

**West Hertfordshire Primary Care Trust and  
East and North Hertfordshire Primary Care Trust**

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24 April 2008

Dear Dr Graves,

**Re: Consultation paper on the future organisation, management and Clinical  
Leadership of Health Visiting and School Health Nursing Services across East &  
North and West Hertfordshire Primary Care Trusts**

Thank you for your response to the above and your broad support for integrated working between Health Visiting and School Health. As you may remember this is the second stage of restructuring Health Visiting and School Health Services to deliver integrated care for families and children, which we commenced last summer.

In your letter the LMC appear to be raising 2 main areas of concern:

- That there has been no input into the consultation from the PBC groups which challenges the point of the Consultation exercise.
- That the proposed structures are not co-terminous with the PBC group areas which will lead to difficulties in proportionate resource budgets.

The paper has been written to consult with affected staff, in line with the PCTs' Human Resource policy, since the proposals alter the line management arrangements of these staff. This period of consultation has now ended, and we are expected to share with staff the feedback we have received and the actions we now plan to take. Staff have been waiting since last summer for this second phase of restructuring the services, and we would need to consider very carefully why we would prolong the uncertainty for them. These services have seen posts lost during the PCTs financial recovery and we need the team arrangements in place in order to effectively use any investment the PBC groups decide.

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Stuart Bloom  
Chair  
West Hertfordshire PCT

Anne Walker  
Chief Executive

Pam Handley  
Chair  
East and North Hertfordshire PCT

To deliver services which meet PBC groups' commissioning requirements we have been seeking ongoing dialogue with each group and with the PBC Leads groups. At the start of our work re-designing these services we wrote to each group requesting an opportunity for discussion, which was responded to positively by 3 groups in E&N Herts. West Herts groups asked that these discussions took place in the PBC leads meeting which we attended, together with the AD for Children's Commissioning, Catherine Pelley. We have also met with one individual practice who commission alone.

Because of the delay in getting PBC discussions regarding these services underway we met with the two PEC chairs to seek their feedback and comments on our proposals before commencing the consultation. Their input helped shape the final document, and a summary paper for GPs was also produced. The consultation papers were then sent to all PBC groups via the PCTs PBC leads and re-sent when there appeared to have been a delay in receipt by West groups. The staff consultation was also raised at both of the PBC leads Provider Services workshops. Some PBC groups include out locality managers in their meetings, and wherever possible these managers have taken the opportunity to raise this for local discussion. Our intention has always been to seek clarification as to whether our plans for managing our services meet the PBC commissioning requirements, whether these are expressed as standards, activity levels or outcomes for children & young people. We continue to request that the PBC groups identify children's leads with whom we can discuss our services, and would welcome your support in this where possible.

Your second point, was concern related to non coterminous structures to the PBC groups.

In considering the delivery of universal services the PCTs face competing tensions of policy generated by the Department for Children's Schools and Families (DCSF) and the Department of Health. The PCTs have a legal duty to cooperate in the delivery of integrated children's services across Hertfordshire and have to manage this in the context of a 2-tier authority, 10 district council boundaries, 38 extended schools consortia, 82 children centres and 11 PBC groups. To be able to do this effectively & ensure services meet the needs of children and families the planning of operational services has had to find a model that fits best to avoid high levels of management costs, and more resources in place for direct patient care.

In our first stage of restructuring Health Visiting and School Health Services and Management, we highlighted this potential issue in our staff consultation paper (July2007) and the options were outlined. This was also shared with PBC groups via PCT/PBC leads. This specifically mentioned the challenges in East and North Herts where there were tensions between working across the boundaries for PBC groups, District Councils and partnerships and the wider children's agenda of extended schools and children's centres. The proposed solution was based on the optimum outcome for delivering an Integrated Children's' service, whilst recognising the importance of maintaining close GP practice links. Catherine Pelley has in the last year presented to both PBC leads and the PEC the work that is needed to meet the children's agenda and has raised the issue of integrated children's services. Overall the view has been supportive of the model to bring services closer to children and families and reduce boundaries created by different staffing groups.

The financial costings for each PBC group have been outlined by the Provider Finance AD as being based on activity based service costs and would be proportioned by practice to each of the PBC groups. Most services are not delivered in standalone PBC area teams and integrating Health Visiting and School Nursing will not pose any different issues.

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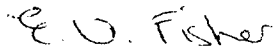
Stuart Bloom  
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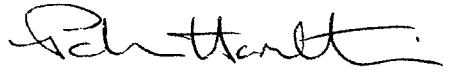
Pam Handley  
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Integrated services as a model has real opportunities to support all children, narrow the gap for those children and families who are not achieving as well as others and also support other practitioners such as GPs in meeting the health needs of vulnerable children. We note your request to stop the process of integration but do feel that this is not possible without impacting on staff, patients and also the PCTs contribution to the wider delivery of the Hertfordshire Children and Young Peoples Plan.

Yours sincerely



Elaine Fisher  
Head of Children's Services  
East & North Herts



Pat Hamilton  
Head of Children's Services  
West Herts



Catherine Pelley  
Assistant Director of Children's commissioning

Stuart Bloom  
Chair  
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