h) Achieve compliance with the national Maternity and Children's Dataset in order to be able to submit a standard set of data to the Health and Social Care Information Centre from where national and local benchmarked reporting of Key Performance Indicators will flow in the longer term.

Sixty eight per cent (21 councils) were either very or fairly confident that the provider(s) are taking steps to improve their local management of child health information, making use of CHIS and other IT systems where appropriate. Fifty two per cent (16 councils) were either very or fairly confident that the provider(s) are taking steps to achieve compliance.

Table 84: How confident are you that the provider(s) from which your council will commission services are taking steps to: a) Improve their local management of child health information systems (CHIS) and other IT systems where appropriate b) Achieve compliance with the national Maternity and Children's Dataset in order to be able to submit a standard set of data to the Health and Social Care Information Centre from where national and local benchmarked reporting of Key Performance Indicators will flow in the longer term?

	g) Improve CHIS and IT systems		h) Achieve compliance	
	Number	Per cent	Number	Per cent
Very or fairly confident	21	68	16	52
Very confident	5	16	6	19
Fairly confident	16	52	10	32
Not very confident	5	16	8	26
Not at all confident	0	0	1	3
Don't know	5	16	6	19
Total	31	100	31	100

Base (all respondents in Greater London): 31

Respondents were asked how confident they were that existing contract(s) include the five universal checks and the related children's 0-5 year's public health outcomes. Eighty seven per cent (27 councils) of respondents were either very or fairly confident

Table 85: How confident are you that existing contract(s) include the five mandated universal checks and the related children's 0-5 year's public health outcomes?

	Number	Per cent
Very or fairly confident	27	87
Very confident	14	45
Fairly confident	13	42
Not very confident	1	3
Not at all confident	2	6
Don't know	1	3
Total	31	100

Base (all respondents Greater London): 31

Respondents were asked how confident they were that baseline data about their resident population for the five mandated universal checks was being shared with them prior to 1 October 2015, against which council performance could be measured in the future. Seventy seven per cent of respondents (24 councils) were either very or fairly confident.

Table 86: How confident are you that baseline data about your resident population for the five mandated universal checks is being shared with you prior to 1 October 2015, against which council performance can be measured in the future?

	Number	Per cent
Very or fairly confident	24	77
Very confident	7	23
Fairly confident	17	55
Not very confident	6	19
Not at all confident	1	3
Don't know	0	0
Total	31	100

Base (all respondents in Greater London): 31

Respondents were asked how they would rate the usefulness of the information that they have received about the transfer. All but one respondent (30 councils) rated the information that they had received as very or fairly useful.

Table 87: How would you rate the usefulness of the information you have received about the transfer?

	Number	Per cent
Very or fairly useful	30	97
Very useful	8	26
Fairly useful	22	71
Not very useful	0	0
Not at all useful	1	3
Don't know	0	0
Total	31	100

Base (all respondents in Greater London): 31

Respondents were asked to identify which communication routes they normally used to receive information and which they found useful. The communication route through which the highest number of respondents received information (90 per cent / 28 councils) was bulletins from the professional associations. A majority also received information through the Department of Health website, LGA bulletins and the LGA website (26, 23 and 20 councils, respectively). The highest number of respondents (81 per cent / 25 councils) found the Department of Health website useful, but a majority also found bulletins from the professional associations, LGA bulletins and the LGA website useful (24, 21 and 16 councils, respectively).

Table 88: Which of the following communication routes do you normally a) receive information through b) find useful?

	Receive information through		Find useful?	
	Number	Per cent	Number	Per cent
LGA website	20	65	16	52
LGA bulletins	23	74	21	68
Regional oversight groups	13	42	10	32
Department of Health website	26	84	25	81
Bulletins from the professional associations	28	90	24	77
None of the above	0	0	2	6
Don't know	0	0	1	3

Note: percentages total to more than 100 per cent, since respondents could select more than one communication route.

Following analysis of the self- assessments the ROG's next steps are:

- NHS England London will develop a remedial plan to support boroughs on a bespoke basis and will also continue to support boroughs across the region.
- A number of workshops are planned to provide a forum in which some more generic issues can be discussed.

Results tables for North East

The North East Regional Oversight Group (ROG) consisted of representation from all local authorities, PHE, the LGA and NHS England. It identified key issues and risks facing the region and mitigated risks by providing sector-led support or where appropriate, by raising them with national partners. All twelve North East local authorities completed the self-assessment and are collectively confident that arrangements for managing the transition are clear and achievable.

Respondents were asked how confident they were that the arrangements for managing the transition in their locality were clear and achievable. All councils were either very or fairly confident that this was the case.

Table 89: How confident are you that the arrangements for managing the transition in your locality are clear and achievable?

	Number	Per cent
Very or fairly confident	12	100
Very confident	9	75
Fairly confident	3	25
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	12	100

Base (all respondents in North East): 12

Respondents were asked to what extent they were currently working with a) NHS England (formerly known as Area Teams) and b) their provider(s) to ensure commissioning arrangements for the 0-5 Healthy Child Programme will be fully operational in their council from 1st October 2015. All respondents were working to a great or moderate extent with NHS England and 92 per cent (11 councils) were working to a great or moderate extent with providers.

Table 90: To what extent are you currently working with a) NHS England (formerly known as Area Teams) and b) your provider(s) to ensure commissioning arrangements for the 0-5 Healthy Child Programme will be fully operational in your council from 1st October 2015

	i) NHS England		j) Your provider(s)	
	Number	Per cent	Number	Per cent
To a great or moderate extent	12	100	11	92
To a great extent	10	83	9	75
To a moderate extent	2	17	2	17
To a small extent	0	0	1	8
Not at all	0	0	0	0
Don't know	0	0	0	0
Total	12	100	12	100

Base (all respondents in North East): 12

Respondents were asked to what extent a) NHS England and b) their provider(s) were working with them to produce and share legacy and handover documents. Ninety two per cent (11 councils) were working to a great or moderate extent with NHS England and seventy five per cent (nine councils) were working to a great or moderate extent with providers.

Table 91: To what extent are a) NHS England and b) your provider(s) working with you to produce and share legacy handover documents?

	i) NHS England		j) Your provider(s)	
	Number	Per cent	Number	Per cent

To a great or moderate extent	11	92	9	75
To a great extent	9	75	7	58
To a moderate extent	2	17	2	17
To a small extent	1	8	3	25
Not at all	0	0	0	0
Don't know	0	0	0	0
Total	12	100	12	100

Base (all respondents in North East): 12

Respondents were asked how confident they were that the provider(s) from which they will commission 0-5 public health services will be able to discharge their functions to safeguard and promote the welfare of children. All respondents were either very or fairly confident.

Table 92: How confident are you that the provider(s) from which you will commission 0-5 public health services will be able to discharge their functions to safeguard and promote the welfare of children?

	Number	Per cent
Very or fairly confident	12	100
Very confident	10	83
Fairly confident	2	17
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	12	100

Base (all respondents in North East):12

Respondents were asked how confident they were that their council has all the named individuals with responsibility for safeguarding children, including designated professionals and senior leads in place at Local Safeguarding Children Board level. All respondents were very confident.

Table 93: How confident are you that your council has all the named individuals with responsibility for safeguarding children, including designated professionals and senior leads in place at Local Safeguarding Children Board level?

	Number	Per cent
Very or fairly confident	12	100
Very confident	12	100
Fairly confident	0	0
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	12	100

Base (all respondents in North East): 12

Respondents were asked if they had a **funding** agreement in place with their neighbouring council(s) which covers their resident population who are registered out of area. None of the 12 councils had a funding agreement in place but four said that this was in progress.

In response to these findings the North East Directors of Public Health (DsPH) have discussed this issue. For the relatively small numbers involved, it was felt that setting up a bespoke system would not be a cost effective solution. Particularly as in the North East the Health Visitor workforce has managed cross border issues successfully in

recent years, therefore the DsPH North East Network will continue to monitor the situation.

Table 94: Do you have a funding agreement in place with your neighbouring authority(ies) which covers your resident population who are registered out of area?

	Number	Per cent
Yes	0	0
No – but this is in progress	4	33
No – this is not currently in progress	8	67
Don't know	0	0
Total	12	100

Base (all respondents in North East: 12

Respondents were asked if they had a performance monitoring agreement in place with their neighbouring council(s) which covers their resident population who are registered out of area. None of the 12 councils had a performance agreement in place but four said that this was in progress.

The ROG highlighted that in the North East, it is recognised that there is a need to ensure that Child health Information Systems (CHIS) are robust. Further discussions with NHS England about CHIS and maternity dataset are planned.

Table 95: Do you have a performance monitoring agreement in place with your neighbouring authority(ies) which covers your resident population who are registered out of area?

	Number	Per cent
Yes	0	0
No – but this is in progress	5	42
No – this is not currently in progress	7	58
Don't know	0	0
Total	12	100

Base (all respondents in North East: 12

Respondents were asked how confident they were that commissioning arrangements for the 0-5 Healthy Child Programme would be fully operational in their council from 1 October 2015. All 12 councils said they were very or fairly confident that the arrangements would be fully operational.

Table 96: How confident are you that commissioning arrangements for the 0-5 Healthy Child Programme will be fully operational in your council from 1st October 2015?

	Number	Per cent
Very or fairly confident	12	100
Very confident	10	83
Fairly confident	2	17
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	12	100

Base (all respondents in North East: 12

Respondents were asked how confident they were that their council has appropriate governance arrangements in place to oversee the transition. All councils said they were very or fairly confident that the arrangements were in place.

Table 97: How confident are you that your council has appropriate governance arrangements in place to oversee the transition?

	Number	Per cent
Very or fairly confident	12	100
Very confident	11	92
Fairly confident	1	8
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	12	100

Base (all respondents in North East): 12

Respondents were asked if their Health and Wellbeing board had discussed the transfer. Seventy-five per cent (nine councils) said yes they had discussed the transfer and the remainder had a discussion scheduled for a future meeting.

Table 98: Has your Health and Wellbeing Board discussed the transfer?

	Number	Per cent
Yes	9	75
No – but this is scheduled for a future meeting	3	25
No – this discussion is not currently scheduled	0	0
Don't know	0	0
Total	12	100

Base (all respondents in North East):12

Respondents were asked to indicate which, if any, people or groups they would share their self-assessment with. All 12 councils stated that they would share the self-assessment with the Director of Public Health, Director of Children's Services and the Portfolio Holder for Health.

Table 99: Please indicate which, if any, of the following people and groups you will share this self-assessment with:

	Number	Per cent
Director of public health	12	100
Director of children's services	12	100
Portfolio holder for health	12	100
Lead member children's services	11	92
Health and wellbeing board	8	67
Relevant scrutiny chair	5	42
None of the above	0	0
Don't know	0	0

Note: percentages total to more than 100 per cent, since respondents could select more than one person or group.

Respondents were asked to what extent their council had worked with NHS England (previously called Area Teams), as part of commissioning discussions, to agree commissioning intentions for existing contract(s) that were transferring over to their council. All councils said that they had done so to a great or moderate extent.

Table 100: As part of commissioning discussions, to what extent has your council worked with NHS England (previously called Area Teams) to agree commissioning intentions for existing contract(s) that are transferring over to your council?

	Number	Per cent
To a great or moderate extent	12	100
To a great extent	11	92
To a moderate extent	1	8
To a small extent	0	0
Not at all	0	0
Don't know	0	0
Total	12	100

Base (all respondents in North East):12

Respondents were asked to indicate which option for the transfer of contracts from NHS England to councils for contracts that expired at 31 March 2015 their council had taken. All but one respondent (11 councils) stated that they would put in place two similar but separate 6 month contract(s) with the provider.

Table 101: Which of the following has your council opted to do?

