

OXFORD
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institute of
public care

Certificate in the Principles of Commissioning

OBU Course Code: WFPC4001

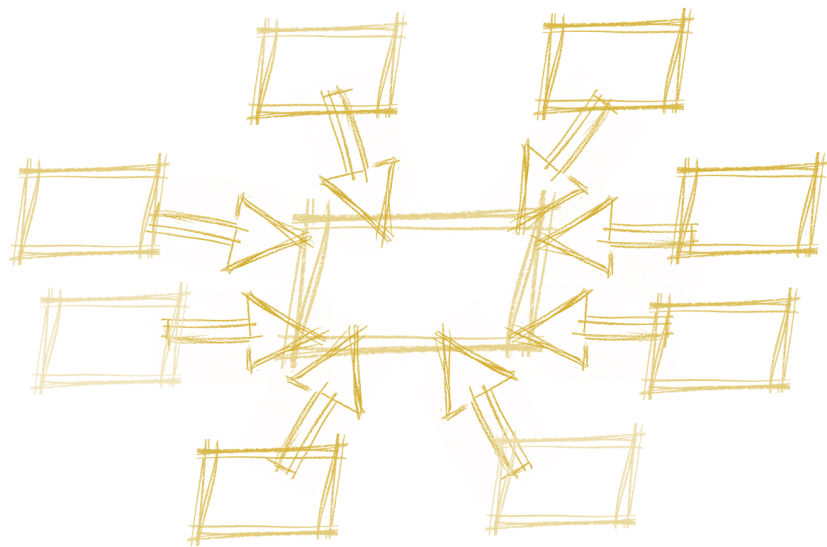
**West Sussex County Council Workforce
Development Programme**

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Namaste مرحبا Bem Vindo Selamat Datang
Bienvenidos Namaste Bienvenue Croeso Willkommen Welcome Bienvenidos أهلا وسهلا
Benvenuti Welkom Bienvenue Bem Vindo
Bienvenidos مرحبا Welcome Welkom
Selamat Datang أهلا وسهلا Croeso Namaste
Welcome Bienvenue أهلا وسهلا Bem Vindo
Willkommen Benvenuti Willkommen
добре дошъл Καλώς ήλθατε

About this course

The aim of this course is to provide an introductory overview of the principles of commissioning, contracting and procurement in West Sussex, supporting you to considering you role within the commissioning process, and how you can contribute to good commissioning practices



Our approach

- Two whole day, in-person sessions to introduce good practice for commissioning in public care
- Content is based on the IPC Commissioning Cycle and our popular and well-established Commissioning Course
- Each session will include an introduction from areas of the commissioning cycle quadrants (analyse, plan, do, review), coupled with facilitated discussions / break out groups

Sessions 1 and 2

Session 1 – Analyse and Plan

- Recap of the definition of commissioning, and what it entails
- Consideration of the current national and local agenda influencing commissioning in West Sussex
- Needs assessment and gap analysis
- Introduction to Outcome Based Commissioning
- Optional accreditation

Session 2 – Do, Review and cross cutting

- Market intelligence and shaping
- Introduction to procurement and purchasing
- Managing provider relationships
- Outcomes Based & Performance Monitoring
- Engagement and involvement of local people in commissioning
- Commissioning Skills

The IPC Commissioning Cycle



Market Intelligence and Shaping



Discussion

- What do we mean by the term 'market'?
- Who is your 'market'?
- What types of providers do you work with?
- In one word, how would you describe your provider market?



