

# Facilitating Better Outcomes for Our Children and Young People

## Our Approach to Joint Commissioning

2020 - 2021



## Drafting History

Date	Author	Version
21-11-2019	Karen Sharp and John Smith	0.1
03-03-2020	John Smith	0.2
09-04-2020	John Smith	0.3
05-05-2020	John Smith and Rachel Britt	0.4
10-06-2020	John Smith	0.5
30-06-2020	Rachel Britt	0.6
20-07-2020	John Smith	0.7
28-10-2020	John Smith & Rachel Britt	1.0

## Approval History

Date	Authority	Version
22-05-2020	Vincent Godfrey (KCC, Strategic Commissioner)	0.4
22-05-2020	Rachel Jones (NHS, Director of Strategy & Population Health)	0.4
22-06-2020	Joint Commissioning and Governance Workstream	0.5
06-07-2020	Change for Kent Children SEND Steering Board	0.6
20-07-2020	SEND Improvement Board	0.6
01-10-2020	Matt Dunkley (KCC, Corporate Director of Children, Young People and Education)	0.7
12-10-2020	Clinical Commissioning Group (NHS governance)	0.7
02-11-2020	Joint Commissioning Board	

**Due for next review**  
September 2021

# Contents

<b>1. About this Approach .....</b>	<b>4</b>
<b>1.1 Context and Purpose .....</b>	<b>4</b>
<b>1.2 Core Principles.....</b>	<b>5</b>
<b>2. Joint Commissioning .....</b>	<b>6</b>
<b>2.1 What is joint commissioning? .....</b>	<b>6</b>
<b>2.2 Why is joint commissioning important? .....</b>	<b>6</b>
<b>2.3 Joint understanding.....</b>	<b>6</b>
<b>2.4 Equality &amp; Diversity .....</b>	<b>7</b>
<b>3. Delivering the vision.....</b>	<b>7</b>
<b>3.1 Joint Commissioning Delivery Plan .....</b>	<b>7</b>
<b>3.2 Governance Model .....</b>	<b>8</b>
<b>3.3 Performance Reporting .....</b>	<b>8</b>
<b>3.4 Dispute resolution.....</b>	<b>9</b>
<b>4. Children and Young Person’s Outcomes Framework .....</b>	<b>10</b>
<b>5. Next Steps .....</b>	<b>11</b>
<b>6. Other key documents .....</b>	<b>11</b>
<b>Appendix 2 – Services within the scope of Joint Commissioning.....</b>	<b>15</b>

## **1. About this Approach**

### **1.1 Context and Purpose**

In early 2019, Ofsted and the Care Quality Commission (CQC) conducted a joint inspection of Kent to judge the effectiveness of the area in implementing the disability and special educational needs reforms as set out in the Children and Families Act, 2014. The inspection highlighted that Joint Commissioning arrangements across the area were underdeveloped, which impacted on the effectiveness of commissioned services to meet the needs of children and young people.

Work has been undertaken since the inspection to build the right foundations to establish a formal Children's Joint Commissioning Delivery Unit. It is recognised that working together in a fully integrated way can be challenging, however, this document sets out the commitment to working jointly to improve the outcomes of all children and young people and details the steps needed to realise the vision.

One of the fundamental elements of the reforms in the Children and Families Act, 2014 is local partners working effectively together to improve outcomes for children and young people with special education needs and disability. The Act gives local partners the flexibility to decide how the system will work in their area and what structure is most effective for them.

Delivering the vision requires both strong leadership and good governance. In the context of joint commissioning, this means both shared and collective leadership between Kent County Council and the NHS. It also includes providers and other partners, such as the voluntary and community sectors, children and young people, and parents and carers. The document sets out how this will be achieved, and the standards designed to support continuous improvement via cross-organisational reflection, benchmarking and peer review.

This will, once approved, become the foundational document for greater partnership and innovative working between the relevant agencies. It will be intended that all individuals during the process of developing our new delivery plan for children and young people, will refer to this document for guidance on our overarching vision.

Finally, this document is subject to review through the governance structures highlighted in subsequent sections to ensure it remains relevant for where the county is in terms of joint action.

Whilst this document covers the area of Kent, we are committed to continue working with Medway Council to share best practice, data and information and to explore opportunities to jointly commission services.