	Number	Per cent
Novate contract(s) from NHS England to your council	1	8
Put in place two similar but separate 6 month contract(s) with the provider. (This option includes one contract for April to September 2015 between NHS England and the provider and another for October 2015 to March 2016 between the local authority and the provider)	11	92
Not applicable	0	0
Don't know	0	0
Total	12	100

Base (all respondents in North East):12

Respondents were asked if any of the NHS England contracts that required transferring to their council ran beyond 30 September 2015. No councils said that contracts ran beyond 30 September 2015.

Table 102: Do any of the NHS England contracts that require transferring to your council run beyond 30 September 2015?

	Number	Per cent
Yes	0	0
No	12	100
Don't know	0	0
Total	12	100

Base: (all respondents in North East): 12

Respondents were asked if their council had communicated its intended approach to contract transition to the current children's 0-5 years public health service provider(s). All but one (11 councils) said they had done so.

Table 103: Has your council communicated its intended approach to contract transition to the current children's 0-5 years public health service provider(s)?		
	Number	Per cent
Yes	11	92
No – but plans for this are being developed	1	8
No- plans for this have not yet been developed	0	0
Don't know	0	0
Total	12	100

Base (all respondents in North East):12

Respondents were asked if their council had put plans in place for minimum standardised a) data collection and b) reporting requirements that support the effective commissioning of children's 0-5 years public health services. Eighty three per cent (10 councils) said that they had put plans in place for minimum standardised data collection and 75 per cent of respondents (nine councils) had put plans in place for reporting requirements that support the effective commissioning of children's 0-5 years public health services.

Table 104: Has your council put plans in place for minimum standardised a) data collection and b) reporting requirements that support the effective commissioning of children's 0-5 years public health services?				
	e) data collection		b) reporting requirements	
	Number	Per cent	Number	Per cent
Yes	10	83	9	75
No – but plans are in development	2	17	3	25
No – plans for this have not yet been developed	0	0	0	0
Don't know	0	0	0	0
Total	12	100	12	100

Base (all respondents in North East): 12

Respondents were asked how confident they were that the provider(s) from which their council will commission services are taking steps to:

- i) Improve their local management of child health information, making use of Child Health Information Systems (CHIS) and other IT systems where appropriate.
- j) Achieve compliance with the national Maternity and Children's Dataset in order to be able to submit a standard set of data to the Health and Social Care Information Centre from where national and local benchmarked reporting of Key Performance Indicators will flow in the longer term.

Seventy five per cent (nine councils) were either very or fairly confident that the provider(s) are taking steps to improve their local management of child health information, making use of CHIS and other IT systems where appropriate. Fifty eight per cent (seven councils) were either very or fairly confident that the provider(s) are taking steps to achieve compliance.

Table 105: How confident are you that the provider(s) from which your council will commission services are taking steps to: a) Improve their local management of child health information systems (CHIS) and other IT systems where appropriate b) Achieve compliance with the national Maternity and Children’s Dataset in order to be able to submit a standard set of data to the Health and Social Care Information Centre from where national and local benchmarked reporting of Key Performance Indicators will flow in the longer term?

	i) Improve CHIS and IT systems		j) Achieve compliance	
	Number	Per cent	Number	Per cent
Very or fairly confident	9	75	7	58
Very confident	5	42	5	42
Fairly confident	4	33	2	17
Not very confident	1	8	1	8
Not at all confident	0	0	0	0
Don’t know	2	17	4	33
Total	12	100	12	100

Base (all respondents in North East): 12

Respondents were asked how confident they were that existing contract(s) include the five universal checks and the related children’s 0-5 year’s public health outcomes. All councils were either very or fairly confident.

Table 106: How confident are you that existing contract(s) include the five mandated universal checks and the related children’s 0-5 year’s public health outcomes?

	Number	Per cent
Very or fairly confident	12	100
Very confident	11	92
Fairly confident	1	8
Not very confident	0	0
Not at all confident	0	0
Don’t know	0	0
Total	12	100

Base (all respondents North East): 12

Respondents were asked how confident they were that baseline data about their resident population for the five mandated universal checks was being shared with them prior to 1 October 2015, against which council performance could be measured in the future. All but one respondent (11 councils) were either very or fairly confident.

Table 107: How confident are you that baseline data about your resident population for the five mandated universal checks is being shared with you prior to 1 October 2015, against which council performance can be measured in the future?

	Number	Per cent
Very or fairly confident	11	92
Very confident	8	67
Fairly confident	3	25
Not very confident	1	8
Not at all confident	0	0
Don't know	0	0
Total	12	100

Base (all respondents North East): 12

Respondents were asked how they would rate the usefulness of the information that they have received about the transfer. All councils rated the information that they had received as very or fairly useful.

Table 108: How would you rate the usefulness of the information you have received about the transfer?

	Number	Per cent
Very or fairly useful	12	100
Very useful	7	58
Fairly useful	5	42
Not very useful	0	0
Not at all useful	0	0
Don't know	0	0
Total	12	100

Base (all respondents in North East): 12

Respondents were asked to identify which communication routes they normally used to receive information and which they found useful. All councils received information through bulletins from the professional associations and all but one received information through the Department of Health website. All councils found the Department of Health website the useful.

Table 109: Which of the following communication routes do you normally a) receive information through b) find useful?

	Receive information through		Find useful?	
	Number	Per cent	Number	Per cent
Bulletins from the professional associations	12	100	10	83
Department of Health website	11	92	12	100
LGA bulletins	8	67	7	58
Regional oversight groups	8	67	6	50
LGA website	7	58	9	75
None of the above	0	0	0	0
Don't know	0	0	0	0

Note: percentages total to more than 100 per cent, since respondents could select more than one communication route.

Results tables for North West

Respondents were asked how confident they were that the arrangements for managing the transition in their locality were clear and achievable. All councils were either very or fairly confident that this was the case. The Regional Oversight Group (ROG) agreed that the results accurately reflected the region's position. PHE and NHS England are working closely with local authorities to pre-empt and mitigate issues that have arisen. Specific issues between local partners are being worked through locally to achieve a safe transfer.

Table 110: How confident are you that the arrangements for managing the transition in your locality are clear and achievable?

	Number	Per cent
Very or fairly confident	23	100
Very confident	13	57
Fairly confident	10	43
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	23	100

Base (all respondents in North West): 23

Respondents were asked to what extent they were currently working with a) NHS England (formerly known as Area Teams) and b) their provider(s) to ensure commissioning arrangements for the 0-5 Healthy Child Programme will be fully operational in their council from 1st October 2015. All councils were working to a great or moderate extent with NHS England and all councils were also working to a great or moderate extent with providers.

Table 111: To what extent are you currently working with a) NHS England (formerly known as Area Teams) and b) your provider(s) to ensure commissioning arrangements for the 0-5 Healthy Child Programme will be fully operational in your council from 1st October 2015

	k) NHS England		l) Your provider(s)	
	Number	Per cent	Number	Per cent
To a great or moderate extent	23	100	23	100
To a great extent	22	96	18	78
To a moderate extent	1	4	5	22
To a small extent	0	0	0	0
Not at all	0	0	0	0
Don't know	0	0	0	0

Base (all respondents in North West): 23

Respondents were asked to what extent a) NHS England and b) their provider(s) were working with them to produce and share legacy and handover documents. All councils were working to a great or moderate extent with NHS England and all councils were also working to a great or moderate extent with providers .

Table 112: To what extent are a) NHS England and b) your provider(s) working with you to produce and share legacy handover documents?

	k) NHS England		l) Your provider(s)	
	Number	Per cent	Number	Per cent
To a great or moderate extent	23	100	23	100
To a great extent	13	57	10	43
To a moderate extent	10	43	13	57
To a small extent	0	0	0	0

Not at all	0	0	0	0
Don't know	0	0	0	0

Base (all respondents in North West): 23

Respondents were asked how confident they were that the provider(s) from which they will commission 0-5 public health services will be able to discharge their functions to safeguard and promote the welfare of children. Ninety six per cent (22 councils) were either very or fairly confident. The ROG highlighted that local areas would like some support with developing a list of relevant Health visitor safeguarding KPIs to support the monitoring and quality assurance of the service going forward.

Table 113: How confident are you that the provider(s) from which you will commission 0-5 public health services will be able to discharge their functions to safeguard and promote the welfare of children?

	Number	Per cent
Very or fairly confident	22	96
Very confident	13	57
Fairly confident	9	39
Not very confident	1	4
Not at all confident	0	0
Don't know	0	0
Total	23	100

Base (all respondents in North West): 23

Respondents were asked how confident they were that their council has all the named individuals with responsibility for safeguarding children, including designated professionals and senior leads in place at Local Safeguarding Children Board level. All 23 councils were either very or fairly confident.

Table 114: How confident are you that your council has all the named individuals with responsibility for safeguarding children, including designated professionals and senior leads in place at Local Safeguarding Children Board level?

	Number	Per cent
Very or fairly confident	23	100
Very confident	20	87
Fairly confident	3	13
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	23	100

Base (all respondents in North West):23

Respondents were asked if they had a **funding** agreement in place with their neighbouring council(s) which covers their resident population who are registered out of area. Eighty two per cent (19 councils) said they did not have a funding agreement in place, but eight of those said that this was in progress. The ROG highlighted that concerns about registered and resident populations and boundary issues were raised. In response NHS England has carried out a piece of work with local authorities and providers on the safe transfer of records and case management.

Table 115: Do you have a funding agreement in place with your neighbouring authority(ies) which covers your resident population who are registered out of area?

	Number	Per cent
Yes	2	9
No – but this is in progress	8	35
No – this is not currently in progress	11	48
Don't know	2	9
Total	23	100

Base (all respondents in North West): 23

Respondents were asked if they had a **performance monitoring** agreement in place with their neighbouring council(s) which covers their resident population who are registered out of area. Ninety one per cent (21 councils) said that they did not have a performance monitoring agreement in place, but seven of those said this was said that this was in progress.

Table 116: Do you have a performance monitoring agreement in place with your neighbouring authority(ies) which covers your resident population who are registered out of area?

	Number	Per cent
Yes	1	4
No – but this is in progress	7	30
No – this is not currently in progress	14	61
Don't know	1	4
Total	23	100

Base (all respondents in North West): 23

Respondents were asked how confident they were that commissioning arrangements for the 0-5 Healthy Child Programme would be fully operational in their council from 1 October 2015. All councils said they were very or fairly confident that the arrangements would be fully operational.

Table 117: How confident are you that commissioning arrangements for the 0-5 Healthy Child Programme will be fully operational in your council from 1st October 2015?

	Number	Per cent
Very or fairly confident	100	23
Very confident	19	83
Fairly confident	4	17
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	23	100

Base (all respondents in North West): 23

Respondents were asked how confident they were that their council has appropriate governance arrangements in place to oversee the transition. All but one (22 councils) said they were very or fairly confident that the arrangements were in place.

Table 118: How confident are you that your council has appropriate governance arrangements in place to oversee the transition?

	Number	Per cent
Very or fairly confident	22	96
Very confident	11	48
Fairly confident	11	48
Not very confident	1	4
Not at all confident	0	0
Don't know	0	0
Total	23	100

Base (all respondents in North West):23

Respondents were asked if their Health and Wellbeing board had discussed the transfer. Forty eight per cent (11 authorities) said yes they had discussed the transfer, but the remaining fifty two per cent (12 authorities) said this was scheduled for a future meeting.

Table 119: Has your Health and Wellbeing Board discussed the transfer?

	Number	Per cent
Yes	11	48
No – but this is scheduled for a future meeting	12	52
No – this discussion is not currently scheduled	0	0
Don't know	0	0
Total	23	100

Base (all respondents in North West): 23

Respondents were asked to indicate which, if any, people or groups they would share their self-assessment with. All councils stated that they would share the self-assessment with the Director of Public Health and Director of Children's Services.