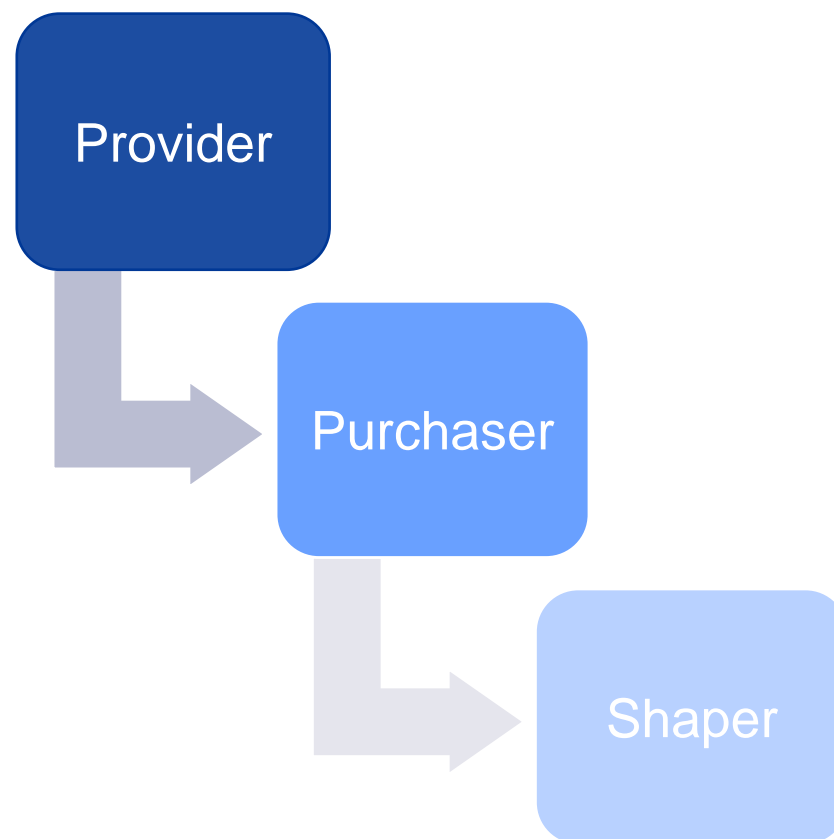
A duty towards care markets

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 should be:

- Sustainable
- Diverse
- And focus on quality

Sufficiency Duty (Children's and Young Persons Act, 2008)



The 'sufficiency duty' in children's services

- Statutory Guidance for Local Authorities on Services and Activities to Improve Young People's Wellbeing (2012)
- Statutory Guidance on Securing Sufficient Accommodation for Looked After Children (2010)
- Statutory Guidance for Local Authorities in carrying out their Childcare Sufficiency Duties (2010)
- Children and Families Act 2014 – including the local 'information and advice offer'

What is market shaping?

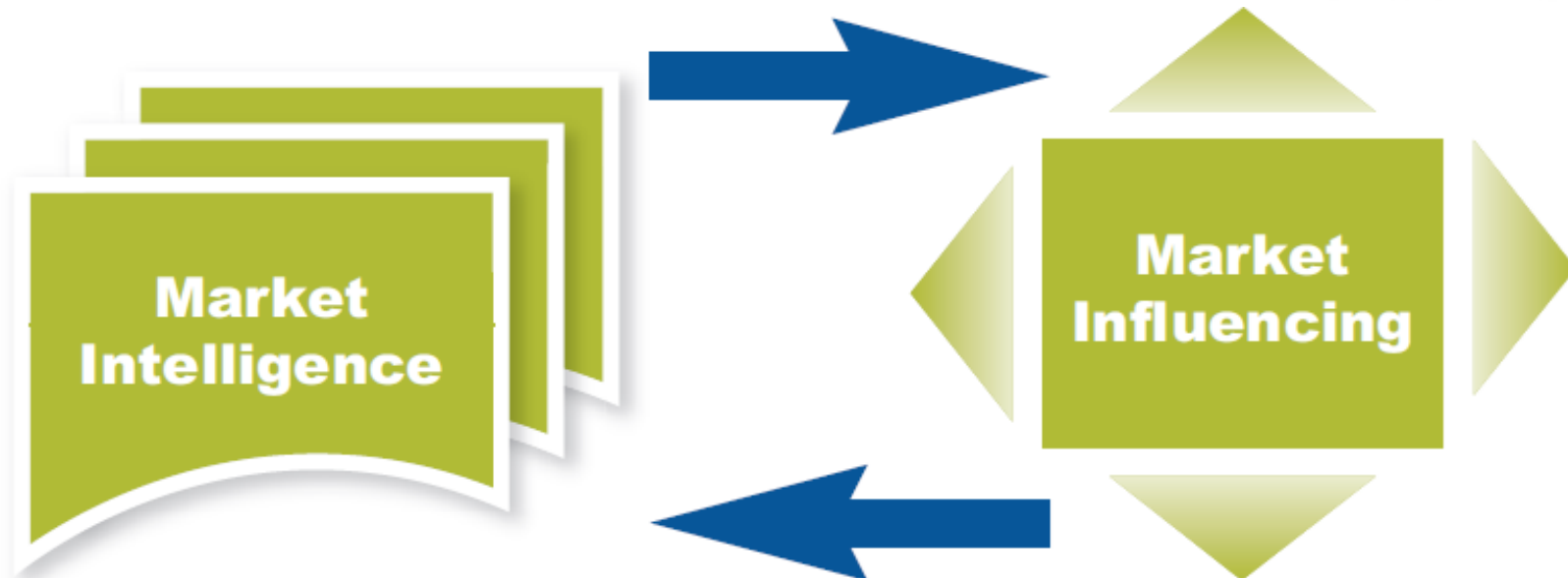
“Market shaping means the local authority collaborating closely with other relevant partners...to encourage and facilitate the whole market in its area for care, support and related services.”

