

Report author: Cath Roff

Tel: 0113 378 3884

## **Report of Director of Adult Social Services**

# Report to Strategy and Resources Scrutiny Board

**Date: 21 March 2016** 

**Subject: Strategic Commissioning of "People" services** 

Are specific electoral Wards affected?  If relevant, name(s) of Ward(s):	☐ Yes	⊠No
Are there implications for equality and diversity and cohesion and integration?	☐ Yes	⊠ No
Is the decision eligible for Call-In?	☐ Yes	⊠ No
Does the report contain confidential or exempt information?  If relevant, Access to Information Procedure Rule number:	☐ Yes	⊠ No

## **Summary of main issues**

- 1. This report informs Scrutiny Board of the work of an internal review and its findings of the strategic commissioning function that covers adult social care, public health and children's services.
- 2. The report invites Scrutiny Board members to comment on the findings of the review and support its recommendations.

#### Recommendations

- **3.** Scrutiny Board is asked to note the work that has been undertaken and support the review recommendations:
  - i. To establish a Corporate Strategic Commissioning Group and for it to be chaired by a Director
  - ii. That the Corporate Strategic Commissioning Group set up a crossdirectorate Operational Group to be chaired by a Head of Commissioning.

#### 1 Purpose of this report

- 1.1 The purpose of this report is to inform Scrutiny Board members of an internal review of the Council's approach to the strategic commissioning of "people" services.
- 1.2 The report invites Scrutiny Board members to comment on the findings of the review and support the recommendations.

### 2 Background information

- 2.1 CLT received a report in May 2015 which set out the scope and methodology for undertaking a review of the Council's approach to integrated "people" commissioning. That report defined commissioning as the Local Authority's cyclical activity to assess the needs of its local population for care and support services that will be arranged by the Authority, then designing, delivering, monitoring and evaluating those services to ensure appropriate outcomes. It acknowledged that effective commissioning cannot be achieved in isolation and will be best delivered in close collaboration with others.
- 2.2 Integrated commissioning means different things to different people but for the purposes of this paper it is described from the perspective of the citizen. *National Voices*, a coalition of user-led organisations, created a single common cross-system of definition of integrated care which is:
  - "I can plan my care with people who work together to understand me and my carer(s), allow me control, and bring together services to achieve the outcomes important to me"
- 2.3 "People" commissioning covers a wider range of services than just care and support but the essence of the *National Voices* definition is about the key focus on outcomes for the individual. By focusing on citizenship, health and wellbeing and achieving good outcomes with people using evidence, local knowledge, skills and resources to best effect. This means working in partnership across the health and local government system to promote health and wellbeing and prevent, as far as is possible, the need for more intensive types of support.
- 2.4 Every person using services deserves the highest quality care and support, and the maximum opportunity to influence how that support is arranged and managed. Effective commissioning plays a central role in driving up quality, enabling people to meaningfully direct their own care, facilitating integrated service delivery, and making the most effective use of the available resources.

#### 3 Main issues

#### 3.1 The project mandate

The Corporate Leadership Team (CLT) commissioned a review of all the functions of the Council that undertake the commissioning of services that provide care and support including housing-related support. This was with the aim of:

 improving outcomes for service users by having more joined up services that better respond to their individual needs

- developing a more consistent approach to commissioning services across the Council
- Responding appropriately to changes in national legislation and policy relating to the Care Act 2014 and to the Children and Families Act 2014
- More effectively responding to Council priorities which cannot be addressed by commissioning from a single directorate
- Identifying opportunities to achieve greater alignment of commissioning activities with external partners, and in particular the NHS
- Achieving efficiencies by taking a more co-ordinated approach to market development and the way we manage multiple contracts with single providers
- Achieving savings by reducing the proportion of investment required by the Council to commission and contract manage services
- 3.2 The services within the scope of this review are all commissioning staff in Adult Social Care, Children's services and the Strategy and Commissioning Service within Public Health. What was out of scope are those commissioning activities undertaken by the wider Public Health function: services specifically commissioned for children and young people such as health visiting, health protection, early diagnosis interventions, older people, sexual health, mental wellbeing and a range of healthy lifestyle services including smoking cessation and weight management.
- 3.3 It should be noted that Children's Services' Commissioning has at least as big a role around education and other non-care activities. For example, Children's Services Commissioning has a commissioning role around the high needs block of the Dedicated Schools Grant which by a number or routes is commissioned to school and other education providers.
- 3.4 The other difference from other commissioning teams is that a substantial proportion of the budget for children in the city is mediated by the governance of schools themselves. Schools can act as independent commissioning agents for specific school based provision or act in partnership with others to commission as clusters or area groups. In both cases, Children's Commissioning act in an advisory role and sometimes in addition provided a traded support service. In a number of instances they act to set out a city wide framework for commissioning where spending is through school budgets only (i.e. no financial implication for local authority), examples are for instance offsite learning framework for schools, school milk, PE equipment testing and suchlike.
- 3.5 It should also be noted that, for Adult Social Care, there is a very important relationship between the work of the contract compliance section of the commissioning function and safeguarding. The majority of adult social care services are now commissioned from the independent sector. Some services such as home care, residential and nursing care are also inspected and regulated by the Care Quality Commission (CQC). Close working relationships between CQC, social work and contracts are vital to ensure a 360 degree view on the quality of care.

