

A Strategic Joint Commissioning Framework for Children and Young People in Wirral

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1. Introduction

Commissioning:

"The process of <u>specifying</u>, <u>securing</u> and <u>monitoring</u> services to meet people's needs at a strategic level. This applies to all services, whether they are provided by the local authority, NHS, other public agencies, or by the private and voluntary sectors"

Joint Commissioning:

"The process in which two or more commissioning agencies act together to co-ordinate their commissioning, taking joint responsibility for translating strategy into action"²

Commissioning is a central and developing policy initiative for local government and health. The Every Child Matters agenda is focused on the bringing together of key partners to create strong Children's Trust arrangements which place children and families at the centre to deliver improved outcomes for children and young people. Joint commissioning across partnerships is key to delivering this agenda.

A commissioning environment while presenting challenges will also present Wirral Children and Young People's Partnership with opportunities to assess how we currently deliver services, where they fit with local and national priorities, whether they represent value of money and whether they meet the needs of children, young people and their families. As such commissioning provides us with a framework to continually improve the targeting, range and quality of services and is integral to future business development.

This strategy sets out the commissioning intentions and priorities to deliver the Children and Young People's Plan and outlines a strategic approach for commissioning services for children and young people. Whilst this framework can be used by single organisations to commission services its focus is on those services which would benefit from a partnership/joint commissioning approach.

The strategy determines a direction of travel that will create a shift in the balance of service commissioning from acute, high intensity services to prevention.

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¹ SSI/Audit Commission (2003) Making Ends Meet

² Department of Health

2. Vision

The Wirral Children and Young People's Plan has the following vision for children and young people:

"To enable Wirral's children, young people and families to access services quickly in order to be secure, healthy, have fun and achieve their full potential"

In order to achieve our shared vision for children and young people we need to work in partnership to:

- Develop innovative ways of working across organisational and professional boundaries
- Ensure the best use of available resources;
- Focus on commissioning services based on individual need to deliver improved outcomes;
- Invest in effective prevention and early intervention services;
- Develop a transparent process of commissioning, de-commissioning and procurement.

3. Commissioning Principles

The following principles and values will underpin the joint commissioning framework and all associated commissioning activity:

Partnerships: We will work in partnership with all relevant stakeholders and agencies to ensure that resources and funding streams are maximised to deliver successful outcomes for children and young people. This includes working proactively with statutory partners, independent and third sector providers and parents, children and young people.

Vision: The joint commissioning framework reflects the Wirral vision for children and young people and the priorities and outcomes outlined in the Children and Young People's Plan and Local Area Agreement.

Outcome Focused: All decisions are based on a clear rationale for improving outcomes for children and young people.

³ Wirral Children and Young People's Plan 2006-2008 Working Together for Children and Young People

Needs-Led and Accessible Services: Services will be commissioned based on the needs of individual children and their families. Such services are easily accessible and encourage greater independence for children and young people.

Involvement: Parents, children and young people will be actively engaged in the planning, designing and monitoring of services.

Diversity: Commissioned services will be sensitive to the ethnic, religious and cultural needs of children and young people and their families.

Value for Money: All services, both internal and external will demonstrate value for money, and achieve local and national quality standards. Commissioning decisions will be based on value for money and contestability considerations, underpinned by a quality and performance framework. Value for money is defined as the relationship between *economy* – the price paid for a service, *efficiency* – a measure of productivity and *effectiveness* – a measure of the impact achieved (the 'value chain')

Purchasing: Procurement processes will be robust and transparent.

Flexible and Effective Services: Commissioning strategies will seek to build and sustain preventative services to ensure a range of services within a continuum of need.

Market Management: Market development and management will be a key function and outcome of the commissioning process.

Workforce Development: Partners will work together to develop staff so that staff are confident and competent to deliver modern services and to ensure sufficient capacity to deliver.

Shared Risk: All organisations responsible for commissioning services will take shared responsibility for risk.

