

## Certificate of Credit in Commissioning and Purchasing for Public Care Assignment Template

**Please fill in your details here:**

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| <b>Student name:</b>                                    |  |
| <b>Student number:</b><br><i>(also enter in header)</i> |  |
| <b>Date assignment due:</b>                             | 2022   |
| <b>Date submitted on VLE:</b>                           | 2022   |
| <b>Student word count:</b>                              | 4985   |
| <b>Important Note:</b>                                  | Your submission, excluding the reference list and appendices, must be no less than 4,000 words and no more than 5,000 words: no tolerance is given. This is a mandatory criterion i.e. your assignment will not be passed if it does not adhere to the word count. |

**Assessor to complete:**

|                    |                                   |
|--------------------|-----------------------------------|
| <b>Word count:</b> | State word count and any comments |
|--------------------|-----------------------------------|

## Instructions to Students

Submit a written assignment which explains and reflects upon a commissioning or purchasing project that you have undertaken. The rationale for the work must be clearly set out in the context of national policy and best practice, and draws on a critical analysis of the current commissioning and purchasing arrangements in your local organisation or service. The project must have been accepted by your line manager as appropriate to the needs of your organisation or service, and have been undertaken during the course. Supporting information will be expected that gives evidence of the project activities and implementation of good commissioning or purchasing practice. References will be expected to key local or national documents and other relevant literature to demonstrate that you have undertaken wider reading and/or research.

The criteria used to assess the assignment are:

- a) Provide a rationale for the development of the project, drawing on a critical understanding of commissioning and purchasing good practice and national guidance.
- b) Demonstrate appropriate commissioning or purchasing practice.
- c) Critically evaluate the effectiveness of the activities undertaken and their impact on commissioning or purchasing practice within your team and/or organisation.
- d) Provide a reflective commentary that demonstrates personal development and learning.
- e) Demonstrate good academic practice applicable to the work-based project.
- f) Correctly and appropriately cite references and include them on a reference list

The criteria will be assessed using the assessment scheme below. You must submit your assignment by the deadline given. Submit your assignment as a WORD document using the blank pages of this template.

The assignment must be between **4,000 and 5,000 words** as no tolerance is given. The word count refers to the main body of your assignment and does not include the assignment title, reference list or any appendices. The word count **does include** headings and sub headings, footnotes, tables and in-text citations.

We require you to submit the assignment text to Turnitin and to report your Turnitin originality score on your statement of originality below.

**Ensure that you complete the front sheet details above and the statement of originality below.**

**Please include your full name within the filename when you save this template.**

Details of the relevant regulations are in the Student Handbook.

Ensure that you keep both an electronic and a hard copy of your assignment.

### Assignment Statement of Originality

Except for those parts in which it is explicitly stated to the contrary, this work is my own. It has not been previously submitted for assessment at this or any other higher education institution.

#### Checklist

Please check the following statements are true. Tick each box (or write YES):

|  |     |
|--|-----|
| I have included a reference list, using the Harvard system of referencing  | YES |
| I have provided references for all the sources, empirical evidence and other materials I have used in the main body of this work | YES |
| I have referenced all passages from my source material   | YES |
| I completed this work without any unauthorised help  | YES |
| I have submitted my work to Turnitin   | YES |

Please state your Turnitin originality score below and sign the declaration (or write YES if you do not have an electronic signature):

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| Student signature:                                    |

#### Extract from [Definitions of cheating](#)

All assessments are intended to determine the skills, abilities, understanding and knowledge of each of the individual students undertaking the assessment. Cheating is defined as conduct (whether successful or not) aimed at deceiving the University into acknowledging a false level of attainment by a student. Any form of cheating is strictly forbidden under the University regulations but, in order to assist understanding of what is meant by 'cheating', a number of specific forms are described here:

- *Submitting other people's work as your own* – either with or without their knowledge. This includes submitting work you have paid for as your own.
- *Collusion* - you must not collude with others to produce a piece of work jointly, copy or share another student's work or lend your work to another student when it is likely that some or all of it will be copied.
- *Falsification* – the invention of data, its alteration, its copying from any other source, or otherwise obtaining it by unfair means, or inventing quotations and/or references.
- *Plagiarism* – taking or using the words, ideas or work of others as your own. To avoid plagiarism you must make sure that quotations from whatever source are clearly identified and attributed at the point where they occur in the text of your work by using one of the standard conventions for referencing. It is not enough just to list sources in a bibliography at the end of your essay if you do not acknowledge the actual quotations in the text. Neither is it acceptable to change some of the words or the order of sentences if, by failing to acknowledge the source properly, you give the impression that it is your own work.