Table 120: Please indicate which, if any, of the following people and groups you will share this self-assessment with:

	Number	Per cent
Director of public health	23	100
Director of children's services	23	100
Lead member children's services	16	70
Portfolio holder for health	14	61
Relevant scrutiny chair	8	35
Health and wellbeing board	7	30
None of the above	0	0
Don't know	0	0

Note: percentages total to more than 100 per cent, since respondents could select more than one person or group.

Respondents were asked to what extent their council had worked with NHS England (previously called Area Teams), as part of commissioning discussions, to agree commissioning intentions for existing contract(s) that were transferring over to their council. Ninety one per cent (21 authorities) said that they had done so to a great or moderate extent.

Table 121: As part of commissioning discussions, to what extent has your council worked with NHS England (previously called Area Teams) to agree commissioning intentions for existing contract(s) that are transferring over to your council?

	Number	Per cent
To a great or moderate extent	21	91
To a great extent	18	78
To a moderate extent	3	13
To a small extent	2	9
Not at all	0	0
Don't know	0	0
Total	23	100

Base (all respondents in North West): 23

Respondents were asked to indicate which option for the transfer of contracts from NHS England to councils for contracts that expired at 31 March 2015 their council had taken. Sixty one per cent (14 councils) stated that they would novate contract(s) from NHS England to their council, 26 per cent of respondents (six councils) said they would put in place separate six month contract(s) with the provider and the remaining three councils said that the question was not applicable to them.

Table 122: Which of the following has your council opted to do?

	Number	Per cent
Novate contract(s) from NHS England to your council	14	61
Put in place two similar but separate 6 month contract(s) with the provider. (This option includes one contract for April to September 2015 between NHS England and the provider and another for October 2015 to March 2016 between the local authority and the provider)	6	26
Not applicable	3	13
Don't know	0	0
Total	23	100

Base (all respondents in North West): 23

Respondents were asked if any of the NHS England contracts that required transferring to their council ran beyond 30 September 2015. Thirty nine per cent (nine councils) said that contracts ran beyond 30 September 2015.

Table 123: Do any of the NHS England contracts that require transferring to your council run beyond 30 September 2015?

	Number	Per cent
Yes	9	39
No	13	57
Don't know	1	4
Total	23	100

Base: (all respondents in North West):23

Those respondents who specified that they did have contracts that ran beyond 30 September 2015 were then asked if their council intended in principle to accept novation of these contracts from NHS England to local authority control with effect from 1 October 2015. All nine of those councils intended to accept novation.

Table 124: Does your council intend, in principle, to accept novation of these contracts from NHS England to local authority control with effect from 1 October 2015?

	Number	Per cent
Yes, we intend to accept novation	9	100
No, we don't intend to accept novation	0	0
Don't know	0	0
Total	9	100

Base (all respondents in North West who had contracts that ran beyond 30 September 2015):9

Respondents were asked if their council had communicated its intended approach to contract transition to the current children's 0-5 years public health service provider(s). All 23 councils said they had done so.

Table 125: Has your council communicated its intended approach to contract transition to the current children's 0-5 years public health service provider(s)?

	Number	Per cent
Yes	23	100
No – but plans for this are being developed	0	0
No- plans for this have not yet been developed	0	0
Don't know	0	0
Total	23	100

Base (all respondents in North West): 23

Respondents were asked if their council had put plans in place for minimum standardised a) data collection and b) reporting requirements that support the effective commissioning of children's 0-5 years public health services. Forty three per cent of respondents (10 councils) said that they had put plans in place for minimum standardised data collection, but 48 per cent (11 councils) said that plans were in development. Forty three per cent of respondents (10 councils) had put plans in place for reporting requirements that support the effective commissioning of children's 0-5 years public health services, but 48 per cent (10 councils) said that plans were in development.

Table 126: Has your council put plans in place for minimum standardised a) data collection and b) reporting requirements that support the effective commissioning of children's 0-5 years public health services?

	f) data collection		b) reporting requirements	
	Number	Per cent	Number	Per cent
Yes	10	43	10	43
No – but plans are in development	11	48	11	48
No – plans for this have not yet been developed	2	9	2	9
Don't know	0	0	0	0
Total	23	100	23	100

Base (all respondents in North West): 23

Respondents were asked how confident they were that the provider(s) from which their council will commission services are taking steps to:

- k) Improve their local management of child health information, making use of Child Health Information Systems (CHIS) and other IT systems where appropriate.
- l) Achieve compliance with the national Maternity and Children's Dataset in order to be able to submit a standard set of data to the Health and Social Care Information Centre from where national and local benchmarked reporting of Key Performance Indicators will flow in the longer term.

Fifty seven per cent (13 councils) were either very or fairly confident that the provider(s) are taking steps to improve their local management of child health information, making use of CHIS and other IT systems where appropriate. Sixty one per cent (14 councils) were either very or fairly confident that the provider(s) are taking steps to achieve compliance.

Table 127: How confident are you that the provider(s) from which your council will commission services are taking steps to: a) Improve their local management of child health information systems (CHIS) and other IT systems where appropriate b) Achieve compliance with the national Maternity and Children's Dataset in order to be able to submit a standard set of data to the Health and Social Care Information Centre from where national and local benchmarked reporting of Key Performance Indicators will flow in the longer term?

	k) Improve CHIS and IT systems		l) Achieve compliance	
	Number	Per cent	Number	Per cent
Very or fairly confident	13	57	14	61
Very confident	2	9	3	13
Fairly confident	11	48	11	48
Not very confident	7	30	5	22
Not at all confident	0	0	0	0
Don't know	3	13	4	17
Total	23	100	23	100

Base (all respondents in North West): 23

Respondents were asked how confident they were that existing contract(s) include the five universal checks and the related children's 0-5 year's public health outcomes. All but one (22 councils) were either very or fairly confident.

Table 128: How confident are you that existing contract(s) include the five mandated universal checks and the related children's 0-5 year's public health outcomes?

	Number	Per cent
Very or fairly confident	22	96
Very confident	17	74
Fairly confident	5	22
Not very confident	1	4
Not at all confident	0	0
Don't know	0	0
Total	23	100

Base (all respondents North West): 23

Respondents were asked how confident they were that baseline data about their resident population for the five mandated universal checks was being shared with them prior to 1 October 2015, against which council performance could be measured in the future. Eighty seven per cent (20 councils) were either very or fairly confident.

Table 129: How confident are you that baseline data about your resident population for the five mandated universal checks is being shared with you prior to 1 October 2015, against which council performance can be measured in the future?

	Number	Per cent
Very or fairly confident	20	87
Very confident	9	39
Fairly confident	11	48
Not very confident	2	9
Not at all confident	0	0
Don't know	1	4
Total	23	100

Base (all respondents in North West): 23

Respondents were asked how they would rate the usefulness of the information that they have received about the transfer. All councils rated the information that they had received as very or fairly useful.

Table 130: How would you rate the usefulness of the information you have received about the transfer?

	Number	Per cent
Very or fairly useful	23	100
Very useful	8	35
Fairly useful	15	65
Not very useful	0	0
Not at all useful	0	0
Don't know	0	0
Total	23	100

Base (all respondents in North West):23

Respondents were asked to identify which communication routes they normally used to receive information and which they found useful. A majority of respondents received information through bulletins from the professional associations (74 per cent / 17 councils), LGA bulletins (70 per cent / 16 councils) and the Department of Health website (74 per cent / 16 councils). The communication routes found useful by the highest number of councils were the Department of Health website 74 per cent (17 councils) and LGA bulletins and Bulletins from the professional associations, (both 70 per cent / 16 councils).

Table 131: Which of the following communication routes do you normally a) receive information through b) find useful?

	Receive information through		Find useful?	
	Number	Per cent	Number	Per cent
Bulletins from the professional associations	17	74	16	70
LGA bulletins	16	70	16	70
Department of Health website	16	70	17	74
LGA website	10	43	10	43
Regional oversight groups	7	30	8	35
None of the above	0	0	0	0
Don't know	0	0	0	0

Note: percentages total to more than 100 per cent, since respondents could select more than one communication route.

Results tables for South East

The South East Regional Oversight Group (ROG) was pleased to see that all local authorities across the region completed the self-assessment, this is indicative of the high level of attention South East local authorities are giving to this area of work.

Overall the results show high confidence levels across the region. In the case of a very small number of councils low confidence levels were expressed in response to some questions. For one council this was a result of a lack of capacity at the time the self-assessment was completed. A vacant post has since been filled, and the council is more confident that work is being delivered. In another council, their self-assessment results reflected particular challenges occurring at the time the self-assessment was completed, however, these challenges have since been resolved.

Respondents were asked how confident they were that the arrangements for managing the transition in their locality were clear and achievable. All councils were either very or fairly confident that this was the case.

Table 132: How confident are you that the arrangements for managing the transition in your locality are clear and achievable?

	Number	Per cent
Very or fairly confident	19	100
Very confident	10	53
Fairly confident	9	47
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	19	100

Base (all respondents in South East): 19

Respondents were asked to what extent they were currently working with a) NHS England (formerly known as Area Teams) and b) their provider(s) to ensure commissioning arrangements for the 0-5 Healthy Child Programme will be fully operational in their council from 1st October 2015. All but one council were working to a great or moderate extent with NHS England and all councils were working to a great or moderate extent with providers.

Table 133: To what extent are you currently working with a) NHS England (formerly known as Area Teams) and b) your provider(s) to ensure commissioning arrangements for the 0-5 Healthy Child Programme will be fully operational in your council from 1st October 2015

	NHS England		Your provider(s)	
	Number	Per cent	Number	Per cent
To a great or moderate extent	18	95	19	100
To a great extent	16	84	17	89
To a moderate extent	2	11	2	11
To a small extent	1	5	0	0
Not at all	0	0	0	0
Don't know	0	0	0	0
Total	19	100	19	100

Base (all respondents in South East): 19

Respondents were asked to what extent a) NHS England and b) their provider(s) were working with them to produce and share legacy and handover documents. Eighty nine per cent (17 councils) were working to a great or moderate extent with NHS England

and 89 per cent (17 councils) were also working to a great or moderate extent with providers.

Table 134: To what extent are a) NHS England and b) your provider(s) working with you to produce and share legacy handover documents?

	NHS England		Your provider(s)	
	Number	Per cent	Number	Per cent
To a great or moderate extent	17	89	17	89
To a great extent	9	47	10	53
To a moderate extent	8	42	7	37
To a small extent	2	11	1	5
Not at all	0	0	0	0
Don't know	0	0	1	5
Total	19	100	19	100

Base (all respondents in South East): 19

Respondents were asked how confident they were that the provider(s) from which they will commission 0-5 public health services will be able to discharge their functions to safeguard and promote the welfare of children. All councils were either very or fairly confident.

Table 135: How confident are you that the provider(s) from which you will commission 0-5 public health services will be able to discharge their functions to safeguard and promote the welfare of children?

	Number	Per cent
Very or fairly confident	19	100
Very confident	7	37
Fairly confident	12	63
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	19	100

Base (all respondents in South East) 19

Respondents were asked how confident they were that their council has all the named individuals with responsibility for safeguarding children, including designated professionals and senior leads in place at Local Safeguarding Children Board level. All councils were either very or fairly confident.

Table 136: How confident are you that your council has all the named individuals with responsibility for safeguarding children, including designated professionals and senior leads in place at Local Safeguarding Children Board level?

	Number	Per cent
Very or fairly confident	19	100
Very confident	17	89
Fairly confident	2	11
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	19	100

Base (all respondents in South East): 19

Respondents were asked if they had a funding agreement in place with their neighbouring council(s) which covers their resident population who are registered out

of area. Thirteen councils said they did not have a funding agreement in place, but six of those said that this was in progress.