4. The National Context

This commissioning strategy is set in a rapidly developing policy context and is framed by the following key national drivers:

- Every Child Matters Green Paper
- The Children Act (2004);
- Joint Planning and Commissioning Framework for Children, Young People and Maternity Services;
- The National Service Framework for Children, Young People and Maternity Services;
- 10 Year Childcare Strategy and the Childcare Act;

- Commissioning Framework for Health and Well-being;
- Strong and Prosperous Communities.
- NHS Plan

5. The Local Context

The key issues emerging from the national context, such as early intervention, accountability, integration, joint working and partnerships, breaking down barriers, designing services around the service user, and actively involving children and families, feature significantly in local planning and developments.

Our aim is that those services needed by Wirral children and young people are provided in the Wirral therefore reducing the need to place children and young people out of area.

Wirral is the eighth largest metropolitan district in the country. At the 2001 Census it had a population of 312,293 residents, a decline from 331,000 in 1991. The population is expected to decline further, to 293,000 by 2021, as a consequence of low birth rates and net out-migration among people of working age. In 2001 25.8% of the population were under 19, 80,000 with 17,486 (5.6%) in the 0-4 age range and 42,663 (13.7%) in the 5-14 range.

Overall Wirral is the 48th most deprived area in the country. The wards of Bidston, Tranmere, Birkenhead, Seacombe and Leasowe fall in the lowest 5% of England's most deprived wards. Indeed Bidston, Birkenhead and Tranmere fall into the most deprived 1% of wards nationally. Only Royden, Clatterbridge and Heswall come within the upper half of the least deprived ward table. Overall, 26% of Wirral's population live in the most disadvantaged 10% of wards in England.

In terms of child poverty Bidston ranks as the most deprived ward in England. 7 out of 10 children in the 5 most deprived wards experience child poverty.

98% of the Wirral population is White with the Irish (1%) as the largest ethnic minority, followed by the Chinese (0.5%).

Most children and young people are healthy. Wirral is well served by health centres, where many of the GP's are located, and children and young people are well supported by a community paediatrician, health visitors, school nurses and others.

It is estimated that of the 80,000 children in Wirral, 20% (16,000 children) at any one time will have additional needs which requires some kind of extra support. Most of these children will be living in the more disadvantaged areas. Within this figure about 2,000 children will have more complex needs and will require a much higher level of support, for example, if they have to be taken into care or are severely disabled.

Children at high risk (2000 Or 2.5%) e.g. Child Protection, SEN Statements

14,000 or 17.5% of Children

Health, Play, Recreation, Leisure, Education, Housing, Information,

The triangle of need (Figure 1) shows the position diagrammatically.

Integrated Frontline Services

We have organised targeted support services, that is, those which work preventatively to support children and young people with additional needs, on an Area basis. The Governance of the Areas takes place at District level. We have four District Boards.

Advice and Guidance

In each Area there is a multi-disciplinary team composed of people from different professions working together for and around children and young people. There are 11 Areas in Wirral. Most children and young people will receive additional support, if they need it, from the Team which serves the Area where they live and go to school.

This model is referred to as the Child Concern Model and is supported by the Common Assessment Framework.

This integrated way of working is at the heart of embedding a preventative approach to service delivery.

6. The Commissioning Framework

6.1 What is Commissioning?

'It's about getting ahead of the game and anticipating future needs and expectations rather than just reacting to present demand'4

Commissioning is a process that continually seeks to improve the range, quality and cost effectiveness of services within available resources to meet need. Statutory bodies have specific and limited resources which must be able to respond to changing internal and external environments. Commissioning is about taking all these factors into account so that organizations can successfully plan for the future.

Commissioning is therefore an on-going business process that is fluid and requires constant review. It involves a number of inter-related components including needs analysis, strategic planning, procurement and market management.

The terms commissioning and procurement are often used interchangeably however whilst procurement is a key component of the commissioning process the activity is very specific and specialist and is defined as:

"The operational activity, set within the context of commissioning, of applying resources to buy services in order to meet needs – either at a macro/population level or at a micro/individual level"⁵

6.2 Commissioning Levels

The process of commissioning is used at different levels across organisations within the partnership these levels are described as follows:

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⁴ Making Ends Meet SSI/Audit Commission

⁵ Department of Health

Strategic Commissioning – relates to the activities undertaken at a strategic level that outline the priorities and framework within which all services for children and young people are delivered.