**Assessment Scheme**  
**Guidance for students/Assessor's Feedback:**

| Assessment scheme |  | D | M | P | R | F | Guidance for students   | Weighting |
|-------------------|--|---|---|---|---|---|---|-----------|
| a<br>)            | Provide a rationale for the development of the project, drawing on a critical understanding of commissioning and purchasing good practice and national guidance. | X |   |   |   |   | <p>There is a succinct introduction to the project which states the importance of this new area of work for the organisation. The organisation's vision and strategic outcomes provide a clear steer for the project. There is a sound argument made for the integral aims of the project and the key issues that need to be addressed.</p> <p>The reflection of local sufficiency factors across the national arena have been well explained, and pose clear drivers and justification for the project. There is reference to national legislation and research from social care sources to support your rationale.</p> <p>The emphasis on the 'analysis' quadrant of the commissioning cycle, and what this entails has been clarified, and you have referred to other commissioning tasks that will be touched upon.</p> | 20%       |
| b<br>)            | Demonstrate appropriate commissioning or purchasing practice.  |   | X |   |   |   | <p>The focus for the commissioning practice is well communicated. The strategic and broad scale of the market intelligence gathering process reflects the scale of the project and the partnership working with colleagues. Your responsibility within the project and the key tasks you carried out have been defined in a transparent way.</p> <p>The sequence of events conducted within the project activity have been excellently supported by the signposting to your appendices. The commissioning skills applied have been captured well. This is really well demonstrated by your consultation with young service users to discover what they value most about their homes. This section of the commissioning commentary could have been</p>   | 20%       |

|     |  |          |  |  |  |   |     |
|-----|--|----------|--|--|--|---|-----|
|     |  |          |  |  |  | <p>further strengthened with some references to relevant theory to enhance your practice-based skills.</p> <p>There are clear examples provided to illustrate your good practice, including the creative use of sources of data such as the Freedom of Information sources to verify the project outcomes. The market influencing process carried out culminates the project activity and endorses the key points that were met.</p>  |     |
| c ) | Critically evaluate the effectiveness of the activities undertaken and their impact on commissioning or purchasing practice within your service and/or organisation. | <b>X</b> |  |  |  | <p>The evaluation of the risk assessment completed for the project provides a constructive basis for the critical analysis. Your consideration of what you did, how you did it and what the benefits are for the organisation, the providers and the service users is pragmatic, creative and identifies some key learning points to take forward.</p> <p>There is good use of research and wider reading, which provides an evidence-based approach to the evaluation. The adaptation of the Signs of Safety model to scrutinise your commissioning practice has worked very well. I like the emphasis on the project activity as part of a larger continuum and the recognised need for ongoing development, monitoring and review.</p> | 20% |
| d ) | Provide a reflective commentary that demonstrates personal development and learning.   | <b>X</b> |  |  |  | <p>Your personal reflections on the project experience draw out a deep level of learning through the new skills and knowledge acquired when carrying out the project activities and participating in the commissioning course.</p> <p>Driscoll's three-staged reflective model is used in a perceptive way to gather your thoughts about what you have achieved and how you will use the acquired learning as part of your continuing</p>   | 20% |

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|     |  |          |          |  |  |  | professional development as a commissioner.  |     |
| e ) | Present your work clearly.   | <b>X</b> |          |  |  |  | The assignment is presented clearly and has a logical, cohesive structure which flows well and is easy to follow. The appendices support the main text and fully verify the range of work carried out.   | 10% |
| f)  | Demonstrate good academic practice applicable to the work-based project. |          | <b>X</b> |  |  |  | There is evidence of a wide range of reading to support the practice-based commissioning activity covered within the assignment. The final reference list is presented well in the Harvard style. There are some minor errors within the in-text citations, with the absence of page numbers for direct quotes from sources. | 10% |