The ROG highlighted that the minority of councils in the region had a funding agreement and a performance monitoring agreement in place with their neighbouring council(s) to cover their resident population who are registered out of area. It raised that these challenges are being experienced across the country and that there is a need for national guidance on how to manage resident and registered issues to ensure service continuity and appropriate record keeping. There were also concerns raised in the free text about whether the funding earmarked for the 0-5 public health transfer will be sufficient to continue to deliver services to the required standards.

Table 137: Do you have a funding agreement in place with your neighbouring authority(ies) which covers your resident population who are registered out of area?

	Number	Per cent
Yes	5	26
No – but this is in progress	6	32
No – this is not currently in progress	7	37
Don't know	1	5
Total	19	100

Base (all respondents in South East): 19

Respondents were asked if they had a performance monitoring agreement in place with their neighbouring council(s) which covers their resident population who are registered out of area. Thirteen respondents said they did not have a performance monitoring agreement in place, but five of those said that this was in progress.

Table 138: Do you have a performance monitoring agreement in place with your neighbouring authority(ies) which covers your resident population who are registered out of area?

	Number	Per cent
Yes	5	26
No – but this is in progress	5	26
No – this is not currently in progress	8	42
Don't know	1	5
Total	19	100

Base (all respondents in South East): 19

Respondents were asked how confident they were that commissioning arrangements for the 0-5 Healthy Child Programme would be fully operational in their council from 1 October 2015. All councils said they were very or fairly confident that the arrangements would be fully operational.

Table 139: How confident are you that commissioning arrangements for the 0-5 Healthy Child Programme will be fully operational in your council from 1st October 2015?

	Number	Per cent
Very or fairly confident	19	100
Very confident	14	74
Fairly confident	5	26
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	19	100

Base (all respondents in South East): 19

Respondents were asked how confident they were that their council has appropriate governance arrangements in place to oversee the transition. All councils said they were very or fairly confident that the arrangements were in place.

Table 140: How confident are you that your council has appropriate governance arrangements in place to oversee the transition?

	Number	Per cent
Very or fairly confident	19	100
Very confident	14	74
Fairly confident	5	26
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	19	100

Base (all respondents in South East): 19

Respondents were asked if their Health and Wellbeing board had discussed the transfer. Eleven of the 19 councils said this discussion had not taken place, but eight of those said that this was scheduled for a future meeting.

Table 141: Has your Health and Wellbeing Board discussed the transfer?		
	Number	Per cent
Yes	8	42
No – but this is scheduled for a future meeting	8	42
No – this discussion is not currently scheduled	3	16
Don't know	0	0
Total	19	100

Base (all respondents in South East): 19

Respondents were asked to indicate which, if any, people or groups they would share their self-assessment with. All councils stated that they would share the self-assessment with the director of children's services, and all but one said that it would be shared with the director of public health.

Table 142: Please indicate which, if any, of the following people and groups you will share this self-assessment with:		
	Number	Per cent
Director of children's services	19	100
Total	19	100
Director of public health	18	95
Portfolio holder for health	15	79
Lead member children's services	14	74
Health and wellbeing board	10	53
Relevant scrutiny chair	8	42
None of the above	0	0
Don't know	0	0

Note: percentages total to more than 100 per cent, since respondents could select more than one person or group.

The ROG noted that the results for the question about if the self-assessment had been shared with the Director of Public Health (DPH) was in fact 100 per cent because the self-assessment had been completed by the DPH.

Respondents were asked to what extent their council had worked with NHS England (previously called Area Teams), as part of commissioning discussions, to agree commissioning intentions for existing contract(s) that were transferring over to their council. Eighty nine per cent (17 councils) said that they had done so to a great or moderate extent.

Table 143: As part of commissioning discussions, to what extent has your council worked with NHS England (previously called Area Teams) to agree commissioning intentions for existing contract(s) that are transferring over to your council?		
	Number	Per cent
To a great or moderate extent	17	89
To a great extent	13	68
To a moderate extent	4	21
To a small extent	2	11
Not at all	0	0
Don't know	0	0
Total	19	100

Base (all respondents in South East): 19

Respondents were asked to indicate which option for the transfer of contracts from NHS England to councils for contracts that expired at 31 March 2015 their council had

taken. The highest number (53 per cent / 10 councils) stated that they would novate contract(s) from NHS England to their council, six said they would put in place two similar but separate contract(s) with the provider and three said the question was not applicable to them.

Table 144: Which of the following has your council opted to do?		
	Number	Per cent
Novate contract(s) from NHS England to your council	10	53
Put in place two similar but separate 6 month contract(s) with the provider. (This option includes one contract for April to September 2015 between NHS England and the provider and another for October 2015 to March 2016 between the local authority and the provider)	6	32
Not applicable	3	16
Don't know	0	0
Total	19	100

Base (all respondents in South East): 19

The ROG noted that it does not have any concerns about the three local authorities who responded 'not applicable' to the question in table 13 because it reflects the councils' plans for contract arrangements.

Respondents were asked if any of the NHS England contracts that required transferring to their council ran beyond 30 September 2015. Sixty eight per cent (13 councils) said that contracts would run beyond 30 September 2015.

Table 145: Do any of the NHS England contracts that require transferring to your council run beyond 30 September 2015?		
	Number	Per cent
Yes	13	68
No	4	21
Don't know	2	11
Total	19	100

Base: (all respondents in South East): 19

Those respondents who specified that they did have contracts that ran beyond 30 September 2015 were then asked if their council intended in principle to accept novation of these contracts from NHS England to local authority control with effect from 1 October 2015. All of these respondents said that they intended to accept novation.

Table 146: Does your council intend, in principle, to accept novation of these contracts from NHS England to local authority control with effect from 1 October 2015?		
	Number	Per cent
Yes, we intend to accept novation	13	100
No, we don't intend to accept novation	0	0
Don't know	0	0
Total	13	100

Base (all respondents in South East who had contracts that ran beyond 30 September 2015): 13

Respondents were asked if their council had communicated its intended approach to contract transition to the current children's 0-5 years public health service provider(s). All but one council said they had done so.

Table 147: Has your council communicated its intended approach to contract transition to the current children's 0-5 years public health service provider(s)?		
	Number	Per cent
Yes	18	95
No – but plans for this are being developed	0	0
No- plans for this have not yet been developed	1	5
Don't know	0	0
Total	19	100

Base (all respondents in South East): 19

Respondents were asked if their council had put plans in place for minimum standardised a) data collection and b) reporting requirements that support the effective commissioning of children's 0-5 years public health services. Less than half (8 councils) said that they had put plans in place for minimum standardised data collection, but all but one of the remainder (10 councils) said that the plans were in development. Less than half had put plans in place for reporting requirements that support the effective commissioning of children's 0-5 years public health services, but all but one of the remainder (10 councils) also said these plans were in development.

The ROG highlighted that there was a strong desire in the region for support from national partners for this issue.

Table 148: Has your council put plans in place for minimum standardised a) data collection and b) reporting requirements that support the effective commissioning of children's 0-5 years public health services?				
	data collection		b) reporting requirements	
	Number	Per cent	Number	Per cent
Yes	8	42	8	42
No – but plans are in development	10	53	10	53
No – plans for this have not yet been developed	1	5	1	5
Don't know	0	0	0	0
Total	19	100	19	100

Base (all respondents in South East): 19

Respondents were asked how confident they were that the provider(s) from which their council will commission services are taking steps to:

- improve their local management of child health information, making use of Child Health Information Systems (CHIS) and other IT systems where appropriate.
- achieve compliance with the national Maternity and Children's Dataset in order to be able to submit a standard set of data to the Health and Social Care Information Centre from where national and local benchmarked reporting of Key Performance Indicators will flow in the longer term.

Eighty nine per cent (17 councils) were either very or fairly confident that the provider(s) are taking steps to improve their local management of child health information, making use of CHIS and other IT systems where appropriate. Seventy nine per cent (15 councils) were either very or fairly confident that the provider(s) are taking steps to achieve compliance.

The ROG highlighted concerns about a potential lack of communication between different CHIS providers and a danger that children could have incomplete records. There was also some anxiety relating to a previous serious incident involving CHIS.

Table 149: How confident are you that the provider(s) from which your council will commission services are taking steps to: a) Improve their local management of child health information systems (CHIS) and other IT systems where appropriate b) Achieve compliance with the national Maternity and Children's Dataset in order to be able to submit a standard set of data to the Health and Social Care Information Centre from where national and local benchmarked reporting of Key Performance Indicators will flow in the longer term?

	Improve CHIS and IT systems		Achieve compliance	
	Number	Per cent	Number	Per cent
Very or fairly confident	17	89	15	79
Very confident	5	26	5	26
Fairly confident	12	63	10	53
Not very confident	1	5	1	5
Not at all confident	0	0	1	5
Don't know	1	5	2	11
Total	19	100	19	100

Base (all respondents in South East): 19

Respondents were asked how confident they were that existing contract(s) include the five universal checks and the related children's 0-5 year's public health outcomes. All 19 councils were either very or fairly confident.

Table 150: How confident are you that existing contract(s) include the five mandated universal checks and the related children's 0-5 year's public health outcomes?

	Number	Per cent
Very or fairly confident	19	100
Very confident	16	84
Fairly confident	3	16
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	19	100

Base (all respondents in South East): 19

Respondents were asked how confident they were that baseline data about their resident population for the five mandated universal checks was being shared with them prior to 1 October 2015, against which council performance could be measured in the future. Eighty nine per cent of respondents (17 councils) were either very or fairly confident.

Table 151: How confident are you that baseline data about your resident population for the five mandated universal checks is being shared with you prior to 1 October 2015, against which council performance can be measured in the future?

	Number	Per cent
Very or fairly confident	17	89
Very confident	9	47
Fairly confident	8	42
Not very confident	2	11
Not at all confident	0	0
Don't know	0	0
Total	19	100

Base (all respondents in South East): 19

Respondents were asked how they would rate the usefulness of the information that they have received about the transfer. All 19 councils rated the information that they had received as very or fairly useful.

Table 152: How would you rate the usefulness of the information you have received about the transfer?

	Number	Per cent
Very or fairly useful	19	100
Very useful	4	21
Fairly useful	15	79
Not very useful	0	0
Not at all useful	0	0
Don't know	0	0
Total	19	100

Base (all respondents in South East): 19

Respondents were asked to identify which communication routes they normally used to receive information and which they found useful. The highest number of respondents received information through LGA website and bulletins from the professional associations (both 79 per cent / 15 councils. The highest number of respondents found the Department of Health website useful (79 per cent / 15 councils).

Table 153: Which of the following communication routes do you normally a) receive information through b) find useful?

	Receive information through		Find useful?	
	Number	Per cent	Number	Per cent
LGA bulletins	15	79	13	68
Bulletins from the professional associations	15	79	10	53
LGA website	14	74	10	53
Department of Health website	14	74	15	79
Regional oversight groups	10	53	7	37
None of the above	1	5	0	0
Don't know	0	0	0	0

Note: percentages total to more than 100 per cent, since respondents could select more than one communication route.

The ROG highlighted that councils across the region would benefit from additional support in the following areas:

- Commissioning support including sharing of contract specifications, Key Performance Indicators and sharing good practice, particularly on; putting plans in place for a minimum standardised data collection and reporting requirements.
- Clarification around future budgets, cross charging arrangements and the impact of population growth, particularly in relation to cross-boundary issues. Guidance and information sharing around good practice is needed, especially on issues relating to finances and safeguarding.
- More information about the evidence base around best practice.
- Clarity about the future arrangements for CHIS.