Operational Commissioning – is the process of procuring and developing individual services in line with the Children and Young People's Plan. Such services could be universal, targeted or specialist e.g. GP's, children centre clusters.

Individual Commissioning – is the procurement and case management of packages of care and education for children and young people, e.g. foster care placements, family support etc.

6.3 The Commissioning Cycle⁶ Look at outcomes for children and young people Monitor and Look at particular review services groups of children and process and young people Process Plan for workforce Develop needs and market assessment with for joint development user & staff views planning & Commission -Identify resources commissioning including use of and set priorities pooled resources Decide how to Plan pattern of commission services and focus services efficiently on prevention

The joint commissioning framework has been developed using the DFES Joint Planning and Commissioning Framework for Children, Young People and Maternity Services, as outlined in the above diagram, and fits with the recently published Department of Health Commissioning Framework for Health and Wellbeing.

⁶ DFES Joint Planning and Commissioning Framework for Children, Young People and Maternity Services

7. Components of the Commissioning Cycle

7.1 The following describes the components of the commissioning cycle in more detail. The areas for analysis are provided as an example and are not an exhaustive list and may be adapted depending on the specific service area/project:

Strategic Vision

- What is the national, regional and local policy context for the delivery of services?
- What is the vision, goals and objectives for the organization? What is the core business?
- What is the organizations contribution to meeting key targets across the children and young people's partnership?

Needs Assessment

- What needs and unmet needs are there currently and how will these needs change in the future?
- Quantitative (secondary) data may include:
 - What are the demographics for the area and children and young people?
 - What are the trends by need, risk factors, location, year on year?
 - What proportion of children and young people has additional or complex needs? What are those needs?
 - What are the levels of deprivation?
 - What are the socio-economic factors?
 - Prevalence and incidence data?
- Qualitative (primary) data may include:
 - Views from children and young people, staff, providers, other stakeholders and agencies
- What are the findings of national, regional and local research or other reports?

Needs analysis can:

- Help estimate the current and future needs of a population
- Indicate the geographical distribution of need
- Identify those people who are at greatest risk of needing services
- Help identify the gap between met and unmet need.

Service Mapping

• What is the profile of local services? How are they currently delivered

- and by who? What are the range of services and numbers, referral patterns, referral pathways, take-up, throughput, profile of those using the service and changing trends over time? Profile of staffing etc.
- What is the profile of providers? What is the current capacity of organizations and partners? What relationships exist? Are there any market constraints? What is the market share?
- Are the processes that support delivery economical, efficient and effective?

Financial Mapping

- What is the distribution of resources across the organization/partnership, by service type? How does this compare with other areas?
- What are the costs for services? Are other sources of finance used? If so, how? How much income is generated? What are the key features for high cost services? What is the relationship between costs, quality and level of support? What is the budget breakdown and how does this compare across services?
- How does this translate to unit costs? What is the range and how does this compare? How do unit costs vary with performance?

Identify Resources, set priorities and plan services

- What is the pattern of services against need information? What are the gaps in provision? What future provision is required?
- How can supply match future priorities? What are the objectives and targets?
- What are the options for service provision in the future? Should services continue? Do they need to improve, require re-configuration or change?
- What issues need to be considered when making improvements? How will implementation of changes be managed?
- Do services need to be de-commissioned? Agree de-commissioning procedures.
- How does future service design tally with budget? Can funding be reallocated? What are the priorities?
- Can financial modeling of different service options result in different unit costs?
- Can external funding be sought to provide a service?
- Can services be jointly commissioned where objectives are shared and funding with one or more agencies pooled?

Procurement

- All procurement activity will comply with UK and EU Law.
- There is a government expectation that contestability will be applied to public sector markets
- There needs to be recognition that some agencies within the children and young people's partnership are commissioners as well as providers of services. The commissioner and provider function is therefore separated.
- All services will be procured against outcomes and on the basis of the most efficient and effective provider taking into account service quality.
- Procurement decisions will be taken in a transparent and accountable manner with clear timetables for decision making, complaints procedures and addressing any potential conflicts of interest.