D = Distinction, M = Merit, P= Pass, R = Refer, F = Fail

**Assessor's comments:**

The assignment presents a thoughtful, original and intelligent commentary and analysis of your project experience. The steep learning gained is evident and integrated throughout your assignment, and this has been really well reflected on as part of the critical analysis and personal reflection sections of the assignment. There was scope to build in more commissioning theory within the commissioning commentary, particularly to enhance the practice demonstrated when collaborating with the users of the services.

The assessment criteria have all been met to a high standard. The provisional grade awarded is 79%, which is a high distinction. Well done.

|             |  |      |                |
|-------------|--|------|----------------|
| Assessed by |  | Date | September 2022 |
|-------------|--|------|----------------|

**The marking and moderation process**

Your work will be assessed in accordance with the university's regulations that seek to ensure fairness, accuracy and clarity of feedback. In judging the quality of your work, assessors follow the assessment criteria outlined above. They also follow IPC's [Marking and Moderation](#) policy and abide by the University's assessment regulations. When your work is submitted it will go through the following process:

1. It will be initially assessed and given a provisional grade by a member of the IPC assessment team.
2. It may then be subject to moderation i.e. an internal examiner will mark it and, in discussion with the first assessor, confirm the provisional grade. A sample of assessments are moderated by an internal examiner.
3. We strive to give you feedback within three weeks. You will receive this feedback via the Virtual Learning Environment (Moodle).
4. Once a provisional grade has been agreed upon it will be finalised at the next Examination Committee meeting.
5. Your work may also be selected to be in the sample sent to our External Examiner – an academic from another university – who comments on the fairness, quality and consistency of the internal assessment of our programmes as a whole.

If you are concerned about your feedback, arrange to speak to your Academic Adviser to help you better understand the reasons for the assessment judgement and our feedback. If you think that there was a flaw in the assessment process, you can submit an Academic Appeal. More information about the appeals process can be found at [Student Investigation and Resolution Team](#). However, please be advised that the University does not "re-mark" work and you cannot request an appeal on the grounds that you disagree with the academic judgement of the Examination Committee.

**Market Position Statement for Children in Care in Hillwood Children's Trust**

## Rationale

This assignment will be exploring the creation of Hillwood Children's Trust's first ever Market Position Statement. A Market Position Statement is a document that "summarises supply and demand in a local authority area or sub-region and signals business opportunities within the care market in that area. The market position statement should be the basis for strategic commissioning and be published, reviewed, and updated regularly. It is intended to be used by providers to plan for the future, informing business choices such as investment in capital or personnel" (IPC Brookes, 2015).

The implementation of Section 22G of the Children's Act 1989 ('the 1989 Act') requires local authorities to ensure there are processes in place to secure sufficient accommodation that meets the needs of the children that the local authority have responsibility for. A vital part of Hillwood Children's Trust's (referred to as HCT) sufficiency duty is to have a comprehensive and clear understanding of the current and future needs of the market, which is what this Market Position Statement sets out to do. Before now, and since becoming independent from the County Council, HCT did not have a Market Position Statement (referred to as MPS). The MPS set out to identify the care and support needs for children, young people and families across Hillwood and explain how HCT intends to buy in services in the future. A MPS is vital in allowing providers and companies providing the care and support to know who they are designing the services for, now and in the future, to ensure the right care and services are planned and provided.

National guidance currently asks for every Local Authority to have a MPS, however this currently is not a requirement for Children Trust's. Therefore, HCT's MPS is showing initiative and innovation, getting ahead of the curve, as it is likely in the future this will be a statutory requirement. The MPS is set out to be an easily accessible document for providers and the public and will allow companies to shape and adapt their businesses for the supply and demand. HCT is open to innovative and creative responses to the sufficiency problems within the care system, and the MPS is one step towards creating a more transparent and open environment for HCT and providers to work together to ensure all children in care and children with disabilities are cared for to the highest standard.