## 1.2 Core Principles

This approach has been informed by the Integrated Commissioning for Better Outcomes Framework, jointly commissioned by the LGA and NHS Clinical Commissioners (NHSCC). The joint commissioning approach and delivery plan is built around four domains:



Underpinning the four domains are a set of jointly agreed and owned principles. It is essential that agencies follow these to facilitate better outcomes for children and young people:

- **Coproduction and engagement** – By involving parents, carers, children and young people in the commissioning process we will be able to ensure that services truly work for those for which they are intended.<sup>1</sup>
- **Innovation** – We must recognise one of the most pressing challenges facing the public sector, which is the pressure on available financial resources. Therefore, innovative ways of delivering services will be encouraged.
- **Joint understanding** – With multiple agencies working across the area for our children and young people, there is a need to jointly understand the local area. We will operate from a single shared understanding of the local area, through the Joint Strategic Needs Assessments to set our commissioning priorities.
- **Outcomes based** – The local area needs to be at the forefront of developing services that meet the needs of children, young people and their families, through coordinated delivery across multiple providers. This needs to include the more intelligent use of data, to predict demand and improve services. Moreover, we must also be open-minded and not lose sight of the experiences that children, young people and their families have and use these to improve our services.
- **Capacity building** – Delivering change will be limited, unless there is the capacity within the wider system to be able to do this. Therefore, we must support the market wherever possible to enhance our children and young people's outcomes, while promoting efficiency.

---

<sup>1</sup> This is also a requirement as part of the statutory SEND code of practice: 0 to 25 years.

- **Joint ownership** – Joint ownership promotes joint decisions, allowing for more joining up of services. We do this while recognising we have different statutory responsibilities and that all these principles must be embedded into business as usual activities.

## **2. Joint Commissioning**

### **2.1 What is joint commissioning?**

Joint Commissioning is a strategic approach to planning and delivering services in a holistic, joined-up way. It is a means for the different partners that commission education, health and care provision, to deliver positive outcomes for children and young people.

There is no single definition or 'right way' to jointly commission services, however, in practice it means organisations collaborating and sharing responsibility for integrated services and their outcomes. This can involve working in partnership at all stages of the commissioning process, from the assessment of needs, to the planning and procuring of services, and monitoring of outcomes.

Our approach recognises that joint commissioning needs to occur at various levels: with individuals and their families and carers; with communities; and across larger populations. It details the steps that will be undertaken to achieve the vision of improving outcomes for Children and Young People.

### **2.2 Why is joint commissioning important?**

The health, education and care system in Kent is made up of a complex array of providers and services. Coming together to jointly commission services closes the gaps between organisations and settings and makes clearer how service users should move through the network of services. It also produces efficiencies by reducing service duplication and improves outcomes by delivering services that better meet the needs of those using them.

There are also legislative requirements that are placed on local authorities and CCGs to work together. The Children Act, 2004 establishes the duty to encourage cooperation between relevant partners and local authorities. Furthermore, section 26 of the Children and Families Act, 2014 places a duty on local authorities and partner commissioning authorities to make arrangements for joint commissioning for children and young people that have Special Educational Needs or Disabilities. This is further strengthened by the Care Act, 2014 with the duty to ensure there is no gap in care and support between children and adult services.

### **2.3 Joint understanding**

There are some unique and significant challenges in meeting the needs of children and young people across Kent. These challenges include but are not limited to; the geographical placement of support and care services, a diverse county of children

and young people and some growing demand of children and young people with complex needs.

Joint Strategic Needs Assessments will be used to agree and regularly review shared priorities. These will inform the development of a Joint Delivery Plan which will be used to continuously frame joint working and track delivery. There will also be widespread use of a range of public health and social care data, shared intelligence on contracts and market analysis.

Market position statements will be used to summarise the supply and demand for services in the area and how it may change in the future. It will also set out how strategic commissioners will support and intervene in the market, presenting data that will help providers develop effective business plans.

## **2.4 Equality & Diversity**

This approach also restates KCC's<sup>2</sup> and the NHS'<sup>3</sup> commitment to Equality and Diversity. We recognise that across the area there is great diversity amongst the peoples who access our services. In these circumstances, we must ensure that we comply with our statutory obligation under the Equality Act, 2010 to protect individuals from discrimination on the basis of their protected characteristics.

In order to ensure that we as a local area comply with this duty, it will be expected that all jointly commissioned activities will have completed Equality Impact Assessments. Through undertaking analysis of the key issues on equality and diversity, we will better understand how children and young people are treated entering our services and keep service users at the centre of all the services that we deliver together.

