

Appendix One

# **Integrated People Commissioning Audit Tool**

<b>Step 1: ANALYSE – the Local Authority is able to demonstrate an understanding of the local population, including forecasting for future needs, resource modelling and priorities for achieving outcomes</b>	
<b>What does good look like?</b>	<b>Provide evidence of what you are doing now</b>
Commissioners stay up-to-date with relevant evidence, use it intelligently to inform commissioning decisions	
There is demonstrable collaboration and sharing of qualitative and quantitative data across the different directorates and agencies of social care, health, housing and education which is used to establish a baseline and inform commissioning decisions in a clear and transparent way. The results are published and made available by the Local Authority.	
Commissioners employ a wide range of methods to collect, understand and analyse the view of people who use services and can demonstrate that this evidence strongly informs its commissioning priorities.	
There is capacity to undertake the analysis necessary to interpret local data and wider evidence in a meaningful and relevant way.	
Commissioners analyse local providers and market and share this with other directorates so there is a single council view of our providers and market	
<b>How integrated do you think is current practice? What is the evidence?</b>	
<b>How would you make this better?</b>	

**Step 2: PLAN** – Good commissioning starts from an understanding that people using services and their carers and communities are experts in their own lives and therefore essential partners in the design and development of services. Good commissioning creates meaningful opportunities for leadership and engagement of people including carers and the wider community in decisions that impact on the use of resources and shape of services locally. Good commissioning provides value for the community not just the individual, commissioner or the provider.

<b>What does good look like?</b>	<b>Provide evidence of what you are doing now</b>
The Local Authority demonstrates shared decision-making with its citizens, actively engaging with them to specify population and personal outcomes and to maximise citizen choice and control.	
Service specifications and contracts are designed with people who use services, their carers, advocates and providers to focus on outcomes, rather than outputs or time and task based activities.	
<p>The Local Authority recognises that building community and social capital is a central plank of the model of care and actively promotes:</p> <ul style="list-style-type: none"> <li>• Mutual support and self-help</li> <li>• Connections between individuals and resources</li> <li>• Inclusion in community activities</li> <li>• Community ownership and involvement in planning and re-shaping services</li> </ul>	
The overarching strategic plans of each directorate are aligned, outcomes focused and promoted integrated working.	
<b>How integrated do you think is current practice? What is the evidence?</b>	
<b>How would you make this better?</b>	

**Step 3: DO** – 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 resources and achieve the most positive outcomes for people and their communities.

<b>What does good look like?</b>	<b>Provide evidence of what you are doing now</b>
Commissioners develop relationships with all local care providers to enable the design and delivery of services that meet the care and support needs and outcomes that local people want	
Commissioners conduct open and transparent conversations with providers who are actively involved in the commissioning cycle and are able to plan and invest in local services.	
Relationships between commissioners and providers are open, respectful and honest. Providers share information about costs, profit margins and the terms and conditions of staff and the Local Authority shares information about cost assumptions and the rationale for contract decisions.	
Commissioning, procurement and contracting processes are designed to promote a varied and diverse market and seek to reduce the burdens on provider organisations.	
Commissioners can demonstrate a thorough understanding of the balance between cost, quality and effectiveness of care and support services. The financial and quality data has a strong influence on contract specifications and costs.	
Commissioners work closely within the Local Authority, with the NHS and other public and voluntary services to share resources, e.g. infrastructure and buildings	
<b>How integrated do you think is current practice? What is the evidence?</b>	

<b>How would you make this better?</b>	

**Step 4: REVIEW** – Good commissioning monitors service delivery against expected outcomes and 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.

<b>What does good look like?</b>	<b>Provide evidence of what you are doing now</b>
Commissioners work in partnership with a wide range of Local Authority services, housing, health, the third sector and care and support providers to develop shared outcome frameworks	
There are clear and well publicised arrangements in place to identify and address safeguarding concerns, with clarity around roles and responsibilities and a clear strategy for intervention	
Commissioning processes are open and transparent and enable people who use services and their carers to hold people to account.	
There are clear and transparent lines of accountability for quality and safety with systems that involve citizens and ensure continuous improvement and respond to quality issues.	
Commissioners work in partnership with each other and with different external commissioning bodies to ensure the best use of resources, including where services can be de-commissioned, where appropriate, to reflect local needs and preferences.	
<b>How integrated do you think is current practice? What is the evidence?</b>	
<b>How would you make this better?</b>	

**Cross cutting theme: DEVELOPING THE COMMISSIONING AND PROVIDER WORKFORCE** – Good commissioning is undertaken by competent and effective commissioners and facilitates the development of an effective, sufficient, trained and motivated care and support workforce. It is concerned with sustainability, including the financial stability of providers and the co-ordination of health and care workforce planning.

<b>What does good look like?</b>	<b>Provide evidence of what you are doing now</b>
There are clear plans in place to ensure the workforce has the capacity, skills and knowledge to commission, manage and delivery high quality care and support services.	
Service contracts clearly specify the critical importance of a sufficient, skilled and motivated workforce and commissioners are confident and can evidence that fees and contracts allow providers to deliver staff terms and conditions that meet statutory obligations and reflect good practice including the payment of at least the Minimum Wage.	
Commissioners work collaboratively with the Council and with key commissioners’ partners to develop job roles and skills that promote effective integration and improve outcomes.	
Commissioners use national and local workforce and other data to inform commissioning plans, contract specifications and local learning and development plans.	
Commissioning roles are clearly described, with appropriate learning and development opportunities.	
<b>How integrated do you think is current practice? What is the evidence?</b>	
<b>How would you make this better?</b>	