The MPS is centred around HCT's vision: Children, Young People and Families at the heart of all we do – in every action we take and every decision we make. The MPS is starting a conversation with the market, outlining our key sufficiency issues and exploring the best solutions with providers and potential providers, to ensure children are receiving the highest quality care and support.

HCT's outcomes are for children and young people to live safe be safe, fulfil potential, develop resilience, and enjoy good health and wellbeing. Children and young people are unable to live and be safe if they are not in appropriate accommodation and homes. They are unable to fulfil their potential if they are not surrounded by people who support them and their needs. They are unable to develop their resilience if they do not have a safe home to come back to. They cannot enjoy good health and wellbeing without an environment teaching them how to grow and take care of themselves. The HCT mission statement is "Our ambition is to make a sustainable improvement to the lives of children, young people and families", which is one of the key local drivers for the MPS. The sufficiency of placements is integral to HCT's outcomes for children and young people. A child's home is their sanctuary, where they should feel safe to learn and grow and for each child this may look different. Efficient sufficiency of the market and providers should guarantee that there is an appropriate home for every child or young people that comes into the care of Hillwood Children's

Trust, however unfortunately that is not the case at the present time. This market position statement is being written to change that.

In Hillwood Children's Trust, the biggest challenge is sufficiency. Increasing numbers of children coming into care, children with increasingly complex needs and challenging behaviours, lack of personal care and support for children with disabilities and less children leaving care each year are all significant challenges that centre around sufficiency. These sufficiency challenges need to be addressed at the top, which begins with the external market and then trickle down through HCT to the children and families.

Sufficiency issues within children's social care services are not unique to Hillwood, they are challenges reflected nationwide. Brexit has had a shattering impact on an already fragile social care market, preventing thousands of overseas care workers from the EU moving and working in the UK. Skills for Care, (2021) found that "since 2012/13 the sector has become increasingly reliant on workers from the EU with 7.2% of workers (113,000) holding an EU nationality as at 2020/21, up from 4.7% in 2012/13". Since Britain left the EU, 'the social care market has campaigned for care workers jobs to be recognised as 'low paid but not low skilled' jobs with a high public value' (Skills for Care, 2021). The government have responded to the social care crisis by introducing "new immigration rules came into place in the UK in February 2022. Care workers are now a shortage occupation, meaning that they can immigrate into the UK providing the job meets the minimum salary level of £20,480 per year" (Skills for Care, 2021). The aim of the policy was to allow more carers from the EU to be able to move and work in the UK, "however, as at 2020/21 93% of care workers were paid below this rate", meaning that the care shortage will still be a challenge moving forward and many EU care workers will not be able to work in the UK unless their provider is willing to pay a higher salary (Skills for Care, 2021).

There is also a nationwide foster carer shortage, with '9265 foster carers' needed across the UK in the next 12 months alone (The Fostering Network, 2022). The Fostering Network (2022) states that around "13% of the foster care workforce retire or leave every year". They predict that "approximately 580 foster carers are needed in the East Midlands" (The Fostering Network, 2022). This is an increasing struggle as the number of children coming into care is rising across the UK and Hillwood and coupled with the reduced number of foster carers, this is leading to sufficiency shortages in homes for children in care.

These national sufficiency challenges are drivers for creating and opening conversations with the market about the future of children's social care. The Market Position Statement is the first step to addressing these challenges with providers and beginning a dialogue on how to find solutions. The Care Act (2014) places new duties on local authorities to promote the efficient and effective operation of the care market as a whole. The market position statement is the first step for HCT to do this publicly.

The Market Position Statement sits within the analysis section of the commissioning cycle and acts as a very important reflection on the state of the market. It incorporates resource analysis, it reviews the service provision, it provides a population needs assessment and highlights key legislation and guidance. From a procurement perspective, it influences resource allocation, analysing providers and assessing individual needs, in this case the needs of children and young people. The MPS will also touch on other quadrants of the commissioning cycle including the planning section, looking at gap analysis and reviewing market performance in the review section. However, the analysis quadrant in the commissioning cycle is where the weight of the MPS will sit.