Care and Support Statutory
Guidance, Section 4.6



Key components of market shaping

Market
ShaRe 



Activities which seek to understand the market

Activity taken to influence current and future range of supports/services

Market intelligence

Market intelligence can (or should) be used in several ways. For example:

- Informing commissioning and procurement practice by establishing the nature, gaps in and quality of supply in different market segments and the aspirations of those providers
- Enabling providers to better understand their competitors, gaps in supply and opportunities
- Underpinning market oversight and contingency planning arrangements



What types of Market Intelligence do think is important?

- Gaps or oversupply in the market
- Quality of service provision
- Inputs and outputs (*Value for money?*)
- Outcomes (What is the impact?)
- Cost
- Sustainability or viability of your market

Market influencing – core activities

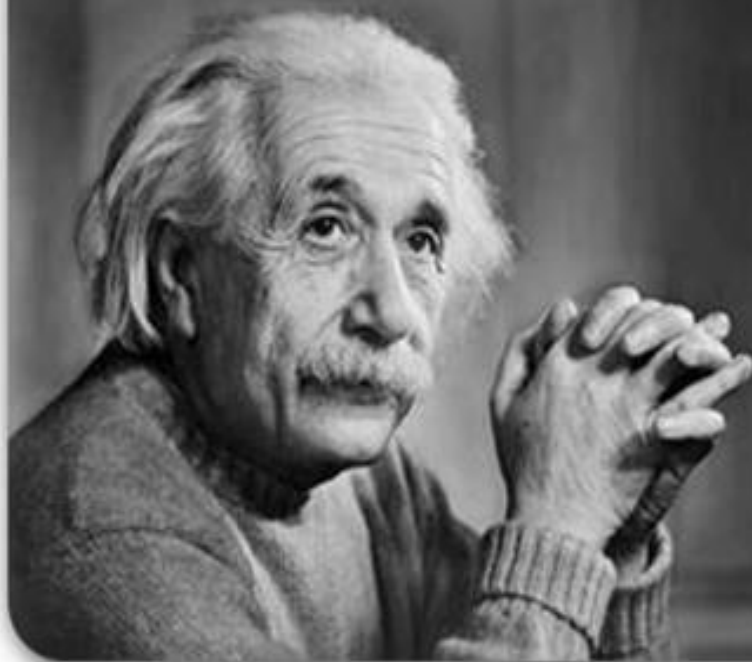
- Signal to the market types of services needed now and in the future
- Encourage creativity and innovation
- Encourage re-investment and investment
- Promote continuous service improvements



Market Position Statements or Sufficiency statements

If you can't explain it **simply**, you don't understand it well enough.

– Albert Einstein



Some examples of market influencing activities



**Shared market
and consumer
research**

**Workforce
Development
e.g. training**

**Seed funding /
Small Grants for
innovation /
pilots**

**Co-designed
services /
strategies**

**Performance
Management /
Quality
Assurance
activity**

**Jobs portal for
approved
providers,
hosted by the
authority**

**Capital funding
opportunities**

**Lead providers
for geographical
areas**

**Meet the buyer
events**

Provider forums

**Joint
commissioning
of residential
spaces**

**YOUR
ACTIVITIES &
EXPERIENCES**

All these activities influence the market, yet the role of the commissioner and other stakeholders can differ



Group Discussion

What might determine the market
influencing / shaping activities?



Introduction to Procurement



Procurement and contracting are...

Procurement is the entire process of sourcing goods, works or services from (usually) external providers/suppliers, risk management, and overall supplier management (including performance tracking) and managing these through to the end of contract.

Contracting is an essential part of procurement – it is the process of negotiating and agreeing the terms of a contract for services, and on-going management of the contract including payment, performance monitoring, and relationship maintenance.

The legal procurement framework



What can your procurement colleagues help you with?