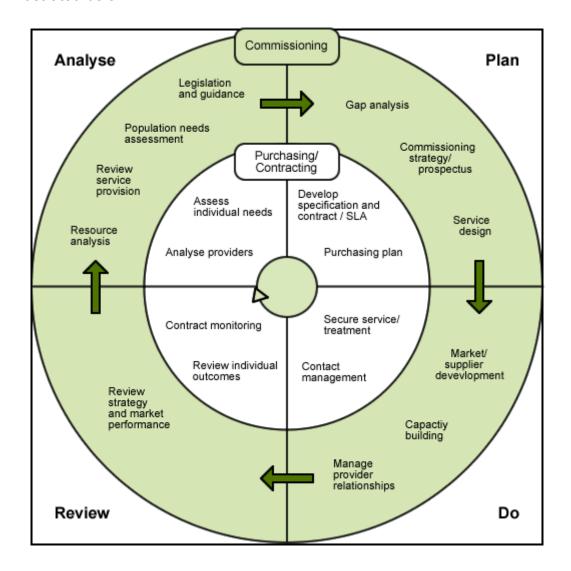
### 3.6 Methodology

There were three workshops held last year with commissioning staff. They focused on the themes of:

- Contracting
- Safeguarding
- Joint work with the NHS

Commissioning staff were encouraged to identify what was working well and where they felt improvements could be made. The content of each workshop was written up and circulated back to staff. These workshops were a helpful start to stimulating discussion and sharing different approaches.

3.7 However, as has been outlined in 2.1 above, commissioning is a cyclical activity as illustrated below:



- 3.8 In order to give structure and to provide an evidence base for decisions, an audit (see Appendix One) of current practice against each of the component parts of the commissioning cycle as illustrated above was undertaken looking at:
  - What is current practice now/ how well is it integrated?

- What are the gaps/ areas for development?
- Ideas for closing the gaps/ strengthening an integrated approach
- 3.9 The audit was undertaken by each of the three directorates then the results were shared and debated together in two cross-directorate workshops to generate options and recommendations for CLT to consider.
- 3.10 In under-taking the audit, national best practice was also considered including:
  - Commissioning for Better Outcomes: this is the recently published national standards for excellence in adult social care commissioning produced by the Health Services Management Centre and institute of Local Government Studies at the University of Birmingham and endorsed by the Department of Health, ADASS, LGA and Think Local Act Personal
  - Securing better health for children and young people through world class commissioning, Department of Health, 2010
  - Good Commissioning: Principles and Practice, Commissioning Support Programme, Department for Education, 2010
  - Commissioning of public health services for children, Department of Health, 2014
  - The good practice and methodology of the former Supporting People programme including the Quality Assessment framework and focus on safeguarding

## 3.11 Workshop Findings – general comments

The challenge for the review was defining the optimum model for the council to achieve the stated objectives set out in 3.1.It is important to note that any integration also causes fragmentation elsewhere as new lines of functioning are drawn up between services. The impact of this needed to be considered.