## Commissioning Practise

The two main areas of commissioning practise that I focused on whilst writing the MPS was market intelligence and market influencing.

### Market Intelligence

Market intelligence is defined by Think Local Act Personal (2022) as “finding out about the market and what services and support is already available [...] the outcomes that people feel are important, how these are being achieved at the moment and what services and support is missing [...] information about the area such as needs of the people who live there and information about what services cost”. I sought to gain market intelligence by exploring the number of providers on HCT’s framework compared to the number of providers in Hillwood and surrounding counties. I liaised with colleagues from a range of teams such as sufficiency, commissioning and strategy, placements, leaving care, disabled children’s team, early help, foster care and quality. This helped me to gain a clearer picture of the current and future sufficiency issues that needed to be set out in the MPS and understood by the market, to prepare the market for future need.

I wrote the MPS alongside another large piece of sufficiency work I took part in, called the Sufficiency Strategy Report. These two pieces of commissioning work linked very closely as both were identifying the key sufficiency issues within children’s services. The key difference was that the Sufficiency Strategy would be an internal document, but the MPS would be put out externally for the market to utilise.

Colleagues and I conducted a needs analysis for the main sectors of children’s placements, in-house fostering, external fostering, in-house residential and external residential. My role within the needs analysis was collating and analysing the data and forecasting future trends, as this is my area of expertise. The needs analysis table was taken from the commissioning course and adapted to fit the needs of the task (shown in Appendix 2, Needs Analysis). The needs analysis identified the current user population (including numbers, age, gender, ethnicity and need), future user population (the forecasted number expected for each area, the emerging trends and challenges (locally and nationally) and the target placement type or service (what we want to see happening in the future). The needs analysis helped to establish the resilience/protective factors and mitigate the risk factors.

For the Sufficiency Strategy report, consultation workshops were conducted with the service leads of every team in the Trust, exploring and discussing the main sufficiency issues within that area. (Appendix 3, Sufficiency Strategy presentation). I was responsible for providing all of the relevant data for the presentation, including forecasting models and establishing key trends. During the presentation that was delivered to the service leads, I ensured any queries or questions about the data or information being presented was recorded and explored afterward to ensure accuracy and consistency. The service leads comments were also recorded and this directly fed into the key points of the MPS, highlighting the areas each team felt was most important. This allowed them to give qualitative contributions to my findings and feedback on what they believed were the biggest challenges in the service area. The consultation was also beneficial for the service leads as some of the challenges they believed to be the biggest were not reflected in the data I had collected. The consultation ensured there was a whole system, holistic approach to both the Sufficiency Strategy and the MPS, and the two commissioning documents worked together in harmony. It was

important although the MPS would be an external document, it would echo the internal dialogue of the Trust.

My colleagues, the Participation team held an event to gain young people's feedback on 'good' and 'bad' things about residential homes for Tender Training, which was incorporated into the residential children's homes and fostering sections of the market position statement (Appendix 3 – Young People's feedback). Young people said they liked clean, friendly and spacious environments, with staff who wanted care for them and take them out for activities and games. Young people emphasised the importance of staff who listened to their problems and supported them, key points that are often not mentioned as they are sometimes overlooked or taken as a given. Young people said they didn't enjoy when their homes weren't clean or staff were rude, or when they didn't have access to resources such as Wi-Fi. Again, incorporating the voice of children and young people and what they want (or don't want) in their placement, is vital. The placement is for the children and young people to feel safe, happy and supported and the MPS would not be an all-rounded, inclusive document if it did not include their views. Market intelligence is about collecting and understanding the needs of the population that are commissioning services for.

Market intelligence is also being used in this MPS to enable providers to better understand their competitors, gaps in supply and opportunities available. The aim is to provide clarity to service providers to assist with their business planning. This also links to market shaping, as stated in the 2014 Care Act "the core activities of market shaping are to engage with stakeholders to develop understanding of supply and demand and articulate likely trends that reflect people's evolving needs and aspirations, and based on evidence, to signal to the market the types of services needed now and in the future to meet them, encourage innovation, investment and continuous improvement" (Department of Health & Social Care, 2022). Therefore, it was vital to include providers within the creation of the statement. I created a questionnaire for providers on HCT framework asking about what type of information they would find useful and beneficial within the MPS (Appendix 8 – Questionnaire for Providers). The questionnaire gave a list of options from children in care population data to information about the framework and providers were also able to add any further comments or suggestions. Engaging with providers is vital for commissioning and building strong working relationships. The providers feedback will be key to shaping the main components of the market position statement.