- Feedback on service specifications
- Advice on appropriate procurement and tendering routes
- Support on the content of contracts and overall contract management
- Legal and finance colleagues also to be involved

TOP TIP: Contact with these colleagues as early as possible when you know a change or procurement activity may be required

Potential Procurement Routes



Competitive Procedures (most common)

- Open tendering
- Restricted tendering

Frameworks

- Dynamic Framework Systems
- Restricted Frameworks

Other options (to be used with caution)

- Spot purchasing
- Direct award

How to select the best provider?



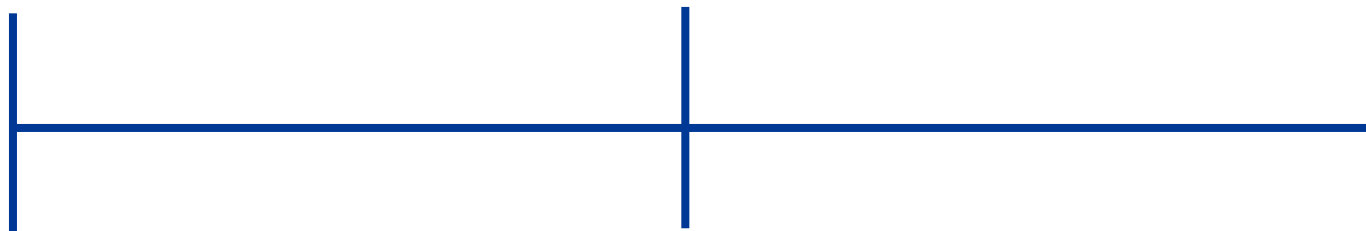
The following to be considered when evaluating a procurement activity:

- Pre-Selection Questionnaire – is this needed / wanted?
- Method Statement Questions
- Transparent evaluation process (including option for pass / fail) – what methods will you use?
- Evaluation panel – will you use people with lived experience?
- Weighting between cost and quality
- Consideration of Social Value?
- Standstill period – steps to mitigate any risk of legal challenge

Managing Provider Relationships



What are your relationships like with providers you work with?



Adversarial:

- Low trust
- Transactional / legalistic
- Closed / one sided communication
- No collaboration
- Blame culture
- Customer / supplier culture

Constructive:

- Mutual trust
- Partnership working
- Consultation and consensus building
- Open communication
- Joint problem solving and risk sharing
- Expectations of the roles and responsibilities of each party are clear and understood

Passive:

- Too familiar or cosy
- Little challenge
- Roles and expectations of each party is unclear or not fulfilled
- Fear of upsetting each other

Table Discussions

On your tables, suggest:

- Ideas for what helps to promote effective relationships (and why)
- Any actions or improvements could be made in your teams / areas