- Support for Health and Wellbeing Boards (HWBs) to understand their new responsibilities resulting from the 0-5 public health transfer.

Results tables for South West

Respondents were asked how confident they were that the arrangements for managing the transition in their locality were clear and achievable. All 16 councils were either very or fairly confident that this was the case.

The Regional Oversight Group (ROG) highlighted that preparation for the transfer is progressing well across the South West with good collaboration between councils, NHS England and providers.

Table 154: How confident are you that the arrangements for managing the transition in your locality are clear and achievable?

	Number	Per cent
Very or fairly confident	16	100
Very confident	11	69
Fairly confident	5	31
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	16	100

Base (all respondents in South West): 16

Respondents were asked to what extent they were currently working with a) NHS England (formerly known as Area Teams) and b) their provider(s) to ensure commissioning arrangements for the 0-5 Healthy Child Programme will be fully operational in their council from 1st October 2015. All but one respondent (15 councils) were working to a great or moderate extent with NHS England and all but one were also working to a great or moderate extent with providers.

The ROG noted that whilst good working relationships have been maintained with NHS England across the region, local authority feedback suggested that there has been limited commissioning resources following the NHS England re-structure to support all local authorities and that where handover arrangements require additional input this will be a challenge for NHS England.

Table 155: To what extent are you currently working with a) NHS England (formerly known as Area Teams) and b) your provider(s) to ensure commissioning arrangements for the 0-5 Healthy Child Programme will be fully operational in your council from 1st October 2015

	m) NHS England		n) Your provider(s)	
	Number	Per cent	Number	Per cent
To a great or moderate extent	15	94	15	94
To a great extent	9	56	10	63
To a moderate extent	6	38	5	31
To a small extent	1	6	1	6
Not at all	0	0	0	0
Don't know	0	0	0	0
Total	16	100	16	100

Base (all respondents in South West): 16

Respondents were asked to what extent a) NHS England and b) their provider(s) were working with them to produce and share legacy and handover documents. Sixty nine per cent (11 councils) were working to a great or moderate extent with NHS England and 69 per cent (11 councils) were also working to a great or moderate extent with providers.

The ROG view was that legacy and handover documents must serve a purpose and should not be mandatory and that a standard handover document would be useful for those areas who wish to develop them.

Table 156: To what extent are a) NHS England and b) your provider(s) working with you to produce and share legacy handover documents?

	m) NHS England		n) Your provider(s)	
	Number	Per cent	Number	Per cent
To a great or moderate extent	11	69	11	69
To a great extent	7	44	8	50
To a moderate extent	4	25	3	19
To a small extent	4	25	3	19
Not at all	1	6	2	13
Don't know	0	0	0	0
Total	16	100	16	100

Base (all respondents in South West): 16

Respondents were asked how confident they were that the provider(s) from which they will commission 0-5 public health services will be able to discharge their functions to safeguard and promote the welfare of children. All 16 councils were either very or fairly confident.

Table 157: How confident are you that the provider(s) from which you will commission 0-5 public health services will be able to discharge their functions to safeguard and promote the welfare of children?

	Number	Per cent
Very or fairly confident	16	100
Very confident	7	44
Fairly confident	9	56
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	16	100

Base (all respondents in South West): 16

Respondents were asked how confident they were that their council has all the named individuals with responsibility for safeguarding children, including designated professionals and senior leads in place at Local Safeguarding Children Board level. All 16 councils were either very or fairly confident.

Table 158: How confident are you that your council has all the named individuals with responsibility for safeguarding children, including designated professionals and senior leads in place at Local Safeguarding Children Board level?

	Number	Per cent
Very or fairly confident	16	100
Very confident	15	94
Fairly confident	1	6
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	16	100

Base (all respondents in South West): 16

Respondents were asked if they had a **funding** agreement in place with their neighbouring council(s) which covers their resident population who are registered out of area. All but one said they did not have a funding agreement in place, eight of those said that this was in progress, however seven replied that this was not currently in progress. The ROG highlighted that the lack of agreements for funding with neighbouring councils had implications for funding, data collection, sharing, monitoring and governance arrangements.

Table 159: Do you have a funding agreement in place with your neighbouring authority(ies) which covers your resident population who are registered out of area?

	Number	Per cent
Yes	1	6
No – but this is in progress	8	50
No – this is not currently in progress	7	44
Don't know	0	0
Total	16	100

Base (all respondents in South West): 16

Respondents were asked if they had a **performance monitoring** agreement in place with their neighbouring council(s) which covers their resident population who are registered out of area. None of the councils said they had a performance monitoring agreement in place, but seven said this was in progress.

The ROG highlighted that local authorities identified this and funding agreements as an area requiring further work which would benefit from national guidance and a consistent approach. It raised that changes to the funding arrangements for the service from a registered to a resident population presents the largest risk to the transfer. Currently there are different methodologies being used to calculate the net difference in caseload across the country, which the ROG thought was unhelpful. This issue is a significant national concern and should be prioritised and resolved,

Table 160: Do you have a performance monitoring agreement in place with your neighbouring authority(ies) which covers your resident population who are registered out of area?

	Number	Per cent
Yes	0	0
No – but this is in progress	7	44
No – this is not currently in progress	9	56
Don't know	0	0
Total	16	100

Base (all respondents in South West): 16

Respondents were asked how confident they were that commissioning arrangements for the 0-5 Healthy Child Programme would be fully operational in their council from 1 October 2015. All 16 councils said they were very or fairly confident that the arrangements would be fully operational.

Table 161: How confident are you that commissioning arrangements for the 0-5 Healthy Child Programme will be fully operational in your council from 1st October 2015?

	Number	Per cent
Very or fairly confident	16	100
Very confident	14	88
Fairly confident	2	13
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	16	100

Base (all respondents in South West): 16

Respondents were asked how confident they were that their council has appropriate governance arrangements in place to oversee the transition. All 16 councils said they were very or fairly confident that the arrangements were in place.

Table 162: How confident are you that your council has appropriate governance arrangements in place to oversee the transition?

	Number	Per cent
Very or fairly confident	16	100
Very confident	15	94
Fairly confident	1	6
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	16	100

Base (all respondents in South West): 16

Respondents were asked if their Health and Wellbeing board had discussed the transfer. Fifty six per cent (nine councils) said they had discussed the transfer. Of the seven whose boards had not discussed the transfer, two said the discussion was scheduled for a future meeting. The ROG identified that local authorities have different reporting structures in place and that this may account for the range of responses to the question about if the HWB had discussed the transfer and that in some cases the question may not be applicable.

Table 163: Has your Health and Wellbeing Board discussed the transfer?

	Number	Per cent
Yes	9	56
No – but this is scheduled for a future meeting	2	13
No – this discussion is not currently scheduled	5	31
Don't know	0	0
Total	16	100

Base (all respondents in South West): 16

Respondents were asked to indicate which, if any, people or groups they would share their self-assessment with. All councils said their self-assessment would be shared with the director of public health, the director of children's services.

Table 164: Please indicate which, if any, of the following people and groups you will share this self-assessment with:

	Number	Per cent
Director of public health	16	100
Director of children's services	16	100
Total	16	100
Lead member children's services	10	63
Portfolio holder for health	8	50
Health and wellbeing board	5	31
Relevant scrutiny chair	5	31
None of the above	0	0
Don't know	0	0

Note: percentages total to more than 100 per cent, since respondents could select more than one person or group.

Respondents were asked to what extent their council had worked with NHS England (previously called Area Teams), as part of commissioning discussions, to agree

commissioning intentions for existing contract(s) that were transferring over to their council. All but one respondent (15 councils) said that they had done so to a great or moderate extent.

The ROG noted that the recent re-organisation of NHS England and the subsequent reduction in commissioning capacity disrupted contract planning arrangements. However, this is now improving with formal meetings scheduled.

Table 165: As part of commissioning discussions, to what extent has your council worked with NHS England (previously called Area Teams) to agree commissioning intentions for existing contract(s) that are transferring over to your council?

	Number	Per cent
To a great or moderate extent	15	94
To a great extent	10	63
To a moderate extent	5	31
To a small extent	1	6
Not at all	0	0
Don't know	0	0
Total	16	100

Base (all respondents in South West): 16

Respondents were asked to indicate which option for the transfer of contracts from NHS England to councils for contracts that expired at 31 March 2015 their council had taken. The highest number (81 per cent / 13 councils) stated that they would novate contract(s) from NHS England to their council.

Table 166: Which of the following has your council opted to do?

	Number	Per cent
Novate contract(s) from NHS England to your council	13	81
Put in place two similar but separate 6 month contract(s) with the provider. (This option includes one contract for April to September 2015 between NHS England and the provider and another for October 2015 to March 2016 between the local authority and the provider)	2	13
Not applicable	1	6
Don't know	0	0
Total	16	100

Base (all respondents in South West): 16

Respondents were asked if any of the NHS England contracts that required transferring to their council ran beyond 30 September 2015. Seventy five per cent (12 councils) said that contracts ran beyond 30 September 2015.

Table 167: Do any of the NHS England contracts that require transferring to your council run beyond 30 September 2015?

	Number	Per cent
Yes	12	75
No	4	25
Don't know	0	0
Total	16	100

Base: (all respondents in South West): 16

Those respondents who specified that they did have contracts that ran beyond 30 September 2015 were then asked if their council intended in principle to accept novation of these contracts from NHS England to local authority control with effect from 1 October 2015. All 12 of those respondent said that they intended to accept novation.

Table 168: Does your council intend, in principle, to accept novation of these contracts from NHS England to local authority control with effect from 1 October 2015?

	Number	Per cent
Yes, we intend to accept novation	12	100
No, we don't intend to accept novation	0	0
Don't know	0	0
Total	12	100

Base (all respondents in South West who had contracts that ran beyond 30 September 2015): 12

Respondents were asked if their council had communicated its intended approach to contract transition to the current children's 0-5 years public health service provider(s). Eighty eight per cent (14 councils) said they had done so. The ROG noted that NHS England and councils have discussed the transfer with providers and that stability has been identified as a priority.

Table 169: Has your council communicated its intended approach to contract transition to the current children's 0-5 years public health service provider(s)?

	Number	Per cent
Yes	14	88
No – but plans for this are being developed	1	6
No- plans for this have not yet been developed	1	6
Don't know	0	0
Total	16	100

Base (all respondents in South West): 16

Respondents were asked if their council had put plans in place for minimum standardised a) data collection and b) reporting requirements that support the effective commissioning of children's 0-5 years public health services. Sixty three per cent of respondents (10 councils) said that they had put plans in place for minimum standardised data collection, and all of the remaining six said that plans were in development. Fifty six per cent of respondents (nine councils) had put plans in place for reporting requirements that support the effective commissioning of children's 0-5 years public health services, and all seven remaining councils said that plans were in development.

Table 170: Has your council put plans in place for minimum standardised a) data collection and b) reporting requirements that support the effective commissioning of children's 0-5 years public health services?

	g) data collection		b) reporting requirements	
	Number	Per cent	Number	Per cent
Yes	10	63	9	56
No – but plans are in development	6	38	7	44
No – plans for this have not yet been developed	0	0	0	0
Don't know	0	0	0	0
Total	16	100	16	100

Base (all respondents in South West): 16

Respondents were asked how confident they were that the provider(s) from which their council will commission services are taking steps to:

- m) Improve their local management of child health information, making use of Child Health Information Systems (CHIS) and other IT systems where appropriate.
- n) Achieve compliance with the national Maternity and Children's Dataset in order to be able to submit a standard set of data to the Health and Social Care Information Centre from where national and local benchmarked reporting of Key Performance Indicators will flow in the longer term.