I did further analysis of what providers would find beneficial to be included in the market position statement, looking at previous Freedom of Information Requests (FOIs) (Appendix 6 – Freedom of Information Requests Analysis). A FOI is a request that anyone has "the right to ask any public sector organisation for information they hold" (NI Direct, 2022). HCT receive a lot of FOI requests, which not only take up a lot of time to complete, but often ask similar questions. If a market position statement could include majority of this information, this would save HCT and members of the public, a lot of time. My analysis included looking at past FOI requests which showed that there were common themes including asking about the number of children and young people in residential homes, ISAs and fostering, the prices of the most expensive placements or the average weekly cost of a placement and HCT's budget for placements. Many of the people who write in FOI requests are already providers or considering setting up their own service. The MPS needs to be a document which sets out this information for them and presents the demand for their service. This also links to the values underpinning HCT surrounding the rights of the individual. I found this a helpful exercise as it highlighted the most frequent questions asked, giving an indication of the type of information that needed to be included within the market position statement and also fed into my market intelligence.

## Market Influencing

The definition of market influencing, or market shaping is to “engage with stakeholders to develop understanding of supply and demand and articulate likely trends that reflect people’s evolving needs and aspirations, and based on evidence, to signal to the market the types of services needed now and in the future to meet them, encourage innovation, investment and continuous improvement” Department of Health & Social Care (2022). Market influencing was the second phase of the MPS. When the market is aware of the future need, it will adapt to ensure it meets that need. Market intelligence and market influence are intertwined, as one cannot exist without the other. Market influencing is a commissioning component from the MPS that is pending upon the statement being published publicly. However, this does not take away from the importance of the impact of market influence, as this was an aspect that I considered at every stage in the statement, particularly within the style of how it was written.

To explore the most efficient way to market influence, I set up a meeting with a senior colleague who had previously wrote a Market Position Statement at their previous Children’s Trust, to ask for advice on what was most important to include and some things they would change on reflection (Appendix 1 - Meeting minutes). This meeting was integral to outlining the key points that the market position statement would highlight. This meeting gave me insight on how to write the statement and approach the external market. Although the market position statement was a document presenting the problems and challenges HCT was and are still facing, from a business point of view HCT also needs to attract providers to work with. The meeting gave insight into how to present HCT to the market and to highlight the support and innovation they want to give providers through presenting HCT in a light that shows we are open to creative conversations and solutions, and showing we are looking to work with providers collaboratively without blame, rather than a typical local authority and service provider type relationship. This meeting changed how I was going to write the market position statement, as it taught me to focus on influencing the market through strength-based language and initiatives rather than just informing providers of our current sufficiency situation.

## Analysis of Practise

I undertook a risk assessment (see Appendix 7 – Risk Assessment of the Market Position Statement) for the market position statement, exploring the potential risks that may be involved in a projected activity. I found that some of the potential risks were the limited knowledge of the market, the lack of engagement with providers and the lack of political appetite for change. I combatted the main risk, the limited knowledge of the market, through extensive research and conversations with a wide range of teams and colleagues in HCT, as well as desktop research looking at the national sufficiency market challenges within children’s social care. The independent review of children’s social care report, by Josh MacAlister (2022), was a key document within this research, as it highlighted the top national sufficiency challenges, such as the ‘need for sufficient early help, creating stable homes for children who live in residential care but would be better suited to foster care, and forming a stable workforce’, many challenges that mirror those experienced by HCT. However, despite extensive research and conversations, it is inevitable that there will still be limitations to my market intelligence whilst writing the statement. It was important for me to reflect on the areas I believed I knew well and those I had little knowledge of and acknowledge these limitations through research and conversations. I learnt that as a commissioner, it is vital to have a hold on the big picture, however this means you aren’t always

able to see the detail. Therefore, you need the experts in those areas to contribute to the details to ensure you have both context and specifics.