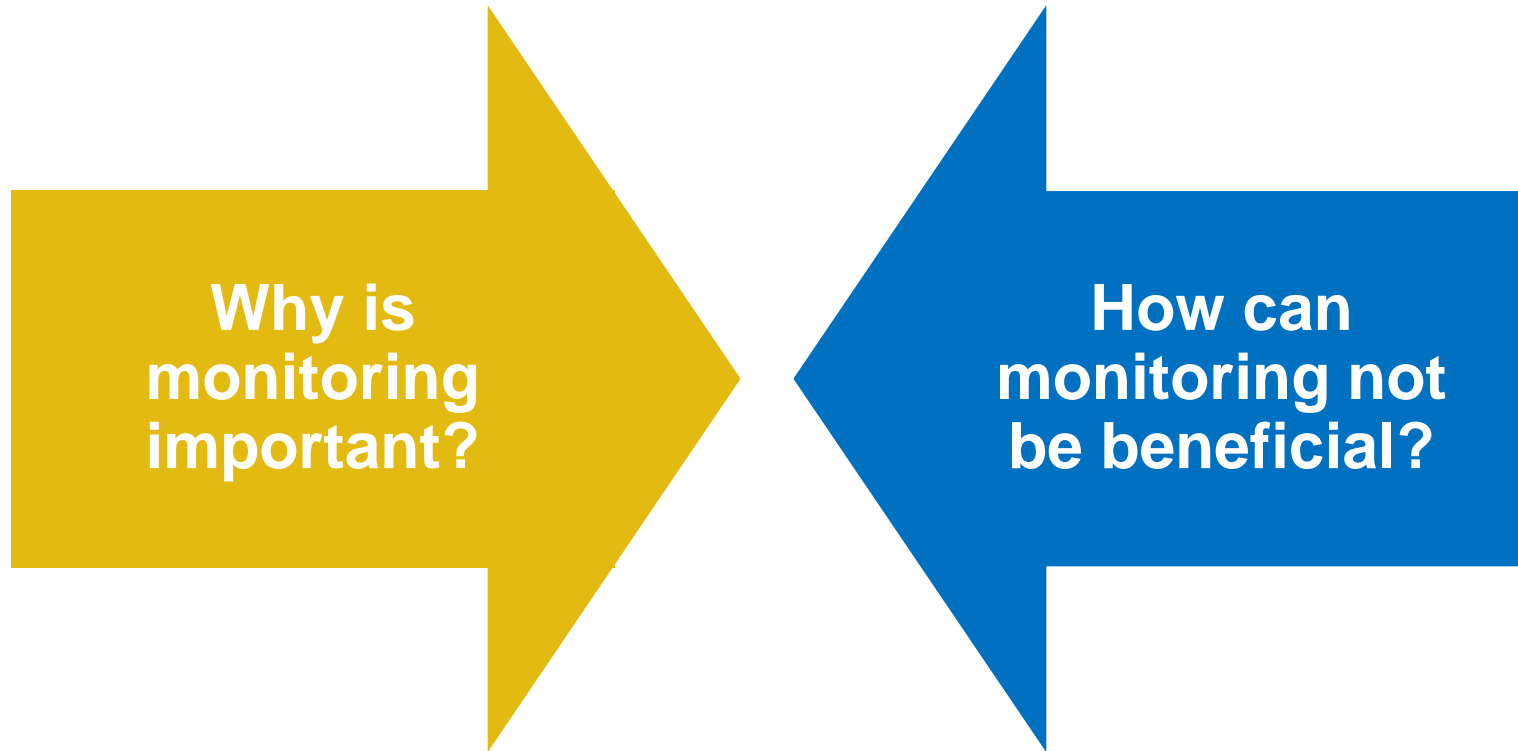




Reviewing / monitoring services



Why is monitoring and review important?



Why is monitoring and review important?

Having good quality information and analysis to:

- Judge efficiency and effectiveness
- To provide challenge and look for continuous improvement

Making decisions about inefficient, ineffective and unsustainable services:

- Supporting and challenging
- Decommissioning and finding other provision

Take 'Six Steps'!

1 Agree what's needed – your 'objective'



2 What model of care works!



3 Agree what will it tell you if it's working



4 Measure it!



5 Make some sense of what the evidence is showing



6 Carry on or change it!



A reminder...