Seventy five per cent (12 councils) were either very or fairly confident that the provider(s) are taking steps to improve their local management of child health information, making use of CHIS and other IT systems where appropriate. Forty four per cent (7 councils) were also either very or fairly confident that the provider(s) are taking steps to achieve compliance. However, three councils were either not very or not at all confident of improvement or compliance. Six of the councils said they did not know how confident they could be that provider(s) are taking steps to achieve compliance.

The ROG felt that nationally the quality and capability of Child Health Information System (CHIS) is poor and variable and its improvement should be a national priority. Local authorities have little influence on system improvement and feedback suggested that local authority public health teams should be involved in the development of CHIS services.

The ROG raised a number of specific issues relating to data and information - in particular, the delays in the agreement of the final data specification for the national maternity and children's data set specifically relating to the two year check which has had an impact on local preparations. Further clarity about whether the Personal Child Health Record (Redbook) will be updated to gather the Ages and Stages Questionnaire (ASQ) scores or if it will be the responsibility of providers is needed.

Table 171: How confident are you that the provider(s) from which your council will commission services are taking steps to: a) Improve their local management of child health information systems (CHIS) and other IT systems where appropriate b) Achieve compliance with the national Maternity and Children’s Dataset in order to be able to submit a standard set of data to the Health and Social Care Information Centre from where national and local benchmarked reporting of Key Performance Indicators will flow in the longer term?

	m) Improve CHIS and IT systems		n) Achieve compliance	
	Number	Per cent	Number	Per cent
Very or fairly confident	12	75	7	44
Very confident	4	25	4	25
Fairly confident	8	50	3	19
Not very confident	2	13	2	13
Not at all confident	1	6	1	6
Don’t know	1	6	6	38
Total	16	100	16	100

Base (all respondents in South West): 16

Respondents were asked how confident they were that existing contract(s) include the five universal checks and the related children’s 0-5 year’s public health outcomes. All 16 councils were either very or fairly confident

Whilst local providers meet with Child Health Information personnel on a regular basis the ROG raised that, most Health Visiting services are not provided by the same provider as Child Health Information Services, thus restricting influence over local management.

Table 172: How confident are you that existing contract(s) include the five mandated universal checks and the related children’s 0-5 year’s public health outcomes?

	Number	Per cent
Very or fairly confident	16	100
Very confident	16	100
Fairly confident	0	0
Not very confident	0	0
Not at all confident	0	0
Don’t know	0	0
Total	16	100

Base (all respondents in South West): 16

Respondents were asked how confident they were that baseline data about their resident population for the five mandated universal checks was being shared with them prior to 1 October 2015, against which council performance could be measured in the future. Eighty eight per cent (14 councils) were either very or fairly confident. The ROG highlighted that the two councils that were not very confident have since been supported to access this information from NHS England.

Table 173: How confident are you that baseline data about your resident population for the five mandated universal checks is being shared with you prior to 1 October 2015, against which council performance can be measured in the future?

	Number	Per cent
Very or fairly confident	14	88
Very confident	7	44
Fairly confident	7	44
Not very confident	2	13
Not at all confident	0	0
Don't know	0	0
Total	16	100

Base (all respondents South West): 16

Respondents were asked how they would rate the usefulness of the information that they have received about the transfer. All councils rated the information that they had received as very or fairly useful.

Table 174: How would you rate the usefulness of the information you have received about the transfer?

	Number	Per cent
Very or fairly useful	16	100
Very useful	9	56
Fairly useful	7	44
Not very useful	0	0
Not at all useful	0	0
Don't know	0	0
Total	16	100

Base (all respondents in South West): 16

Respondents were asked to identify which communication routes they normally used to receive information and which they found useful. The highest number of respondents (88 per cent / 14 councils) received information through bulletins from the professional associations. All but one respondent (15 councils) also found bulletins from the professional associations useful.

Table 175: Which of the following communication routes do you normally a) receive information through b) find useful?

	Receive information through		Find useful?	
	Number	Per cent	Number	Per cent
Total	16	100	16	100
Bulletins from the professional associations	14	88	15	94
LGA website	13	81	14	88
Regional oversight groups	10	63	9	56
LGA bulletins	9	56	8	50
Department of Health website	9	56	10	63
None of the above	0	0	0	0
Don't know	0	0	0	0

Note: percentages total to more than 100 per cent, since respondents could select more than one communication route.

The ROG has identified the following next steps:

- The ROG has agreed to highlight the issues identified in this report to the South West network for Directors of Public Health and the national lead agencies (Department of Health/ PHE/ LGA).
- PHE will work with NHS England to calculate the number of children who would be affected by changing from registered to resident population in each council across the region and review the implications of this. However, a nationally proposed methodology is preferred.
- Directors of Public Health in the region are funding sector- led improvement work for 0-5 public health services through the development of Peer Support, Networks and Communities of Practice.
- NHS England is supporting those councils that have identified concerns around the transfer and meetings have been established or are scheduled, where capacity allows.
- NHS England will discuss individual council requirements with regards to legacy documentation, although a national format is preferred.

Results tables for Yorkshire and Humber

Respondents were asked how confident they were that the arrangements for managing the transition in their locality were clear and achievable. All councils were either very or fairly confident that this was the case. The Regional Oversight Group (ROG) noted that there were no significant issues in the region and where issues were raised they were being dealt with locally.

Table 176: How confident are you that the arrangements for managing the transition in your locality are clear and achievable?

	Number	Per cent
Very or fairly confident	15	100
Very confident	10	67
Fairly confident	5	33
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	15	100

Base (all respondents in Yorkshire and Humber): 15

Respondents were asked to what extent they were currently working with a) NHS England (formerly known as Area Teams) and b) their provider(s) to ensure commissioning arrangements for the 0-5 Healthy Child Programme will be fully operational in their council from 1st October 2015. All councils were working to a great or moderate extent with NHS England and all councils were working to a great or moderate extent with providers.

Table 177: To what extent are you currently working with a) NHS England (formerly known as Area Teams) and b) your provider(s) to ensure commissioning arrangements for the 0-5 Healthy Child Programme will be fully operational in your council from 1st October 2015

	o) NHS England		p) Your provider(s)	
	Number	Per cent	Number	Per cent
To a great or moderate extent	15	100	15	100
To a great extent	11	73	12	80
To a moderate extent	4	27	3	20
To a small extent	0	0	0	0
Not at all	0	0	0	0
Don't know	0	0	0	0

Base (all respondents in Yorkshire and Humber): 15

Respondents were asked to what extent a) NHS England and b) their provider(s) were working with them to produce and share legacy and handover documents. Eighty per cent (12 councils) were working to a great or moderate extent with NHS England and seventy-three per cent (11 councils) were working to a great or moderate extent with providers.

Table 178: To what extent are a) NHS England and b) your provider(s) working with you to produce and share legacy handover documents?

	o) NHS England		p) Your provider(s)	
	Number	Per cent	Number	Per cent
To a great or moderate extent	12	80	11	73
To a great extent	5	33	4	27
To a moderate extent	7	47	7	47
To a small extent	2	13	2	13
Not at all	0	0	0	0
Don't know	1	7	2	13 ⁸

Base (all respondents in Yorkshire and Humber): 15

Respondents were asked how confident they were that the provider(s) from which they will commission 0-5 public health services will be able to discharge their functions to safeguard and promote the welfare of children. All councils were either very or fairly confident.

Table 179: How confident are you that the provider(s) from which you will commission 0-5 public health services will be able to discharge their functions to safeguard and promote the welfare of children?

	Number	Per cent
Very or fairly confident	15	100
Very confident	10	67
Fairly confident	5	33
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	15	100

Base (all respondents in Yorkshire and Humber): 15

⁸ Whilst the individual answer options displayed in Table 1 appear to sum to 101 per cent, this is due to the fact the figures in the table have been rounded to the nearest whole number. Please note that this may also occur in other parts of the report.

Respondents were asked how confident they were that their council has all the named individuals with responsibility for safeguarding children, including designated professionals and senior leads in place at Local Safeguarding Children Board level. All councils were either very or fairly confident.

Table 180: How confident are you that your council has all the named individuals with responsibility for safeguarding children, including designated professionals and senior leads in place at Local Safeguarding Children Board level?

	Number	Per cent
Very or fairly confident	15	100
Very confident	14	93
Fairly confident	1	7
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	15	100

Base (all respondents in Yorkshire and Humber): 15

Respondents were asked if they had a **funding** agreement in place with their neighbouring councils which covers their resident population who are registered out of area. One of the 15 councils of the said they did have a funding agreement in place, but of the remaining councils, nine said this was in progress.

The ROG noted that out of area registered patients is an issue but is being addressed by the region's Directors of Public Health who are developing a Memorandum of Understanding (MoU).

Table 181: Do you have a funding agreement in place with your neighbouring authority(ies) which covers your resident population who are registered out of area?

	Number	Per cent
Yes	1	7
No – but this is in progress	9	60
No – this is not currently in progress	5	33
Don't know	0	0
Total	15	100

Base (all respondents in Yorkshire and Humber): 15

Respondents were asked if they had a **performance monitoring** agreement in place with their neighbouring local councils which covers their resident population who are registered out of area. One of the 15 councils said they did have a performance monitoring agreement in place, but four (27 per cent) said this was in progress).

Table 182: Do you have a performance monitoring agreement in place with your neighbouring authority(ies) which covers your resident population who are registered out of area?

	Number	Per cent
Yes	1	7
No – but this is in progress	4	27
No – this is not currently in progress	9	60
Don't know	1	7
Total	15	100

Base (all respondents in Yorkshire and Humber): 15

Respondents were asked how confident they were that commissioning arrangements for the 0-5 Healthy Child Programme would be fully operational in their council from 1 October 2015. All councils said they were very or fairly confident that the arrangements would be fully operational.

Table 183: How confident are you that commissioning arrangements for the 0-5 Healthy Child Programme will be fully operational in your council from 1st October 2015?

	Number	Per cent
Very or fairly confident	15	100
Very confident	11	73
Fairly confident	4	27
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	15	100

Base (all respondents in Yorkshire and Humber): 15

Respondents were asked how confident they were that their council has appropriate governance arrangements in place to oversee the transition. All councils said they were very or fairly confident that the arrangements were in place.

Table 184: How confident are you that your council has appropriate governance arrangements in place to oversee the transition?

	Number	Per cent
Very or fairly confident	15	100
Very confident	13	87
Fairly confident	2	13
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	15	100

Base (all respondents in Yorkshire and Humber): 15

Respondents were asked if their Health and Wellbeing board had discussed the transfer. Twenty-seven per cent (four councils) said they had discussed the transfer but seven councils (47 per cent) said this was scheduled for a future meeting.

Table 185: Has your Health and Wellbeing Board discussed the transfer?

	Number	Per cent
Yes	4	27
No – but this is scheduled for a future meeting	7	47
No – this discussion is not currently scheduled	4	27
Don't know	0	0
Total	15	100

Base (all respondents in Yorkshire and Humber): 15

Respondents were asked to indicate which, if any, people or groups they would share their self-assessment with. All councils stated that they would share the self-assessment with the director of children’s services and all but one (14 councils) stated they would share the self-assessment with the director of public health.

The ROG highlighted that the low response rate given to the question about if the self-assessment would be shared with the Health and Wellbeing Board (HWB) could be seen as a reflection of the different ways HWBs operate.

Table 186: Please indicate which, if any, of the following people and groups you will share this self-assessment with:

	Number	Per cent
Director of children’s services	15	100
Director of public health	14	93
Lead member children’s services	10	67
Portfolio holder for health	9	60
Health and wellbeing board	7	47
Relevant scrutiny chair	7	47
None of the above	0	0
Don’t know	0	0

Note: percentages total to more than 100 per cent, since respondents could select more than one person or group.