Throughout writing the market position statement, I used the HCT Signs of Safety model to critically evaluate each stage of the process. The Signs of Safety model is an “internationally successful model that is focused on identifying areas that need to change while focusing on the strengths” (Hillwood Children’s Trust Intranet, 2022) that is embedded throughout HCT practise. Although Signs of Safety is primarily intended to be used with children and families, it is adaptable to be used within in commissioning practises which also ensure consistency of quality throughout the Trust.

In the Signs of Safety Assessment and Planning Framework (Appendix 5 – HCT’s Signs of Safety Framework), the three questions are:

- What are we worried about?
- What’s working well?
- What needs to happen?

What are we worried about?

One weakness of the market position statement is the lack of collaboration with providers and the external market. The market position has been created for the benefit of providers, signalling to the market the types of services needed now and in the future. Therefore, it is vital for providers to be involved and engaged to ensure that the statement would provide information that would be beneficial for them and their service. It would have been beneficial to hold an event, speaking to providers and services about the problems of the market, the information they would find useful and joint solutions to the challenges within children’s social care. However due to time and cost constraints this was not possible and I sought to overcome this by using a questionnaire and desktop analysis of previous FOI requests.

Another worry is that the market position statement will not reach its intended audience. The plan is for the statement to be published on the HCT public website, so it is easily accessible to providers and members of the public. However, there is a lot of information on other documents and services on the Trust website, which means unless providers or members of the public know what they are looking for, or what a market position statement entails, it may get missed. I aim to combat this risk by referring to the MPS at provider events, newsletters and on HCT’s social media for the general public.

This is Hillwood Children’s Trust first market position statement and as there was no precedent before, it is likely that the position statement may not include all relevant information and include information that may not be relevant at all. As the first statement, it is still establishing the type of report it is required to be. This statement will act as a starting point for the statements ahead, each time being refined and developed further.

What’s working well?

The market position statement has been a joint, collaborative piece of work running alongside the Sufficiency Strategy report. Activities such as the service leads workshop was a key event that allowed for everyone’s input and contribution, to ensure both reports reflected a holistic view of the Trust and its challenges. Looking and reviewing the overall data has given me a deeper

understanding of the sufficiency challenges faced by HCT and already found some solutions and debunked certain myths.

Loeffler & Bovaird (2019) found that two key problems with commissioning public services in the UK is 'focusing on the commissioning of services to patch up short-term problems, rather than looking at long-term outcomes and not embedding and supporting citizen's voices when preventing problems'. This MPS aims to combat both problems by acting as a catalyst to change HCT's relationship with providers and the market whilst at its heart incorporating the voices and needs of children, young people and families.

What needs to happen?

As the market position statement is still under construction, I need to finish the initial writing and send out to wider colleagues for informal feedback and opinions. After that feedback has been reviewed and incorporated within the statement, it will be sent to senior management for final comments. Once they have reviewed and fed back, then the statement can start to be implemented and published onto HCT's public website. As referenced in the previous question about worries of it not reaching the right people, to ensure that that the statement receives maximum exposure, it will be promoted on HCT's social media. Following this, the market position statement will be reviewed, updated and improved every 2 years to ensure the document is still relevant and beneficial.

One of the most critically important questions to ask, based on HCT's key vision, is how will this piece of work impact on children, young people, families, service users and carers, and to what extent? The answer to that question is complex, much alike the challenges it is aiming to solve. The market position statement is a long-term solution to an even longer-term problem, it is likely to have little or no impact directly on families when it is published. However, what it signifies to the external market is that there are certain challenges and HCT is willing to work together. The impact of doing nothing means that the market will continue to decline, it will continue to grow more expensive and privatised, placements sufficiency will decrease and become even more limited, and children and young people will suffer. More children will end up in placements not suitable for their needs, resulting in more placement breakdowns, more trauma for the child and the increase in the use of unregulated or unregistered placements, which are illegal.

### Personal Reflection

For my personal reflection, I adapted and used the Driscoll 'What, So What and Now What' model (Driscoll, 1994) to explore my personal experience and learning.