Inputs



+ Processes



+ Outputs =

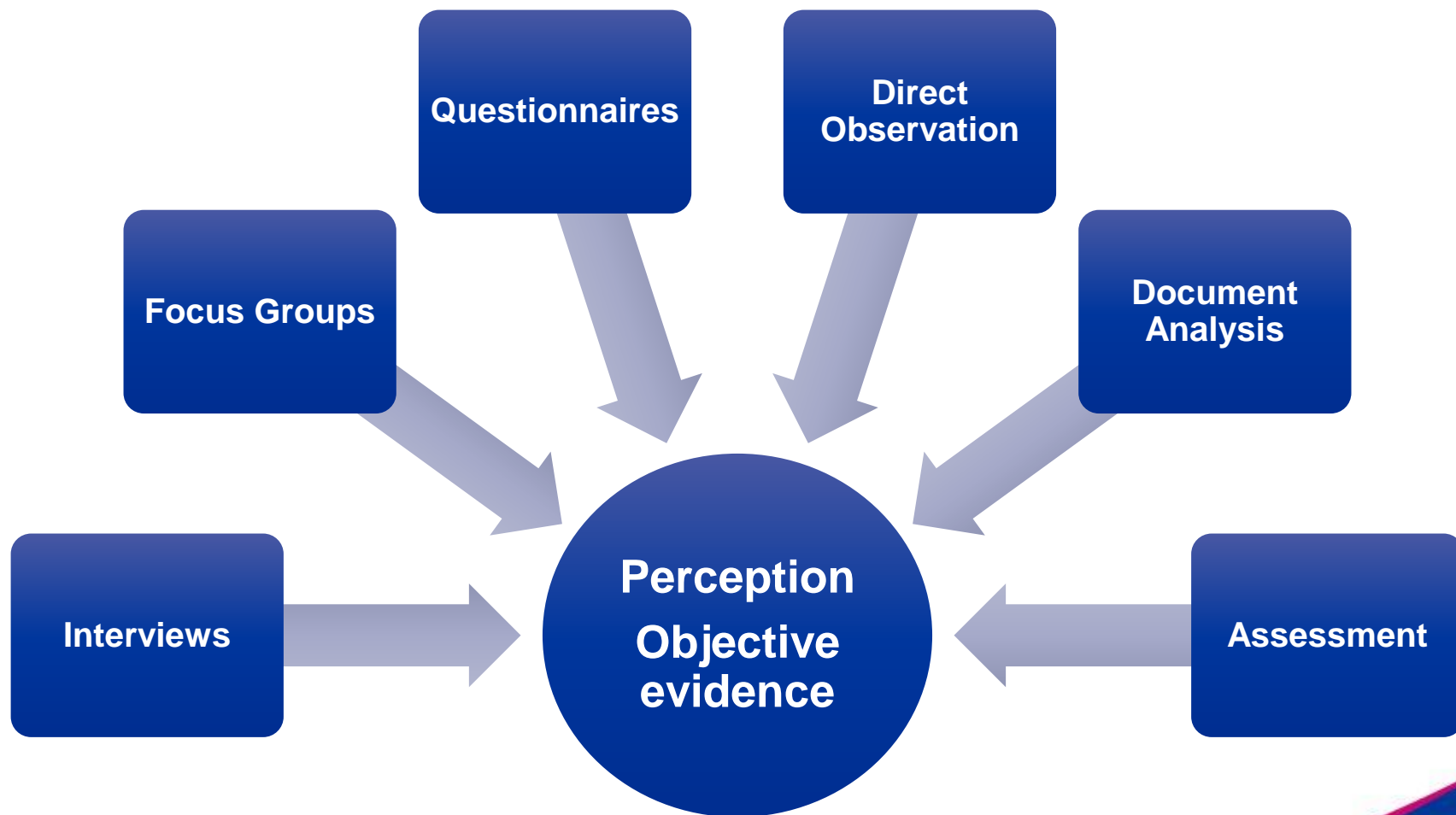


Outcomes!

Measuring / monitoring for outcomes

<u>How much did we do?</u>	<u>How well did we do it?</u>
# Customers served (by customer characteristic)	% Common measures Workload ratio, staff turnover rate, staff morale, percent of staff fully trained, worker safety, unit cost, customer satisfaction: <i>Did we treat you well?</i>
# Activities (by type of activity)	% Activity-specific measures Percent of actions timely and correct, percent clients completing activity, percent of actions meeting standards
<u>Is Anyone Better Off?</u>	
# Skills / Knowledge	% Skills / Knowledge
# Attitude / Opinion	% Attitude / Opinion including customer satisfaction: <i>Did we help you with your problems?</i>
# Behavior	% Behavior
# Circumstance	% Circumstance

Measuring outcomes



Individual outcomes

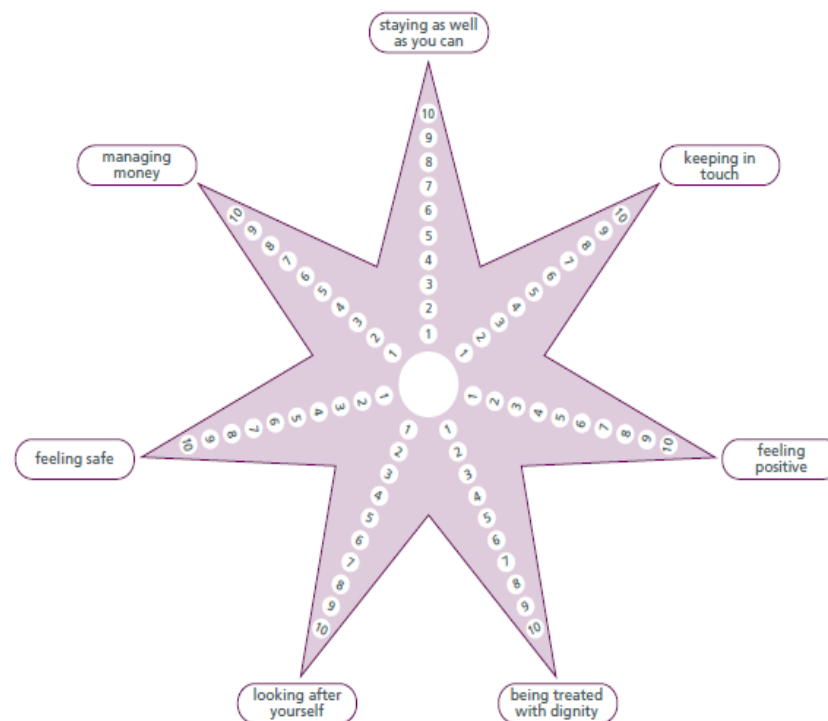
- Anecdotes/quotes
- Case studies
- Self-reported change
- Surveys (Before/After)
- Comparison Groups
- Random Control trials
- Any others?