## **3. Delivering the vision**

### **3.1 Joint Commissioning Delivery Plan**

The Joint Commissioning Delivery Plan sets out the practical steps that will be undertaken to deliver the vision and can be found in Appendix 1. It is based around the four domains of building effective foundations for change and focuses on what needs to happen to ensure better outcomes for children and young people.

The Delivery Plan will draw on the available evidence and set out the priorities for action. It will drive the production of individual joint commissioning plans to ensure these priorities are met and outcomes improved for children and young people. It will be used to develop innovative approaches to address gaps in services and improve transition to adult services.

---

<sup>2</sup> KCC's Equality, Diversity and Human Rights Policy

<sup>3</sup> Kent and Medway CCG Constitution section 1.2.2

Appendix 2 sets out some of the services that are in scope for consideration to be jointly commissioned. Four pilot areas have been chosen to test out the approach and lessons learnt will be fed back into the delivery process to ensure that practices and processes are continually being refined and improved. The pilot services are:

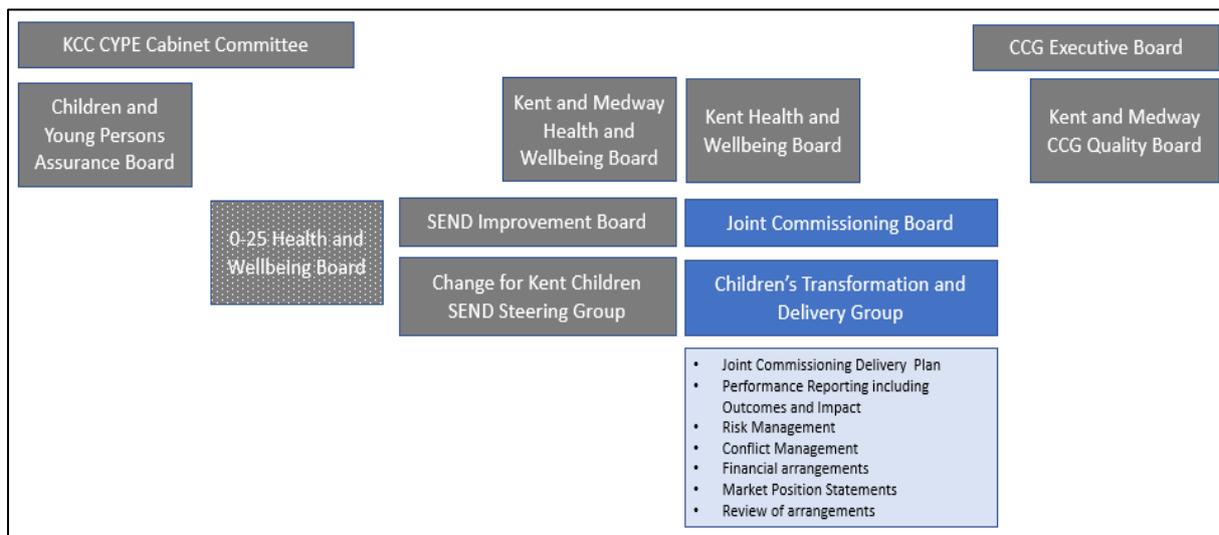
- The Neurodevelopmental Pathway
- Speech and Language Therapy
- Independent Special School Placements
- Joint Resource Allocation Process

The Delivery Plan will be updated on an annual basis.

### 3.2 Governance Model

A key step in the Delivery Plan is building strong governance to ensure that outcomes-focused integrated commissioning is embedded across the area. It will provide the structure to drive continuous improvement and cross-organisational reflections on the impact of the commissioning arrangements.

At the heart of the governance model (shown below) is the development of a Joint Commissioning Board. This Board will oversee progress against the Delivery Plan, receive risk and issue escalation, make decisions on informed and evidenced options and provide read across to other related activity.



### 3.3 Performance Reporting

It is important that we measure and understand the impact joint commissioning activity is having on children and young people, as well as the wider system. Key metrics will be developed as part of the commissioning plans for any service that is jointly commissioned and fed into the high-level Outcomes Framework (detailed in section four).

The Joint Commissioning Board will embed a culture of evaluating the impact of what we do, regularly reviewing the performance and outcomes of services to determine

the effectiveness and seek continuous improvement. There may also be ad-hoc reviews and deep dives conducted at the request of the 0-25 Health and Wellbeing Board. Healthwatch and other partners will be engaged and involved to give a sense of the experience of children, young people and parents/carers.