What?

I only started my journey in commissioning a year ago, as I became Sufficiency Project Officer for the Commissioning and Strategy team at Hillwood Children's Trust. Shortly after starting in my role, I began the Commissioning course. The course was my first experience of commissioning, and I did not have any prior knowledge. The course introduced me to the world of commissioning, exploring good practise, key commissioning terms and relationship building with providers. The course gave a helpful overview and context to all parts of commissioning. The context and background were vital, as often starting a new job in a different area, you are taught the actions to take, but not the reasons behind it. It also helped me practically to build on my planning and time management skills by keeping to my project plan (Appendix 9 – Project Plan). The course showed me the various

ways of commissioning and gave me the tools and knowledge to be able to choose the type of commissioner I wanted to be.

In module two, session two, we learnt about market shaping and market position statements. Working in sufficiency, I had experienced first-hand the difficulties that HCT was having with the current climate of the market and sourcing and engaging providers. I knew that a market position statement would be invaluable to HCT and it would begin a much-needed conversation with the market. I have experience and enjoy working with data, however this course taught me how to use data in a way to signal to the market about the types of services that are needed now and in the future. I was working with the same data in the Sufficiency Strategy report, however the way that it was presented in the internal report compared to the market position statement, would be very different. The commissioning course taught me that the market position statement needed to not just set out the challenges HCT were facing, but to encourage creativity and innovation, encourage investment and promote continuous service improvements. The course highlighted the importance of effective relationships with providers and the benefits this could bring. The market position statement wasn't just a document for HCT, it was for the market.

#### So What?

Throughout my school years and university, I have had ample experience writing academic style reports and essays, however writing the market position statement has been a completely new experience. The market position statement needed to be written in such a way that it provided the depth and insight into the challenges being experienced but it needed to be presented in a clear and simple way. This meant that I needed to completely understand the information I was working with and using in the statement. Often the data and information were extremely complex, but I needed to understand it to a degree where I was able to precisely summarise and present this information in an accessible way. The statement has really developed my knowledge of sufficiency and data at HCT, whilst this course has given me the skills to look at it through a commissioning lens.

The commissioning course introduced the topics of procurement, needs analysis, options appraisals, reviewing and monitoring, all areas I practise daily in my job. However, the course gave me a deeper understanding and a manifold of ways to approach them. I found it useful how each topic was discussed within our smaller groups with direct examples of how it is or can be used within our work. This is what made this course and the learning different to any other type of education for me.

#### Now What?

As the newest member to the Commissioning Team at HCT, the course also gave me quality time with the team to discuss, collaborate and build relationships with my colleagues. Despite majority of the team having many years of experience in commissioning, the course still felt like a space where everyone was learning new things, which as a newcomer, was very comforting and welcoming. As commissioners, our team lead very busy work lives, juggling numerous projects and workstreams, with very little time to come together and reflect. The commissioning course carved out that time for the team to come together, to listen to one another and develop our understanding, which is one of the most important attributes I will take away from this course.

Moving forward into the future as a commissioner, I am looking forward to using my commissioning knowledge in practise to expand my experience. This was an invaluable course that I was fortunate enough to participate in so early in my career, which has built the foundations of

my professional toolbox. Commissioning is the process of “strategic activity of identifying need, allocating resources and [...] meet that need, within available means” (Local Government Group, 2011). These skills can be applied to all walks of life, professionally and personally, and has altered the way I think strategically about a situation or a challenge.

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**Appendices**

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| Appendix 1 – Meeting Minutes                                  |  |
| Appendix 2 – Needs analysis of placement provisions           |  |
| Appendix 3 – Sufficiency Strategy presentation                |  |
| Appendix 4 – Young People’s Feedback                          |  |
| Appendix 5 – HCT’s Signs of Safety Framework                  |  |
| Appendix 6 – Freedom of Information Requests Analysis         |  |
| Appendix 7 – Risk Assessment of the Market Position Statement |  |
| Appendix 8 – Questionnaire for Providers                      |  |
| Appendix 9 – Project outline for MPS                          |  |