Dan Corry, Chief Executive of New Philanthropy Capital (NPC)

Example – outcomes star

- A tested and effective motivational tool, which services integrate into assessment and review
- Record where client is and how they progress in up to 10 areas of their life
- Scales are underpinned by a journey of change



Triangle Consulting Social Enterprise

Service/Support intervention-based outcomes

<https://www.wlga.wales/introduction-to-the-home-care-toolkit>

KPI (e.g.)	Target (e.g.)	Alignment with National Outcome Framework Indicators (e.g.)
People will be supported to become as independent as possible in their own homes, and reliance on formal service delivery will be reduced	60% of homecare packages remain stable at review >20% of homecare packages have a decreased need at review <20% of homecare packages have an increased need at review	I get the right care and support, as early as possible I am treated with dignity and respect My individual circumstances are considered
People are supported to meet their identified wellbeing outcomes	100% of care packages identified outcomes are being met 100% of audited service delivery plans clearly identify outcomes and how they will be met	My voice is heard and I am listened to I do the things that matter to me I speak for myself and contribute to the decisions that affect my life, or someone who can do it for me

Population based outcomes

Quality-Adjusted Life Year (QALY)

“A measure of the state of health of a person or group in which the benefits, in terms of length of life, are adjusted to reflect the quality of life. One quality-adjusted life year (QALY) is equal to 1 year of life in perfect health.

QALYs are calculated by estimating the years of life remaining for a patient following a particular treatment or intervention and weighting each year with a quality-of-life score (on a 0 to 1 scale). It is often measured in terms of the person’s ability to carry out the activities of daily life, and freedom from pain and mental disturbance.”

This is how NICE decide what medical treatments to approve

Also - Use of Fingertips / PHOF e.g., child health outcomes, employment outcomes

Group discussion

- As well as outcomes, why is it important that we monitor and analyse outputs and inputs from a commissioned service?
- How can we get this balance right?



Scenario Exercise

You have been asked to design the monitoring arrangement for a jointly commissioned service who have been asked to reduce homelessness in a particular area of West Sussex

- Agree up to four desired outcomes (a mixture of individual, service and population level)
- What outputs would you suggest are also measured?
- How might you monitor that these are being achieved?





Effective monitoring and review

Performance Measures



Monitoring and Reporting



Evaluation and Review



Take Action

Managing poor performance

Aspect	Developmental Approach
Basic principles	Mistakes happen. Everyone should have the chance to learn from them and change. Support may be needed to prevent recurrence.
In practice	Purchaser and provider agree on what has gone wrong and why. Develop a corrective action plan (CAP), which may include additional monitoring and support.
Benefits	Reflects mutual dependence and partnership. Can enable 'business as usual' whilst some matters are resolved.
Risks	No immediate consequences for provider – long term deterrent? CAP may not resolve the problem; termination may only be delayed

Managing poor performance

Aspect	Punitive Approach
Basic principles	Performance can never be below required standards. Financial or other punishments will prevent recurrence of problems. The provider must resolve their problems alone.
In practice	The threat or implementation of fine or restriction of new business. Suspension from accredited list. The contract must contain explicit powers.
Benefits	Clear relationship between performance and payments. Shows purchaser's serious intent from the outset.
Risks	Judgements open to legal challenge. Purchaser may be drawn into terminating contract sooner than they would want.

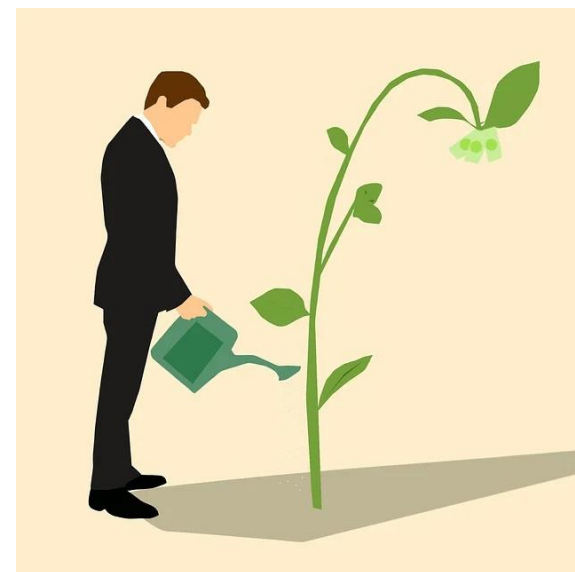
What determines your approach?