The views of children and young people will form part of any review using the “You’re Welcome” guidance. This will enable commissioners to triangulate the experiences of those using the services with the performance data.

Children and young people rightly have expectations of what we do as commissioners, therefore, there has been a co-produced charter of expectations. It is expected that commissioners will take these into account during their commissioning activities and be able to evidence where they are taking these considerations into account – moreover, there must be clear evidence of coproduction and engagement with those that would be affected by the service and/or provision.

1. **Respect us & be kind**
2. **Include and accept us**
3. **Listen, understand and act upon what we say**
4. **Be honest and trust each other**
5. **Support us to grow and learn from our experiences**
6. **Let us lead and make decisions**

### 3.4 Dispute resolution

It is recognised that there are times when organisations will not be able to agree on the best way forward and there must be mechanisms through which to handle the resolution of disputes. This section is not intended to be prescriptive, but merely to agree the adoption of the relevant principles resolve our disagreements.

- **Understanding of organisations** – Organisations operate in very different contexts, this includes different statutory responsibilities. Therefore, it is required that parties understand and respect these differences.
- **Clear communication** – Communication is key throughout the process of jointly working together in partnership. Therefore, any issues must be communicated at an early stage.
- **Resolution happens at the lowest level possible** – Issues should be handled at the most appropriate level, escalation should only occur as a last resort. This is to promote trust between organisations.
- **Penultimate decision** – Will be reached through escalation to the 0-25 Health and Wellbeing Board. If final decision is required, the CCG Accountable Officer and the Corporate Director for Children, Young People & Education will determine resolution.

#### 4. Children and Young Person's Outcomes Framework

The Children and Young Person's Outcomes Framework describes the things that children and young people and their parents/carers want for them.

In Kent, the current Children and Young People's Framework (CYPF) was developed in 2016 and sets out the shared ambition of public and voluntary sector partners to improve the lives of children and young people growing up in Kent. Work was undertaken in late 2019 and early 2020 to refresh the framework. Stakeholders across education, health and social care came together to develop the new framework and identified the following seven high level outcomes.



A shared understanding of how the new outcomes framework will support commissioning, practice and impact measurement across the area will be developed and regularly reviewed by the Joint Commissioning Committee.

A set of indicators will sit underneath each outcome to measure progress towards the achievement of the outcomes. It is recognised that the engagement and participation of children and young people is essential to the success of improving outcomes,

therefore feedback will be collected from children, young people and their families and used to improve services and delivery.

## **5. Next Steps**

### **5.1 Consultation and adoption**

As mentioned in the introduction, once approved, this document will be used to drive the delivery of a Joint Commissioning Unit. Consultation on the document will continue to be undertaken before it is taken through the governance process for sign off and adoption.

## **6. Other key documents**

This section holds the links to other documents that this Approach to Joint Commissioning links with, or, can be used to gain a better understanding of the context in which our joint commissioning activities operate in.

[Joint Strategic Needs Assessment](#)

[SEND Health Needs Assessment 2019](#)

[Kent & Medway CCG Constitution](#)

[KCC Equality & Human Rights Policy](#)

[NHS Long Term Plan](#)

## Appendix 1 - Joint Commissioning Delivery Plan 2020-21

Outcome	Actions to be taken	Timescales
<b>1. Getting the foundations right</b>		
<b>1.1</b> Ensure that strong and shared leadership is in place	• Create a Joint Commissioning Board with key organisations and stakeholders.	November 2020
	• Develop a Joint Commissioning Delivery Plan to support the development of the Joint Commissioning Unit.	Completed
<b>1.2</b> Ensure there is a system-wide overarching vision for Joint Commissioning	• Develop a Joint Commissioning Approach that includes a high-level outcomes framework for Children and Young People.	Completed
<b>1.3</b> Build strong relationships between KCC, Kent and Medway CCG and key stakeholders	• Work to develop a Joint Commissioning Unit between organisations, setting out agreed set of values and principles.	TBC
<b>1.4</b> Ensure that there is a shared vision of how better outcomes will be commissioned and delivered	• Ensure that the principles of the Joint Commissioning Approach are embedded across organisations.	Regular review via Joint Commissioning Board
	• Ensure that outcome measures are clearly set out within all Joint Commissioning Plans and embedded across the system.	April 2021
<b>1.5</b> Establish regular independent testing of the impact for CYP and families	• Outcomes and performance are regularly reported to the Joint Commissioning Board.	Quarterly
	• Review the impact of services via stakeholder surveys.	Annually
<b>1.6</b> Establish the building blocks for integration	• Ensure that there is widespread use of shared data, intelligence and market analysis.	Regular review via Joint Commissioning Board