- 3.12 Increasingly people commissioning is about commissioning for relationships: children's services in particular exemplify the efficacy of this approach. True integrated commissioning looks at the whole system, how citizens move in that system and pass along and between services. A close working relationship with practitioners is vital in this in order to both understand the system and to keep up with its constant changes. The review group also took into consideration the relatively small amount of overlap in services between the different directorates.
- 3.13 Leeds City Council has a strong philosophy of "one council" working and increasingly supports a matrix approach to delivering added value. Within the spirit of this approach, the workshops identified two key opportunities for greater efficiency and effectiveness and made the following recommendations:

# To establish a Corporate Strategic Commissioning Group and for it to be chaired by a Director

This will support a one-Council approach to:

Understand and support alignment of commissioning strategies

- Develop the Council's approach to place-based commissioning
- Identify opportunities to develop cross-directorate approaches, e.g. recommissioning housing-related support, substance misuse etc
- Identify new opportunities for commissioning across directorates that will achieve the same or better outcomes for less money
- Identify opportunities for a category management approach, e.g. for procuring transport
- Have a one council approach where different directorates contract with the same provider .e.g. Care and Repair
- Collaborate on consultation so the same groups do not get multiple approaches from different directorates
- Develop commissioning staff as a job family
- 3.14 It was clear from the workshops that commissioning practice had evolved in different ways in the different directorates and that there is scope to simplify, standardise and share best practice. There was a real openness and willingness to do so amongst commissioning staff. The review group therefore made a second recommendation:

# That the Corporate Strategic Commissioning Group set up a cross-directorate Operational Group to be chaired by a Head of Commissioning.

A key responsibility of the group will be to identify and deliver improvements through simplifying, standardising and sharing where it makes sense to do so.

- 3.15 This model was recommended because it felt it would achieve the best of both worlds: a good strategic overview and opportunity to think about commissioning in a different way without the fragmentation that a structural solution, .i.e. a single commissioning unit would create. There was not found to be a significant overlap in the organisations that each directorate funds and where this is the case it is flagged up through the corporate contracts register. There was already a good example where directorates had collaborated to have a one-Council approach to commissioning a provider, albeit for different services from that provider. There was also concern that a single commissioning structure would fragment the key relationship between contract monitoring, market management and social workers for the purpose of safeguarding adults.
- 3.16 The rest of this section of the report sets out in more detail the feedback from the workshops, specific findings under each aspect of the commissioning cycle and potential areas for improvement.

### 3.17 "Analyse" – key findings

There was a good knowledge and use made of the Joint Strategic Needs Assessment (JSNA) and Leeds Data Mill. Staff both made a contribution to them

and used them to source evidence for analysing need and framing commissioning intentions. Staff were aware of a wide variety of intelligence both hard and soft. Commissioning teams had varying capacity and skills in analysing data and to a degree were self-taught. Benchmarking was used to understand Leeds' position in terms of both the use of resources and activity in care and support services.

- 3.18 In terms of what could be done better, staff suggested:
  - Pooling information through Sharepoint
  - Taking a cross-Directorate approach to identifying stakeholders and recruit as needed
  - Head of Policy and Intelligence doing a seminar on the basics of how to do analytics
  - More work on value for money bench-marking
- 3.19 Staff recognised the importance of citizens' voice in analysing need and made good use of the variety of fora in the city to do so although there was a concern that the same groups get consulted repeatedly. It was felt that there is a strong commitment in Leeds to consult appropriately and meaningfully with key stakeholders including other public sector partners and the independent sector. Although the city council is strong on consultation, staff felt it was still on a journey of genuine co-production with citizens with emerging good practice.

Staff identified a number of actions to strengthen this area of commissioning which was to:

- Using the Corporate Strategic Commissioning Group as a "clearing house" to inform others of planned consultations and seek opportunities to add questions to those consultations
- Develop a core set of standards when undertaking consultation and ensure consistent feedback loops
- Maximise consistent use of the Citizens Board
- Develop best practice champions in every Directorate
- Develop a Sharepoint library of engagement and consultation work
- 3.20 Risk stratification: understanding and managing risk is a key part of "people" services and there are signs that we are beginning to get more sophisticated in our approaches. Although there are currently a number of risk stratification tools, they mainly focus on the health determinants of risk and do not look at social determinants such as social isolation, caring responsibilities and recent bereavement. This is an area for development and requires collaboration between commissioning staff and the intelligence functions of health and social care services
- 3.21 It has been agreed to establish a matrix team approach for the intelligence function of the council with a core work programme which focuses on promoting collaboration, professional leadership, staff development and increasing efficiency.
- 3.22 "Plan" key findings

Commissioners made good use of programme and project management methodology and there was consistent use made of centrally supplied tools and templates although staff were keen that use of such tools were proportionate and did not become an end in itself. Staff were able to describe effective stakeholder management approaches but were aware that the Directorates share many of the same stakeholders and could probably find a way to approach this more efficiently.