Contract Management

- Institute processes and systems to manage the market to ensure it is sustainable
- Ensure that performance management and quality assurance processes are in place to ensure the quality of service within contract arrangements.
- These should include service providers, children and young people, staff views, complaints and concerns about commissioned services etc.

7.2 Commissioning and Service Development

The Children and Young People's Department is committed to continually improve the effectiveness and efficiency of services and will achieve this by:

- Understanding the current and future demand on services
- Ensuring that there is sufficient supply and mix of supply to meet the needs of children and young people
- Building relationships and working in partnership with others
- Fully linking financial planning and service planning

Commissioning should therefore result in a clear service and business direction by specifying:

 The type and volume of services needed for the future, including the quality and price of those services

- The type of provider to deliver those services taking into account the Children and Young People's Partnership's strategic priorities and core business and the development of the market
- How current supply can be changed or enhanced, new services developed, innovation encouraged and redundant or inefficient services de-commissioned.

To meet the challenge of joint working and joint commissioning it is imperative that we have a workforce fit for the future. To this end we undertake organisational staff training needs analysis, training and staff development. These are increasingly becoming more joined up as staff from different organisations within the partnership work together e.g. child protection training, common assessment framework and child concern model etc. We need to ensure that workforce planning is joined up and takes into account all stakeholders.

De-commissioning

As we strive to better meet the needs of children and young people and improve their life chances we will have to change the way in which we deliver services. Some commissioned services may no longer meet our priorities or deliver the outcomes that we wish to achieve. Some services may not offer value for money or not deliver to contract specifications. In such circumstances services will need to be de-commissioned and monies dis-invested. This will provide the Children and Young People's Partnership with opportunities to invest in new service areas or expand existing services.

7.3 Performance Management

Effective commissioning and planning are at the heart of delivering improved outcomes for children young people and their families. Effective commissioning and planning needs to be informed by robust data, that produces reliable information which creates good intelligence describing needs and specifying services which will produce good outcomes.

Results based accountability will be used to drive performance to deliver improved outcomes to local children and young people. This will be embedded in all contracted services and consists of the following components:

- How much do we do? (Quantity)
- How well do we do it? (Quality)
- Is anyone better off? (Results/Outcomes)

This methodology is currently being rolled out in Wirral starting with services commissioned by Children's Fund and On-Track and services directly provided

and commissioned by the Local Area Agreement pooled fund. (See Appendix 1 for a detailed description of the framework).

The interactions of these processes are described as the cycle of continuous improvement:



8. Joint Commissioning Priorities

8.1 Children and Young People's Plan and Local Area Agreement Priorities and Outcomes

The Children and Young People's Partnership has reviewed and evaluated progress in all areas of the **Children and Young People's Plan** and taking into account the Local Area Agreement, the Priorities conversation and Strategic Engagement Cycle with GONW it has identified the following specific issues for attention during 2007/08:

- Teenage Pregnancy reduction in conception rates for under 18's;
- Substance misuse especially alcohol abuse;
- Safely reducing the number of LAC children;
- Improving the stability of Looked after Children
- Reducing the number of out of borough independent and non-maintained special schools placements;
- Improving CVA from KS1 to KS2;
- Improving performance and attendance of looked after children;
- Reducing the number of schools around Floor Targets and OFSTED Categories;
- Addressing the number of persistent absences;
- Reducing NEET with particular emphasis at 17 years.

The 4 major **priority themes** of the Children's Services Department are:

- Improving Value for Money in Services;
- Intervening and Supporting Children Earlier;
- Supporting Children more in their Communities
- Reducing the Gap in Outcomes for Children

The **outcomes and priorities** relating to children and young people specified in the **Local Area Agreement** are:

Priority:	Being Healthy		
Outcomes: • Reducing teenage pregnancies			
 Improving the physical and mental health of children Priority: Staying Safe 			
Outcomes:			

Priority: Enjoying and Achieving

Outcomes:

- Raise standards in English, maths and science in secondary education so that by 2008, in all schools located in the districts in receipt of NRF, at least 50% of pupils achieve level five or above in each of English, maths and science
- Improve behaviour in schools through widening and improving the range of options available for tackling disruptive pupils
- Raising standards of achievement and aspirations for under-achieving groups including those disadvantaged by poverty, some boys and looked after children
- Raising standards of achievement and aspirations for children with learning difficulties and disabilities
- Provide a wide range of opportunities for sport, recreation and leisure, especially for disadvantaged groups

Priority:	Making a Positive Contribution

Outcomes:

- Broadening and deepening levels of engagement of children and young people in the design, delivery, governance and evaluation of services
- Develop activities to steer young people away from crime and improve their behaviour in the community

Priority: Social and Economic Wellbeing

Outcomes:

- Increasing the number of young people aged 16-19 in education, employment and training (with particular reference to young people leaving care)
- Provide a wide range of opportunities for post 16 education and training with appropriate guidance for young people to help them make the right choices

Please note: New indicators will be in place from April 2008 however, the indicators stated above will run until March 2009

The joint commissioning framework will contribute to the achievement of these outcomes and priorities using a strategic partnership approach governed by the Children and Young People's Management Board to improve service delivery and practice and deliver better outcomes for children and young people. The joint commissioning agenda is vast and challenging it is therefore prudent to adopt a phased approach with segmented areas of service.

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The following project/service areas have been agreed by the Children and Young People's Partnership as priorities for joint commissioning:

Joint Commissioning Priorities:

- Children with complex needs (primarily children with disabilities)
- High cost multi agency placements (including independent sector/out of borough – with an emphasis to return children and young people to Wirral)
- Development of a family support and parenting strategy
- Embedding the child concern model across the children and young people's partnership and shifting the balance of services to prevention
- Re-designing transition pathways and protocols

An action plan detailing the workstreams and implementation timetable for joint commissioning is attached appendix 2.

9. Governance and Accountability

The governance arrangements for Joint Commissioning are attached to this document (Appendix 3).

In relation to joint commissioning of services for children and young people's the Paediatric Review Group which has existed for some time has been reshaped and reformed into a joint commissioning group, which will report to the Children and Young People's Board.

The terms of reference for the group are:

- To utilise needs assessments to identify commissioning priorities
- To develop/ refresh the joint commissioning strategy
- To identify future strategic direction for the service development based upon the needs assessment and priorities
- To analyse current service configuration
- To understand the current spend on services and identify opportunities for cost efficiencies and future re-investment.
- To ensure that all commissioned services are fit for purpose and value for money
- To consider options for pooled budgets

- To ensure that there is effective involvement of users of services and carers
- To effectively develop and manage the market
- To ensure workforce development

Recommendations regarding the procurement or de-commissioning of services will be made by the Children and Young People's Management Board for approval by the Council's Cabinet or the PCT Board as outlined in financial regulations.

10. Towards a Children's Trust

The Government requires that Children's Trust arrangements are in place by April 2008. In Wirral we have strong partnership arrangements in place with a commitment from all partners to work together to deliver better outcomes for children and young people so that they achieve their full potential. This strategy is the next stage in the journey to strengthen partnership working and embed Children's Trust arrangements in Wirral.

11. Review of Strategic Joint Commissioning Framework

This framework will be reviewed by Children and Young People's Management Board in September 2008.



Local Area Agreement - Guidance for the operation of the aligned/pooled budget

1. Purpose of this guidance

This guidance sits within the Joint Commissioning Framework for services for Children & Young People.

The purpose of this document is to:

- Clarify the budgets to be aligned (2007/2008).
- Explain the aligned/pooled budget process.
- Describe the outcomes framework and performance management process used to inform decision making from 2008/9.

2. Aligned Budgets

The following budgets will continue to be aligned for 2007/8:

Funding Streams	2006/7 £'s	2007/8 £'s
Children's Service Grant	1,093,000	1,445,000
Child & Adolescent Mental Health Service	644,000	670,000
Children's Fund	1,325,303	1,241,300
Education Health Partnerships	91,424	108,199
Primary Coordination		184,935
Key Stage 3 – Behaviour and attendance	68,300	68,300
Key Stage 3 – Central Co-ordination	193,448	191,925
Neighborhood Renewal Fund	674,556	(To be confirmed)
Teenage Pregnancy	185,000	185,000
Partnership Grant	376,626	329,583
School Travel Advisor		39,000
Positive Activities for Young People		339,021
School Improvement Partners		99,500
Central School Development Grant		2,716,200
Total	4,651,657	7,617,963

2. Operation of the aligned budget 2007/8

2.1 What is an aligned budget?

This is an arrangement whereby partners align funding streams which can offer the opportunity to jointly commission services for children and young people. Such arrangements are not underpinned by a formal pooled budget agreement via either S.10 or S.31of the Health Act 1999.

