



THE SCOTTISH OFFICE

Department of Health

NHS
MEL(1998)85

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Common Services Agency
NHS in Scotland
Trinity Park House
South Trinity Road
Edinburgh EH5 3SQ

Dear Colleague

INNOVATION FUND FOR CHILDREN'S SERVICES

Summary

1. This MEL provides details of the innovation fund for children's services announced recently by Sam Galbraith, Minister for Health. It invites applications for the development of innovative approaches to service delivery and organisation of child centred health services.

Background

2. The commitment to fund innovative approaches to improve health services for children in Scotland reflects the major themes of the White Paper "Designed to Care", the forthcoming White Paper on Health, and Priorities and Planning Guidance for the NHS in Scotland 1999-2002.

3. The aim of the fund is

- To support the development of child centred health services and strengthen combined and integrated health services in Scotland or support existing services with the same aim.
- To develop child centred seamless care addressing inequalities in health and care using managed clinical networks to impact on the health care of children in Scotland.
- To contribute to implementing the recommendations of the Acute Services Review.
- To develop, where practicable, joint working with Local Authorities as identified in Children's Services Plans.

NHS Management Executive
St. Andrew's House
Edinburgh EH1 3DG
31st December 1998
Telephone 0131-244
Fax 0131-244

December 1998

Addressees

For action:
General Managers,
Health Boards
NHS Trust Chief Executives

For information:
Directors of Public Health
NHS Trust Medical Directors
NHS ME Directors
Directors of Education
Directors of Social Work
General Manager,
Health Education
Board for Scotland
Executive Director
SCPMDE
Organisations listed in Annex C

Enquiries to:

Uriel Jamieson
Health Care Policy Division
Room 277
St Andrew's House
EDINBURGH EH1 3DG

Tel: 0131-244 2392
Fax: 0131-244 3487

4. £2million will be made available in 1999/2000. £4million will be made available in 2000/2001 and £3million will be made available in 2001/2002.

Timetable

5. Applications are now invited from Health Boards for the funding of innovative approaches to the integration of comprehensive children's services or to enable the completion of existing projects. Proposals will be approved in accordance with the defined criteria at **Annex A**. Central funding will be available for up to 3 years with built-in evaluation. There must be a commitment by the Health Board and NHS Trust to continue successful projects when central funding ends.

6. There will be an opportunity to bid for further project funding in year 2. The timetable for that will commence in September 1999.

7. Applications should be forwarded to Uriel Jamieson, Health Care Policy Division, NHS Management Executive, Room 279, St Andrew's House, by 19 February 1999 drawn up in accordance with the template at **Annex B**. Health Boards will be notified by 29 March 1999 whether their application has been successful. Projects not already underway should aim to start as soon as possible thereafter.

Action

Health Board General Managers are invited to submit applications for the funding of innovative projects by 19 February 1999. NHS Trust Chief Executives should bring this letter to the attention of relevant staff as soon as possible given the tight timescale for applications.

Yours sincerely



KEVIN J WOODS
Director of Strategy and Performance Management

CRITERIA FOR APPLICATIONS**AIM**

To develop innovative, combined and integrated child health services

OBJECTIVES

- To underpin the recommendations of “Designed to Care”, the Acute Services Review and the Priorities and Planning Guidance.
- To address inequalities in health and care of children including equity and access to services.
- To develop child centred services.
- To develop seamless care through combined approaches using managed clinical networks as recommended in the Acute Services review. This would not preclude cross boundary working.
- To demonstrate an inter-agency approach to children.

MONITORING

- Each project should have a built-in evaluation process.
- Health Boards should monitor the development and progress of the project including services provision and financial details.
- Health Boards should submit a yearly progress report to the NHSME.
- Health Boards should submit an end of funding report with recommendations for the future.

To be successful schemes/projects MUST

- Have the signed/written support of all the agencies involved.
- Have the agreement of all the agencies involved to continue funding the scheme/project at the end of the support period.
- Be multi-disciplinary.

Preference will be given to schemes/projects which

- Cover social and healthcare needs.

- **Involve more than one agency.**
- **Involve an element of matching funding from the particular agencies which have low administrative costs.**

1. Proposal Title

2. Name of Health Board(s):

3. Contact Name:

Tel

Address

Fax

Is Child Commissioner taking the lead?

4. Aim and description of the proposal

- Details of Project Group
- Details of Monitoring Group
- State what commitment has been made for roll out

5. Justification for its selection – based on Needs Assessment?

6. Timescale for setting-up and implementation, and estimated funding requirements each year up to a maximum of 3 years.

7. Name of NHS Trust(s):

8. Proposal title

9. Justification for its selection including the main issues which will be addressed.

10. Set out details of the proposal (no more than 3 sides of A4 paper).

State the aims

State approach to be adopted

Outline of discussions and agreements with: Health Board/Acute Trust/Community Trust/Local Authority/Education/Social Work/Housing/Consumers/Others

Linkage to existing structures and other initiatives.

Funding requirements.

Monitoring arrangements including financial and service provision.

Evaluation including progress reports, end project evaluation.

State outcome expected.

State commitment for roll out.

Other details which are important to the proposal, not described above.

ANNEX C

Royal College of General Practitioners
Royal College of Surgeons, Edinburgh
Royal College of Physicians, Edinburgh
Royal College of Physicians and Surgeons, Glasgow
Royal College of Nursing, Scottish Board
Royal College of Midwives, Scottish Board
Scottish Association for Community Health Care
Scottish Committee of the Royal College of Paediatrics and Child Health