- 3.23 The Outcome Based Accountability approach in Children's Services was acknowledged as a particularly powerful and effective methodology for both articulating strategic intentions and as a means for galvanising multi-agency involvement. It was acknowledged that more extensive use of this methodology could be used across different parts of the Council.
- 3.24 Although commissioners do consult extensively on strategic plans with external partners, it was felt that consulting with internal partners earlier in the process would be better so the impact on other parts of the council could be understood more readily.
- 3.25 There was evidence of all directorates taking an asset-based approach in line with the Council's philosophy and this formed a key part of strategies. It was felt that commissioning strategies were able to evidence the influence citizens and communities had had in shaping them but we were less good at involving people in reviews to see whether changes had actually happened.
- 3.26 Recommendations for how the Council's planning function could be improved included:
  - Have initial conversations at the Corporate Strategic Commissioning Group before talking to service users to understand the impact on other parts of the Council and to see if there is a joint interest
  - Explore the possibility of having a shared budget for user engagement
  - Make consultation and engagement more joined up
  - Share understanding of community structures
  - Set up a commissioning calendar so colleagues can see what's coming
  - Put the spotlight on what works well in communities and share learning
  - Create a safe space to share what hasn't worked so well
  - Clarify the role of Performance Planning and Procurement Unit (PPPU) in planning – is it lead or to enable?
  - Consider and share opportunities for commissioning at a regional level
  - Consider peer mentoring so commissioners learn from each other

# 3.27 **"Do" – key findings**

Good commissioning promotes positive engagement with all local providers of care and support. This means market shaping and commissioning should be shared endeavours, with commissioning working alongside people with care and support needs, carers, family members, providers and the public to find shared and agreed solutions. Good commissioning provides value for money through identifying solutions that ensure a good balance of quality and cost to make the best use of resource and achieve the most positive outcomes for people and their communities.

- 3.28 All directorates were able to give examples of positive engagement with providers, both through one-off events and regular dialogue with mature relationships. Staff spoke of Strategic Advisory Groups that involve elected Members to broad sector-based provider forums to single issue groupings. It was felt that, in some areas, more could be done to engage with providers in problem solving. Developing and stimulating new markets was an area where commissioners felt they were still learning and were keen to share with each other what was working.
- 3.29 In terms of procurement, staff welcomed the professional advice given by PPPU and the challenge of approaching procurement in new ways to get better value for money and/ or improved outcome. More has been made recently of seeking consortia approaches such as the provision of carers' advice that was awarded to Carers Leeds in collaboration with other Voluntary Community and Faith (VCF) organisations or the professional advocacy service provided by Advonet. There were also some good examples of involving citizens in the procurement of services but some areas reported difficult in getting sufficient volunteers to undertake tender evaluations as this is a big time commitment.
- 3.30 In order to identify efficiencies through a category management approach, PPPU currently go round to each directorate. It would be more efficient and effective to identify opportunities through a single conversation at the Corporate Strategic Commissioning Group. This would also include the opportunity to standardise processes and documentation in contract monitoring to a greater degree without fettering the ability of directorates to collect additional information. Where there are shared organisations or organisations hold a number of contracts with council directorates, it would make sense to have a core monitoring framework. This would include the opportunity for joint monitoring arrangements.
- 3.31 Key recommendations for the "do" part of the planning cycle included:
  - Having more "time out" sessions with provider forums to problem solve together
  - Share good practice
  - Consider having joint forums across directorates on a themed basis where it makes sense, .e.g. mental health
  - Ensure forums are mixed and representative of the city and if not take steps to improve them
  - Make the benefits of taking part clear to people
  - Have a transparent, open approach to monitoring and share intelligence with strategic partners
  - Consider strategic approaches to broadening our local markets to offer greater choice and diversity
  - Make sure our monitoring standards are aligned to independent inspectors and regulators to avoid there being a disparity of judgements
  - Consider a consistent council approach to monitoring unregulated services perhaps through a common risk framework
  - Review procurement processes to ensure they have the right balance between rigor whilst not stifling innovation
  - Consider how to increase the personalisation of service delivery
  - Develop a shared contract management framework
  - Attempt to align contracts across directorates to facilitate joint commissioning