Respondents were asked to what extent their council had worked with NHS England (previously called Area Teams), as part of commissioning discussions, to agree commissioning intentions for existing contract(s) that were transferring over to their council. All councils said that they had done so to a great or moderate extent.

Table 187: As part of commissioning discussions, to what extent has your council worked with NHS England (previously called Area Teams) to agree commissioning intentions for existing contract(s) that are transferring over to your council?

	Number	Per cent
To a great or moderate extent	15	100
To a great extent	10	67
To a moderate extent	5	33
To a small extent	0	0
Not at all	0	0
Don’t know	0	0
Total	15	100

Base (all respondents in Yorkshire and Humber): 15

Respondents were asked to indicate which option for the transfer of contracts from NHS England to councils for contracts that expired at 31 March 2015 their council had taken. All but one respondent cent (14 councils) said they would novate contract(s) from NHS England to their council.

Table 188: Which of the following has your council opted to do?		
	Number	Per cent
Novate contract(s) from NHS England to your council	14	93
Put in place two similar but separate 6 month contract(s) with the provider. (This option includes one contract for April to September 2015 between NHS England and the provider and another for October 2015 to March 2016 between the local authority and the provider)	1	7
Not applicable	0	0
Don't know	0	0
Total	15	100

Base (all respondents in Yorkshire and Humber): 15

Respondents were asked if any of the NHS England contracts that required transferring to their council ran beyond 30 September 2015. Fifty-three per cent (eight councils) said that contracts ran beyond 30 September 2015.

Table 189: Do any of the NHS England contracts that require transferring to your council run beyond 30 September 2015?		
	Number	Per cent
Yes	8	53
No	7	47
Don't know	0	0
Total	15	100

Base: (all respondents in Yorkshire and Humber): 15

Those respondents who specified that they did have contracts that ran beyond 30 September 2015 were then asked if their council intended in principle to accept novation of these contracts from NHS England to local authority control with effect from 1 October 2015. Of those respondents, all eight said that they intended to accept novation.

Table 190: Does your council intend, in principle, to accept novation of these contracts from NHS England to local authority control with effect from 1 October 2015?		
	Number	Per cent
Yes, we intend to accept novation	8	100
No, we don't intend to accept novation	0	0
Don't know	0	0
Total	8	100

Base (all respondents in Yorkshire and Humber who had contracts that ran beyond 30 September 2015):

Respondents were asked if their council had communicated its intended approach to contract transition to the current children's 0-5 years public health service provider(s), all said they had done so.

Table 191: Has your council communicated its intended approach to contract transition to the current children's 0-5 years public health service provider(s)?		
	Number	Per cent
Yes	15	100
No – but plans for this are being developed	0	0
No- plans for this have not yet been developed	0	0
Don't know	0	0
Total	15	100

Base (all respondents in Yorkshire and Humber): 15

Respondents were asked if their council had put plans in place for minimum standardised a) data collection and b) reporting requirements that support the effective commissioning of children's 0-5 years public health services. Forty per cent of respondents (six councils) said that they had put plans in place for minimum standardised data collection, but all but one of the remaining councils said plans were in development. Forty per cent of respondents (six councils) had put plans in place for reporting requirements that support the effective commissioning of children's 0-5 years public health services, but seven of the remaining councils said plans were in development.

Table 192: Has your council put plans in place for minimum standardised a) data collection and b) reporting requirements that support the effective commissioning of children's 0-5 years public health services?				
	h) data collection		b) reporting requirements	
	Number	Per cent	Number	Per cent
Yes	6	40	6	40
No – but plans are in development	8	53	7	47
No – plans for this have not yet been developed	1	7	1	7
Don't know	0	0	1	7
Total	15	100	15	100

Base (all respondents in Yorkshire and Humber): 15

Respondents were asked how confident they were that the provider(s) from which their council will commission services are taking steps to:

- o) Improve their local management of child health information, making use of Child Health Information Systems (CHIS) and other IT systems where appropriate.
- p) Achieve compliance with the national Maternity and Children's Dataset in order to be able to submit a standard set of data to the Health and Social Care Information Centre from where national and local benchmarked reporting of Key Performance Indicators will flow in the longer term.

Sixty seven per cent (10 councils) were either very or fairly confident that the provider(s) are taking steps to improve their local management of child health information, making use of CHIS and other IT systems where appropriate. Seventy three per cent (11 councils) were either very or fairly confident that the provider(s) are taking steps to achieve compliance.

Table 193: How confident are you that the provider(s) from which your council will commission services are taking steps to: a) Improve their local management of child health information systems (CHIS) and other IT systems where appropriate b) Achieve compliance with the national Maternity and Children's Dataset in order to be able to submit a standard set of data to the Health and Social Care Information Centre from where national and local benchmarked reporting of Key Performance Indicators will flow in the longer term?

	o) Improve CHIS and IT systems		p) Achieve compliance	
	Number	Per cent	Number	Per cent
Very or fairly confident	10	67	11	73
Very confident	1	7	1	7
Fairly confident	9	60	10	67
Not very confident	1	7	1	7
Not at all confident	1	7	1	7
Don't know	3	20	2	13
Total	15	100	15	100

Base (all respondents in Yorkshire and Humber): 15

Respondents were asked how confident they were that existing contract(s) include the five universal checks and the related children's 0-5 year's public health outcomes. Eighty seven per cent (13 councils) were either very or fairly confident.

Table 194: How confident are you that existing contract(s) include the five mandated universal checks and the related children's 0-5 year's public health outcomes?

	Number	Per cent
Very or fairly confident	13	87
Very confident	10	67
Fairly confident	3	20
Not very confident	1	7
Not at all confident	0	0
Don't know	1	7
Total	15	100

Base (all respondents Yorkshire and Humber): 15

Respondents were asked how confident they were that baseline data about their resident population for the five mandated universal checks was being shared with them prior to 1 October 2015, against which council performance could be measured in the future. Eighty per cent (12 councils) were either very or fairly confident.

Table 195: How confident are you that baseline data about your resident population for the five mandated universal checks is being shared with you prior to 1 October 2015, against which council performance can be measured in the future?

	Number	Per cent
Very or fairly confident	12	80
Very confident	6	40
Fairly confident	6	40
Not very confident	2	13
Not at all confident	0	0
Don't know	1	7
Total	15	100

Base (all respondents in Yorkshire and Humber): 15

Respondents were asked how they would rate the usefulness of the information that they have received about the transfer. All respondents rated the information that they had received as very or fairly useful.

Table 196: How would you rate the usefulness of the information you have received about the transfer?

	Number	Per cent
Very or fairly useful	15	100
Very useful	5	33
Fairly useful	10	67
Not very useful	0	0
Not at all useful	0	0
Don't know	0	0
Total	15	100

Base (all respondents in Yorkshire and Humber): 15

Respondents were asked to identify which communication routes they normally used to receive information and which they found useful. The highest number of respondents (93 per cent / 14 councils) received information through LGA bulletins and the Department of Health website. Eighty seven per cent (13 councils) found the Department of Health website the useful.

Table 197: Which of the following communication routes do you normally a) receive information through b) find useful?

	Receive information through		Find useful?	
	Number	Per cent	Number	Per cent
LGA bulletins	14	93	12	80
Department of Health website	14	93	13	87
Bulletins from the professional associations	11	73	10	67
LGA website	9	60	9	60
Regional oversight groups	9	60	7	47
None of the above	0	0	0	0
Don't know	0	0	0	0

Note: percentages total to more than 100 per cent, since respondents could select more than one communication route.

Results tables for West Midlands

The Regional Oversight Group (ROG) highlighted that the general picture was a positive one. Where issues were identified PHE was already aware of these and actively working on solutions in partnership with NHS England, Directors of Public Health and local transition leads. The results showed that in a few areas there are ongoing discussions around the level of funding allocations, associated costs or the level of need relative to funding for the area. Clarity about these issues is being sought and discussions are taking place locally.

Respondents were asked how confident they were that the arrangements for managing the transition in their locality were clear and achievable. All but one of the 14 councils were either very or fairly confident that this was the case.

There was only one council who reported not feeling confident about their plans to manage the transfer because of the reduction in support from NHS England following its restructure and because of ongoing issues relating to finances and contracting. In response PHE has discussed what further support is needed by the council and NHS England and discussions about finance and contracts are continuing locally.

Table 198: How confident are you that the arrangements for managing the transition in your locality are clear and achievable?

	Number	Per cent
Very or fairly confident	13	93
Very confident	8	57
Fairly confident	5	36
Not very confident	1	7
Not at all confident	0	0
Don't know	0	0
Total	14	100

Base (all respondents in West Midlands): 14

Respondents were asked to what extent they were currently working with a) NHS England (formerly known as Area Teams) and b) their provider(s) to ensure commissioning arrangements for the 0-5 Healthy Child Programme will be fully operational in their council from 1st October 2015. Seventy one per cent (10 councils) were working to a great or moderate extent with NHS England and 71 per cent (10 councils) were working to a great or moderate extent with providers.

Table 199: To what extent are you currently working with a) NHS England (formerly known as Area Teams) and b) your provider(s) to ensure commissioning arrangements for the 0-5 Healthy Child Programme will be fully operational in your council from 1st October 2015

	q) NHS England		r) Your provider(s)	
	Number	Per cent	Number	Per cent
To a great or moderate extent	10	71	10	71
To a great extent	4	29	4	29
To a moderate extent	0	0	0	0
To a small extent	0	0	0	0
Not at all	0	0	0	0
Don't know	14	100	14	100

Base (all respondents in West Midlands): 14

Respondents were asked to what extent a) NHS England and b) their provider(s) were working with them to produce and share legacy and handover documents. Seventy one per cent (10 councils) were working to a great or moderate extent with NHS England and 71 per cent (10 councils) were working to a great or moderate extent with providers.

The ROG highlighted that the recent restructure and subsequent loss of key NHS England staff during the transition phase poses a risk to delivering a robust handover. NHS England posts are now covering a larger geographical footprint and some councils have received a reduced amount of commissioning support as a result. Due diligence and legacy was seen as a particular concern for some localities. As a result Public Health England is working with NHS England and local transition leads in councils to ensure there is a good handover arrangement in place.

Table 200: To what extent are a) NHS England and b) your provider(s) working with you to produce and share legacy handover documents?

	q) NHS England		r) Your provider(s)	
	Number	Per cent	Number	Per cent
To a great or moderate extent	10	71	10	71
To a great extent	1	7	0	0
To a moderate extent	9	64	10	71
To a small extent	2	14	3	21
Not at all	2	14	1	7
Don't know	0	0	0	0

Base (all respondents in West Midlands): 14

Respondents were asked how confident they were that the provider(s) from which they will commission 0-5 public health services will be able to discharge their functions to safeguard and promote the welfare of children. All councils were either very or fairly confident.

Table 201: How confident are you that the provider(s) from which you will commission 0-5 public health services will be able to discharge their functions to safeguard and promote the welfare of children?

	Number	Per cent
Very or fairly confident	14	100
Very confident	5	36
Fairly confident	9	64
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	14	100

Base (all respondents in West Midlands): 14

Respondents were asked how confident they were that their council has all the named individuals with responsibility for safeguarding children, including designated professionals and senior leads in place at Local Safeguarding Children Board level. All councils were either very or fairly confident.

Table 202: How confident are you that your council has all the named individuals with responsibility for safeguarding children, including designated professionals and senior leads in place at Local Safeguarding Children Board level?

	Number	Per cent
Very or fairly confident	14	100
Very confident	11	79
Fairly confident	3	21
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	14	100

Base (all respondents in West Midlands): 14

Respondents were asked if they had a **funding** agreement in place with their neighbouring local authority(ies) which covers their resident population who are registered out of area. All but one council (13 councils) said they did not have a funding agreement in place, but six of these said that this was in progress.