Outcome	Actions to be taken	Timescales
	<ul style="list-style-type: none"> <li>Use data on the transition to adulthood for effective demand modelling and planning of services.</li> </ul>	TBC
<b>2. Taking a person centred, place based and outcomes focused approach</b>		
2.1 People are at the heart of commissioning activities	<ul style="list-style-type: none"> <li>Ensure commissioning plans detail how CYP and families are involved at every stage of the commissioning process. Plans are reviewed by the Joint Commissioning Board and the impact of services evaluated.</li> </ul>	Ongoing
2.2 Communities are empowered and engaged	<ul style="list-style-type: none"> <li>Develop market position statements to provide information about the joint commissioning approach, future demand and funding arrangements.</li> </ul>	Ongoing
	<ul style="list-style-type: none"> <li>Jointly agree and develop community capacity via joint commissioning plans for services.</li> </ul>	Ongoing
	<ul style="list-style-type: none"> <li>Ensure that Healthwatch and other partners are engaged and involved to give a sense of the experience of CYP and parents/carers through the Joint Commissioning Committee.</li> </ul>	Ongoing
	<ul style="list-style-type: none"> <li>Ensure that co-production of services with children and young people is undertaken in a meaningful way and detailed within the commissioning plans.</li> </ul>	Ongoing
<b>3. Shaping provision to support people, place and population</b>		
3.1 Commissioners working together to co-produce services, shape provision and improve outcomes	<ul style="list-style-type: none"> <li>Develop commissioning plans that are clear, transparent and address current and future need.</li> </ul>	As required
	<ul style="list-style-type: none"> <li>Ensure that there is a named strategic leader for market shaping tasks.</li> </ul>	Via the Joint Commissioning Board

Outcome	Actions to be taken	Timescales
3.2 Strong commissioner-provider relationships developed	<ul style="list-style-type: none"> <li>Ensure that providers are involved and engaged in commissioning plans and service development and regular provider forums take place.</li> </ul>	As required
	<ul style="list-style-type: none"> <li>Establish transparent processes for regularly gathering the views of the frontline workforce.</li> </ul>	Quarterly
3.3 Sufficient supply of a skilled workforce across the system to deliver commissioning intentions	<ul style="list-style-type: none"> <li>Ensure that the skills and capacity exist to develop new models of care and revised commissioning arrangements and are detailed within commissioning plans.</li> </ul>	Ongoing
	<ul style="list-style-type: none"> <li>Develop a workforce strategy with providers that identifies supply and skill requirements and is used to inform commissioning arrangements.</li> </ul>	April 2021
<b>4. Raising the ambition</b>		
4.1 An evidence-based approach is used to inform the delivery of jointly commissioned services.	<ul style="list-style-type: none"> <li>Regularly share, use and disseminate learning from emerging best practice across the system.</li> </ul>	Ongoing
	<ul style="list-style-type: none"> <li>Establish a process for regularly collecting data from children and young people on their outcomes and experiences and ensure that there is an evidenced feed-back loop built into service design.</li> </ul>	January 2021
4.2 There is appropriate risk-taking and risk sharing	<ul style="list-style-type: none"> <li>Ensure that governance arrangements are clear on lines of accountability, and decisions about risk taking and risk sharing is transparent and documented.</li> </ul>	November 2020
4.3 Innovation and continuous improvement are supported by an embedded learning culture	<ul style="list-style-type: none"> <li>Develop a protocol for how to learn from, adapt and spread best practice drawn from positive service delivery feedback.</li> </ul>	January 2021
	<ul style="list-style-type: none"> <li>Develop a programme of peer challenge and external</li> </ul>	April 2021

Outcome	Actions to be taken	Timescales
	review. <ul style="list-style-type: none"> <li>• Ensure staff have regular protected time to reflect together and across organisational boundaries on practice and how it can be improved.</li> </ul>	Ongoing
<b>4.4</b> Partners look ahead for early signs of coming change and balance adaption to such change with a continued focus on priorities.	<ul style="list-style-type: none"> <li>• Establish a process for how to hold conversations with the local population about changes and priorities, and for how the outcomes of those conversations influence decision making.</li> </ul>	April 2021

## Appendix 2 – Services within the scope of Joint Commissioning