Review systems and IT to reduce silo working

## 3.32 "Review" - key findings

Good commissioning monitors service delivery against expected outcomes an report how well it is doing against the strategic plan. This is in effect asking "Did our **do** phase deliver on the **plan** we put in place to deliver against what we **understand** to be the needs"? Part of the review role should include considering whether the strategic plans are addressing identified needs and monitoring whether all partner agencies are acting in accordance with the commitments they made. Good commissioning ensures citizens are actively involved in the monitoring and review of services including decisions to de-commission services.

- 3.33 There was a strong commitment from commissioning staff to involve citizens in all parts of the commissioning cycle including monitoring and review. People were aware of the formal role Healthwatch had the in the city and its power to "enter and view".
- 3.34 Examples were given of service users co-chairing partnership boards such as the Learning Disability Partnership Board. There were also examples of co-production in producing monitoring tools that involved both service users and providers. Strategy and Commissioning colleagues in the Public Health Department use a Quality Assurance Framework which the other directorates were interested in learning about. Staff were keen to share learning and expertise in this area and identify opportunity for joint approaches.
- 3.35 Staff also talked about the importance of data being meaningful to judge the performance of the service and how it is equally important to decommission services well as well as commission them. Effective communication, strong relationships and tight management were mentioned as important factors in a successful decommissioning.
- 3.36 Key recommendations in the "Review" part of the commissioning cycle were:
  - Share good practice across directorates
  - Explore whether a more joined up approach to service user involvement to gain a greater pool of volunteers
  - Consider a generating a council policy on the rewards and recognition of citizen involvement in formal commissioning process
  - Publish appropriate data on the internet to promote informed customer choice
  - Consider the use of Information Technology to promote forms of citizen feedback on services
  - Share directorate approaches to monitoring and move to a common framework

#### 3.37 Place-based Commissioning – the future direction of travel

The review identified how the Council can facilitate integrated commissioning for "people" services at a strategic and operational level. There was a recognition amongst commissioning staff that they could be more pro-active in sharing information at an earlier stage and collaborate to simplify, standardise and share

approaches. Although each directorate uses a similar methodology there was not a significant number of shared contracted organisations/ providers and these have been identified by updating the corporate contracts register, which are now shared across directorates.

- 3.38 All staff are keen to build on the review to ensure a culture of joint working, supported by appropriate ways of working. Commissioning staff will continue to work closely with PPPU, including the on-going development of appropriate Category Management.
- 3.39 Increasingly the art of good commissioning focuses on commissioning for the whole system for a population group, e.g. children and families, adults and older people. Commissioners do not just commission a suite of services or a care pathway, they commission for all the enabling functions in that system too such as information management and technology, estates, communications and workforce. All of those facets need to come together for the system to work. In order to best understand that system and do it well, commissioners need to be part of the system too: not sit outside it at arm's length.
- 3.40 Research from the King's Fund<sup>1</sup> makes the argument for a new approach of place-based systems of care. Commissioning in the future needs to be both strategic and integrated, based on long-term contracts tied to the delivery of defined outcomes.
- 3.41 The likely elements of a place-based approach are:
  - Needs analysis that drills down to a local level as each area in Leeds has its own characteristics and challenges
  - Mapping of local assets and a community development approach to address gaps
  - New models of care and support that span organisational and service boundaries, supported by new approaches to commissioning and paying for care
  - Robust governance arrangements that balance organisational autonomy and accountability with a commitment to partnership working and shared responsibility
  - Services that are financially and clinically sustainable through greater integration of care and focus on improving population health and well-being
  - Collaboration with a wider range of organisations from different sectors
  - Leadership that is required to work in this way and that shares expertise and skills across different directorates and organisations
  - A partnership with citizens and local communities to transform the way that services are designed and delivered
  - A focus on delivery at a local level, in our neighbourhoods and natural communities based on the conviction that, for the most part, people mainly access local services
- 3.42 It should also be noted that Adult Social Care services are in discussion with the two Leeds Clinical Commissioning Groups (CCG) that commission community-based services in order to create an integrated commissioning function between the

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<sup>&</sup>lt;sup>1</sup> Place-based systems of care, King's Fund, November 2015

three organisations with a joint appointment of Director of Integrated Commissioning and joint posts within the unit. Although externally focussed, this development offers the potential for smarter working between local government and the NHS in order to achieve better outcomes for the citizens of Leeds. It is likely that this development has the greatest opportunity to deliver efficiencies.