- 2.2. The outcomes framework and performance management process (detailed in paragraph(s) 4&5) will be applied to all services delivered under the aligned budgets during 2007/8. This methodology will demonstrate how well services are performing both in terms of quantity and quality and whether they are achieving the LAA priorities and outcomes for children and young people within the Children & Young People's Plan.
- 2.3. The framework uses the Results Based Accountability (Mark Friedman) methodology and will be applied to all services (whether delivered by statutory or third sector organizations) and will try out the approach in readiness for pooled budgets from 2008. The results from 2007/8 (quarters 1&2) will inform decision making for budget allocation and service commissioning for 2008/9.

3. Operation of the pooled budget 2008/9

3.1. What is a pooled budget?

This is an arrangement whereby partners bring money together, in a discrete fund, to pay for services for a specified client group. Organizations will agree at the outset the range of health, local government and other services to be purchased and provided from a pooled fund.

Regardless of what contributions individual partners commit to the pool, the pooled resource can be used to achieve any agreed objectives set out in the pooled budget arrangement (or, if under Section 31 of the Health Act 1999, the partnership arrangement). This will mean that the expenditure will be based on the needs of the service users, and not on the level of contribution from each partner. This gives pooled funds a unique flexibility, whilst being bounded by agreed aims and outcomes.

- 3.2. The Children and Young People's Management Board (C&YPMB) will agree which funds will be included in 2008/9 following the outcome of the government's Spending review to be announced in the autumn. Several of the aligned budgets funding streams will come to an end in March 2008.
- 3.3. All services will be guaranteed 90% of their allocation (subject to compliance with contractual requirements).

3.4. The remaining 10% will be held in a central fund and will only be released to organizations if they have demonstrated to the C&YPMB that they have achieved outcomes and exceeded delivery targets.

4. Outcomes Framework

4.1 All directly provided or commissioned services must demonstrate that they are achieving the following LAA priorities and outcomes within the Children and Young People's Plan:

Priority:	Being Healthy	
Outcomes:		
Reducing teenage pregnancies		
2. Improving the physical health of children		

Priority:	Staying Safe	
Outcomes:		
3. Effective cross-agency working to safeguard children at risk of abuse		
4. Implement effective strategies to reduce bullying (including racial harassment and discrimination)		

Outcomes:

- 5. Raise standards in English, maths and science in secondary education so that by 2008, in all schools located in the districts in receipt of NRF, at least 50% of pupils achieve level five or above in each of English, maths and science
- 6. Improve behaviour in schools through widening and improving the range of options available for tackling disruptive pupils
- 7. Raising standards of achievement and aspirations for under-achieving groups including those disadvantaged by poverty, some boys and looked after children
- 8. Raising standards of achievement and aspirations for children with learning difficulties and disabilities
- 9. Provide a wide range of opportunities for sport, recreation and leisure, especially for disadvantaged groups

Priority:	Making a Positive Contribution	
Outcomes:	<u> </u>	
10. Broadening and deepening levels of engagement of children and young		
people in the design, delivery, governance and evaluation of services		
11. Develop activities to steer young people away from crime and improve their		
behaviour in the community		

Priority:	Social and Economic Wellbeing	
Outcomes:		
12. Increasing the number of young people aged 16-19 in education,		
employment and training (with particular reference to young people leaving care)		
13. Provide a wide range of opportunities for post 16 education and training with		
appropriate guidance for young people to		