This was recognised as a longstanding national issue. Locally, PHE and NHS England are working to clarify the situation and the region's NHS England oversight group has set up a dedicated task and finish group to develop an action plan for the resident and registered issue. This includes mapping who is doing what and where in the country and learning from this and developing a set of principles and options with associated risks. Alongside this NHS England has mapped the number of children who would be affected and has identified the issues relating to providers. The ROG highlighted that there is significant misunderstanding of this issue across the NHS system both with providers and wider commissioners and the issue needs national attention.

Table 203: Do you have a funding agreement in place with your neighbouring authority(ies) which covers your resident population who are registered out of area?

	Number	Per cent
Yes	1	7%
No – but this is in progress	6	43%
No – this is not currently in progress	6	43%
Don't know	1	7%
Total	14	100%

Base (all respondents in West Midlands): 14

Respondents were asked if they had a **performance monitoring** agreement in place with their neighbouring council(s) which covers their resident population who are registered out of area. None of the 14 councils had a performance monitoring agreement in place, but four said this was in progress.

Table 204: Do you have a performance monitoring agreement in place with your neighbouring authority(ies) which covers your resident population who are registered out of area?

	Number	Per cent
Yes	0	0
No – but this is in progress	4	29
No – this is not currently in progress	9	64
Don't know	1	7
Total	14	100

Base (all respondents in West Midlands): 14

Respondents were asked how confident they were that commissioning arrangements for the 0-5 Healthy Child Programme would be fully operational in their council from 1 October 2015. All councils said they were very or fairly confident that the arrangements would be fully operational.

Table 205: How confident are you that commissioning arrangements for the 0-5 Healthy Child Programme will be fully operational in your council from 1st October 2015?

	Number	Per cent
Very or fairly confident	14	100
Very confident	8	57
Fairly confident	6	43
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	14	100

Base (all respondents in West Midlands):14

Respondents were asked how confident they were that their council has appropriate governance arrangements in place to oversee the transition. All councils said they were very or fairly confident that the arrangements were in place.

Table 206: How confident are you that your council has appropriate governance arrangements in place to oversee the transition?

	Number	Per cent
Very or fairly confident	14	100
Very confident	10	71
Fairly confident	4	29
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	14	100

Base (all respondents in West Midlands): 14

Respondents were asked if their Health and Wellbeing board had discussed the transfer. A majority (eight councils) had discussed the transfer with their board, and all but one of those who had not done this (five councils) said this was scheduled for a future meeting.

Table 207: Has your Health and Wellbeing Board discussed the transfer?

	Number	Per cent
Yes	8	57
No – but this is scheduled for a future meeting	5	36
No – this discussion is not currently scheduled	1	7
Don't know	0	0
Total	14	100

Base (all respondents in West Midlands): 14

Respondents were asked to indicate which, if any, people or groups they would share their self-assessment with. All councils stated that they would share the self-assessment with the Director of Public Health and the Director of Children's Services.

Table 208: Please indicate which, if any, of the following people and groups you will share this self-assessment with:

	Number	Per cent
Director of public health	14	100
Director of children's services	14	100
Portfolio holder for health	12	86
Lead member children's services	11	79
Relevant scrutiny chair	7	50
Health and wellbeing board	5	36
None of the above	0	0
Don't know	0	0

Note: percentages total to more than 100 per cent, since respondents could select more than one person or group.

Respondents were asked to what extent their council had worked with NHS England (previously called Area Teams), as part of commissioning discussions, to agree commissioning intentions for existing contract(s) that were transferring over to their council. All councils said that they had done so to a great or moderate extent.

Table 209: As part of commissioning discussions, to what extent has your council worked with NHS England (previously called Area Teams) to agree commissioning intentions for existing contract(s) that are transferring over to your council?

	Number	Per cent
To a great or moderate extent	14	100
To a great extent	10	71
To a moderate extent	4	29
To a small extent	0	0
Not at all	0	0
Don't know	0	0
Total	14	100

Base (all respondents in West Midlands): 14

Respondents were asked to indicate which option for the transfer of contracts from NHS England to councils for contracts that expired at 31 March 2015 their council had taken. The highest number (64 per cent / nine councils) stated that they would novate contract(s) from NHS England to their council.

Table 210: Which of the following has your council opted to do?

	Number	Per cent
Novate contract(s) from NHS England to your council	9	64
Put in place two similar but separate 6 month contract(s) with the provider. (This option includes one contract for April to September 2015 between NHS England and the provider and another for October 2015 to March 2016 between the local authority and the provider)	5	36
Not applicable	0	0
Don't know	0	0
Total	14	100

Base (all respondents in West Midlands):14

Respondents were asked if any of the NHS England contracts that required transferring to their council ran beyond 30 September 2015. Fifty-seven per cent (eight councils) said that contracts ran beyond 30 September 2015.

Table 211: Do any of the NHS England contracts that require transferring to your council run beyond 30 September 2015?

	Number	Per cent
Yes	8	57
No	6	43
Don't know	0	0
Total	14	100 ⁹

Base: (all respondents in West Midlands):14

Those respondents who specified that they did have contracts that ran beyond 30 September 2015 were then asked if their council intended in principle to accept novation of these contracts from NHS England to local authority control with effect from 1 October 2015. Of those respondents, 88 per cent (seven councils) said that they intended to accept novation.

⁹ Whilst the individual answer options displayed in Table 1 appear to sum to 101 per cent, this is due to the fact the figures in the table have been rounded to the nearest whole number. Please note that this may also occur in other parts of the report.

The ROG highlighted that PHE and NHS England are in discussion with the council who said they do not intend to accept novation.

Table 212: Does your council intend, in principle, to accept novation of these contracts from NHS England to local authority control with effect from 1 October 2015?

	Number	Per cent
Yes, we intend to accept novation	7	88
No, we don't intend to accept novation	1	13
Don't know	0	0
Total	8	100

Base (all respondents in West Midlands who had contracts that ran beyond 30 September 2015):

Respondents were asked if their council had communicated its intended approach to contract transition to the current children's 0-5 years public health service provider(s). All councils said they had done so.

Table 213: Has your council communicated its intended approach to contract transition to the current children's 0-5 years public health service provider(s)?

	Number	Per cent
Yes	14	100
No – but plans for this are being developed	0	0
No- plans for this have not yet been developed	0	0
Don't know	0	0
Total	14	100

Base (all respondents in West Midlands: 14

Respondents were asked if their council had put plans in place for minimum standardised a) data collection and b) reporting requirements that support the effective commissioning of children's 0-5 years public health services. Eighty six per cent of respondents (12 councils) said that they had put plans in place for minimum standardised data collection and the remaining two councils said that plans were in development. All but one of the 14 councils had put plans in place for reporting requirements that support the effective commissioning of children's 0-5 years public health services and the remaining council said that plans were in development.

Table 214: Has your council put plans in place for minimum standardised a) data collection and b) reporting requirements that support the effective commissioning of children's 0-5 years public health services?

	i) data collection		b) reporting requirements	
	Number	Per cent	Number	Per cent
Yes	12	86	13	93
No – but plans are in development	2	14	1	7
No – plans for this have not yet been developed	0	0	0	0
Don't know	0	0	0	0
Total	14	100	14	100

Base (all respondents in West Midlands): 14

Respondents were asked how confident they were that the provider(s) from which their council will commission services are taking steps to:

- q) Improve their local management of child health information, making use of Child Health Information Systems (CHIS) and other IT systems where appropriate.

- r) Achieve compliance with the national Maternity and Children’s Dataset in order to be able to submit a standard set of data to the Health and Social Care Information Centre from where national and local benchmarked reporting of Key Performance Indicators will flow in the longer term.

Sixty four per cent (nine councils) were fairly confident that the provider(s) are taking steps to improve their local management of child health information, making use of CHIS and other IT systems where appropriate. Forty three per cent (six councils) were fairly confident that the provider(s) are taking steps to achieve compliance.

A number of local issues were reported by councils with concerns over data collection and data quality. In response PHE and NHS England are encouraging local areas to pay rigorous attention to achieving KPIs and maintaining open communications with existing providers to address concerns and risks at an early stage.

PHE and NHS England are working with local colleagues to manage the data, information and supporting IT aspects of the transfer. Ensuring local areas continue to have access to relevant information and data is a priority for the region. One local authority in particular reported they had agreed KPIs and plans for a minimum standardised data collection and the ROG suggested that this may be worth sharing more widely.

Table 215: How confident are you that the provider(s) from which your council will commission services are taking steps to: a) Improve their local management of child health information systems (CHIS) and other IT systems where appropriate b) Achieve compliance with the national Maternity and Children’s Dataset in order to be able to submit a standard set of data to the Health and Social Care Information Centre from where national and local benchmarked reporting of Key Performance Indicators will flow in the longer term?

	q) Improve CHIS and IT systems		r) Achieve compliance	
	Number	Per cent	Number	Per cent
Very or fairly confident	9	64	6	43
Very confident	0	0	0	0
Fairly confident	9	64	6	43
Not very confident	2	14	2	14
Not at all confident	1	7	1	7
Don't know	2	14	5	36
Total	14	100	14	100

Base (all respondents in West Midlands): 14

Respondents were asked how confident they were that existing contract(s) include the five universal checks and the related children’s 0-5 year’s public health outcomes. All councils were very or fairly confident.

Table 216: How confident are you that existing contract(s) include the five mandated universal checks and the related children’s 0-5 year’s public health outcomes?

	Number	Per cent
Very or fairly confident	14	100
Very confident	11	79
Fairly confident	3	21
Not very confident	0	0
Not at all confident	0	0
Don't know	0	0
Total	14	100

Base (all respondents West Midlands): 14

Respondents were asked how confident they were that baseline data about their resident population for the five mandated universal checks was being shared with them prior to 1 October 2015, against which council performance could be measured in the future. All but one of the 14 councils were either very or fairly confident.

Table 217: How confident are you that baseline data about your resident population for the five mandated universal checks is being shared with you prior to 1 October 2015, against which council performance can be measured in the future?

	Number	Per cent
Very or fairly confident	13	93
Very confident	4	29
Fairly confident	9	64
Not very confident	1	7
Not at all confident	0	0
Don't know	0	0
Total	14	100

Base (all respondents West Midlands): 14

Respondents were asked how they would rate the usefulness of the information that they have received about the transfer. All but one respondent (13 councils) rated the information that they had received as very or fairly useful.

Table 218: How would you rate the usefulness of the information you have received about the transfer?

	Number	Per cent
Very or fairly useful	13	93
Very useful	2	14
Fairly useful	11	79
Not very useful	1	7
Not at all useful	0	0
Don't know	0	0
Total	14	100

Base (all respondents in West Midlands):14

Respondents were asked to identify which communication routes they normally used to receive information and which they found useful. The highest number of respondents 93 per cent (13 councils) received information through the Department of Health website and 79 per cent (10 councils) used LGA bulletins and regional oversight groups. Seventy-one per cent (10 councils) found LGA bulletins, regional oversight groups and the Department of Health website the most useful.

Table 219: Which of the following communication routes do you normally a) receive information through b) find useful?

	Receive information through		Find useful?	
	Number	Per cent	Number	Per cent
Department of Health website	13	93	10	71
LGA bulletins	11	79	10	71
Regional oversight groups	11	79	10	71
Bulletins from the professional associations	9	64	7	50
LGA website	7	50	7	50
None of the above	0	0	0	0
Don't know	0	0	0	0

Note: percentages total to more than 100 per cent, since respondents could select more than one communication route.

Local Government Association

Local Government House
Smith Square
London SW1P 3HZ

Telephone 020 7664 3000

Fax 020 7664 3030

Email info@local.gov.uk

www.local.gov.uk

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