3.43 There is now also a requirement to produce a Sustainability and Transformation Plan on the Leeds City Council footprint that will bring all CCG commissioner and provider plans together in one costed plan which will also include social care and aims to achieve financial sustainability for the whole system.

## 4 Corporate Considerations

# 4.1 Consultation and Engagement

4.1.1 The consultation and engagement relevant to this piece of work relates to the commissioning workforce across the three directorates. As has been detailed in the body of the report – staff were actively engaged with through the audit, several workshops and given the opportunity to comment on the final report. The Trade Unions are aware of the work through regular updates through Joint Consultative committee.

#### 4.2 Equality and Diversity / Cohesion and Integration

4.2.1 Equality and diversity considerations are a key part of commissioning good practice as it fundamentally about understanding our populations and determine the best services to meet people's needs. As has been described above, how we approach needs analysis, consultation and engagement with citizens, drawing up specifications and contracting models all can have an impact. Any major commissioning strategy goes through the rigor of the council's equality impact assessment.

### 4.3 Council policies and the Best Council Plan

4.3.1 Efficient and effective commissioning contributes to both a strong economy and a compassionate city. As much as possible, commissioners try to make the most of the Leeds £ - by buying locally across the Third sector, private sector and, of course, the vital role of our own in-house services. It also contributes to a compassionate city in that we ensure sufficient investment in care and support services that promote prevention and early intervention but also high quality care where that is the need and ensure people are kept safe.

### 4.4 Resources and value for money

4.4.1 A key part of effective commissioning concerns ensuring best value for the Leeds council tax payer. A significant part of commissioning work entails benchmarking around unit costs, innovative ways of procurement, stimulating new markets, category management approaches, encouraging consortia etc to name just a few strategies. The recommendations of the review put in place a strategic and operational infrastructure to the council's commissioning function to ensure the best opportunity exist through collaboration to get best value.

## 4.5 Legal Implications, Access to Information and Call In

4.5.1 There are no specific legal implications within this report however it should be noted that the procurement part of the commissioning cycle is heavily regulated by

- national and European law. The PPPU plays an essential role in ensuring all contracting by the council is done lawfully.
- 4.5.2 This report is to Scrutiny Board for information and therefore is not subject to call in.

## 4.6 Risk Management

4.6.1 There are no significant risks relating to the content of this report. However it should be noted that the contracts function of commissioning has a significant role to play, especially in adult social care. The sustainability of care markets is an increasingly important, and now statutorily prescribed responsibility as set out in the Care Act 204. There is an important interplay between the role of contract/ quality surveillance staff, social work and safeguarding functions. Constant monitoring and vigilance is required in order to properly safeguard the well-being of Leeds citizens in commissioned and directly provided care.

#### 5 Conclusions

- 5.1 Commissioning is a complex and evolving function. The council has considerable expertise across the three directorates and the strategic review of "people" commissioning has made a number of recommendations to strengthen and improve commissioning practice.
- 5.2 The next chapter in developing commissioning is one that looks outward in developing relationships and new models of delivery with other council services and key partners such as the NHS. Collective action is needed to improve the health and well-being of the population by acting on the wider social, economic and environmental determinants of health. We must design new ways in which individuals can work together in teams and across systems to make the best use of our collective skills and knowledge. This is the challenge for the corporate Strategic Commissioning Group going forward.

#### 6 Recommendations

- 6.1 Scrutiny Board is asked to note the work that has been undertaken and support the review recommendations:
- 6.1.1 To establish a Corporate Strategic Commissioning Group and for it to be chaired by a Director
- 6.1.2 That the Corporate Strategic Commissioning Group set up a cross-directorate Operational Group to be chaired by a Head of Commissioning.

### 7 Background documents<sup>2</sup>

7.1 A number of documents covering commissioning policy and practice were considered when undertaking the review and these are detailed in 3.9 above.

<sup>&</sup>lt;sup>2</sup> The background documents listed in this section are available to download from the Council's website, unless they contain confidential or exempt information. The list of background documents does not include published works.