5. Performance Management Process

- 5.1 Strategy/ cross cutting leads will have overall accountability for the delivery of services within their priority area.
- 5.2 The budget leads will be responsible for developing performance measures (linked to LAA priorities, outcomes within the C&YP Plan and contribution to PAF indicators) with individual organizations using the performance reporting template (see example below). This process will be led/supported by commissioners and programme leads.
- 5.3 The RBA approach essentially asks the following questions:
 - How much do we do? (Quantity)
 - How well do we do it? (Quality)
 - Is anyone better off? (Results/Outcomes)

This approach has been worked through using a school example to establish the performance measures for the service:

Performance Measures – School Example

Quantity	Quality	
How much do we do?	How well do we do it?	
No. of children served	% Common measures e.g. staff child ratio, workload ratio, turnover rate, staff morale, %of staff fully trained, % of children/families satisfied, unit costs	
No of activities (by type of activity)	% Activity specific measures e.g. % of actions being timely, % actions correct and complete, % of actions meeting standards	
Is anyone better off? – RESULTS/OUTCOMES		
How many?	% Skills/Knowledge	
-	e.g. children's problem solving	
How Many?	% Attitude/Opinion	
	e.g. towards other peers, parents, others	
	and customer satisfaction	

How many?	%Behaviour	
,	e.g. behaviour problems, school	
	attendance, fixed term exclusions	
How many?	Circumstances	
	e.g. educational achievement	

- 5.3. All commissioned services will be subject to a service level agreement. The service level agreement will include the outcomes, targets and quality indicators developed using the performance measures framework.
- 5.4. Performance will be measured by the completion of quarterly monitoring forms for each organisation. The C&YPMB will receive performance reports for the aligned/pooled budget twice yearly and strategy/cross cutting leads will report on their area.

6. De-commissioning/ Commissioning

6.1 De-Commissioning

Where services have underperformed (and depending upon their degree of underperformance) the 10% held in the pooled fund will not be released to the organisation and will remain in the pooled fund. The remaining pooled funds will be available to commission other services.

Should an organisation be deemed to be failing to deliver a service in accordance with their SLA and the breach cannot be remedied, or their services do not contribute to LAA priorities and C&YP Plan outcomes, then their service may be de-commissioned. Any remaining funds will remain in the pooled budget for commissioning other services.

6.2. Commissioning

Services will be commissioned using a contestability/value for money approach and where appropriate a robust procurement process where the C&YPMB agrees that there is:

- A gap in services
- Additional services are required
- Outcomes for children and young people will be improved

Joint Commissioning Framework Action Plan

Appendix 2

No	Actions/Tasks	Timescale	Lead	
Joint	Joint Commissioning Priority Areas			
1	Undertake review of children with complex needs (primarily children with disabilities), focusing on Willow Tree and Rosclare Resource Centres and Continuing Care Service	Recommendations to Joint Commissioning Group 11 th October 2007	JCM	
2	High cost multi agency placements (including independent sector/out of borough – with an emphasis to return children and young people to Wirral)	TBC	JCM	
3	Development of a family support and parenting strategy using the joint commissioning framework	Strategy developed by 31 st December 2007	CF&OT Mgr	
3a	Implement Procurement/decommissioning process	December 2007- June 2008	JCM/CF&OT Mgr	
4	Embedding the child concern model across the children and young people's partnership and shifting the balance of services to prevention	Action Plan in place	HOB – Social Care	
4a	Develop links and processes with District and Area Teams to inform strategic commissioning	March 2008	JCM/DM's	
4b	Implement joint commissioning framework within Children's Fund and On-Track	October 2007- March 2008	JCM/CF&OT Mgr	
5	Re-design transition pathways and protocols	December 2007	Transition Steering Group	
Embed Commissioning Framework				
1	Agree Joint Commissioning Framework	14 th September 2007	C&YPMB	
2	Consult stakeholders	September – October 2007	JCM	
3	Brief out to commissioning	November 2007-	JCM	

	bodies and stakeholders	December 2007	
Procurement			
1	Review procurement processes and procedures	Tbc	JCM/Contracts Manager
2	Review Service Monitoring processes	Tbc	JCM/Contracts Manager

Appendix 3

GOVERNANCE STRUCTURE FOR PARTNERSHIP ARRANGEMENTS: HEALTH, CARE AND WELLBEING