- The seriousness of the matter
- The risk(s) involved
- Has the contract been breached?
- The relationship with the provider
- The providers response to poor performance

What might need to be in place to help you manage performance of providers?

Scenario Exercise

- a) A service you have commissioned is **not achieving the outcomes** that were agreed in the contract. This is a **high-cost** service, and a **Council Member** is significantly passionate about the service. The provider **is engaging with you** and promising improvements, **but these have not materialised.**
- b) List **3 potential performance management options** for this service, listing the pros and cons for each
- c) Agree, as a group, which option you would **recommend and why.**
- d) What 3 key things need to be in place to make this option **effective?**



When can we involve people in commissioning?



What is co-production?

The ladder of Involvement

Leading

**Co-
Production**

**Co-
Designing**

**Doing with
being equal – in
partnership**

**Having a
Voice /
Influencing**

Engagement

Consultation

**Doing for
engaging and
involving people**

Informing

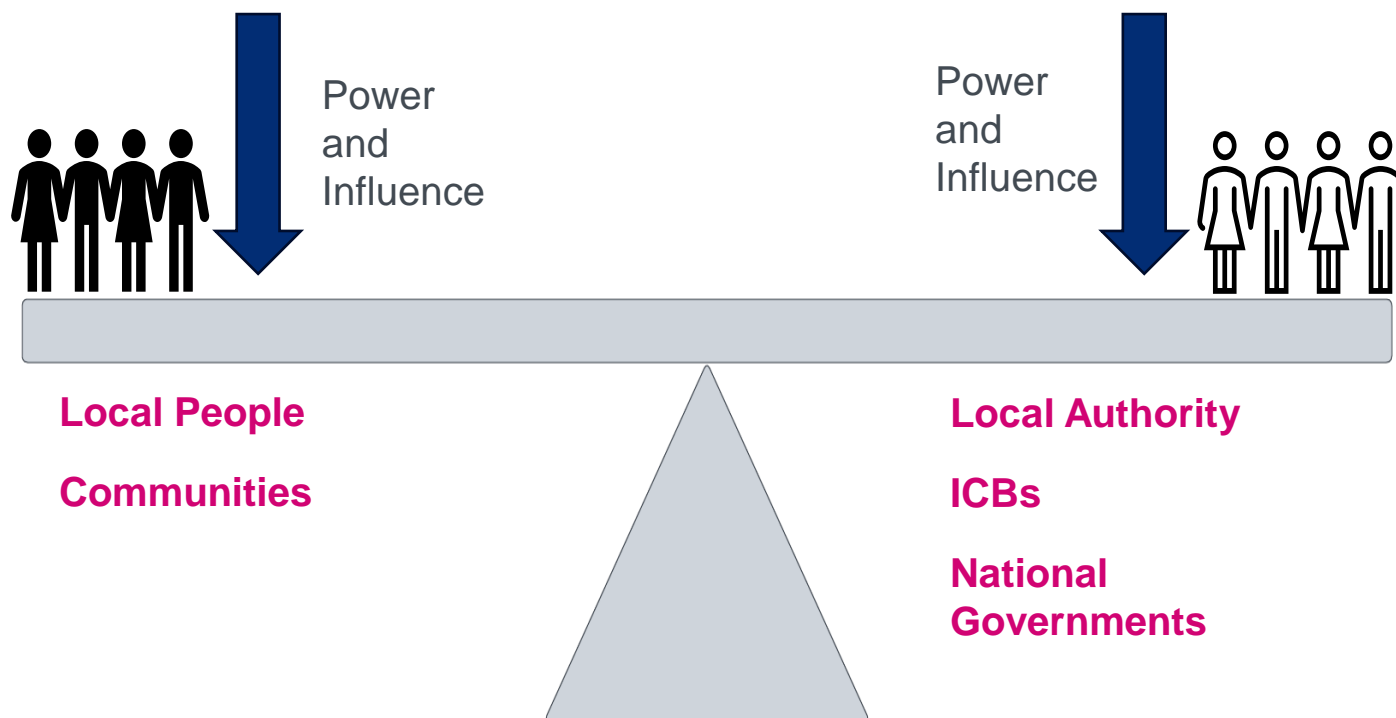
Informing

Educating

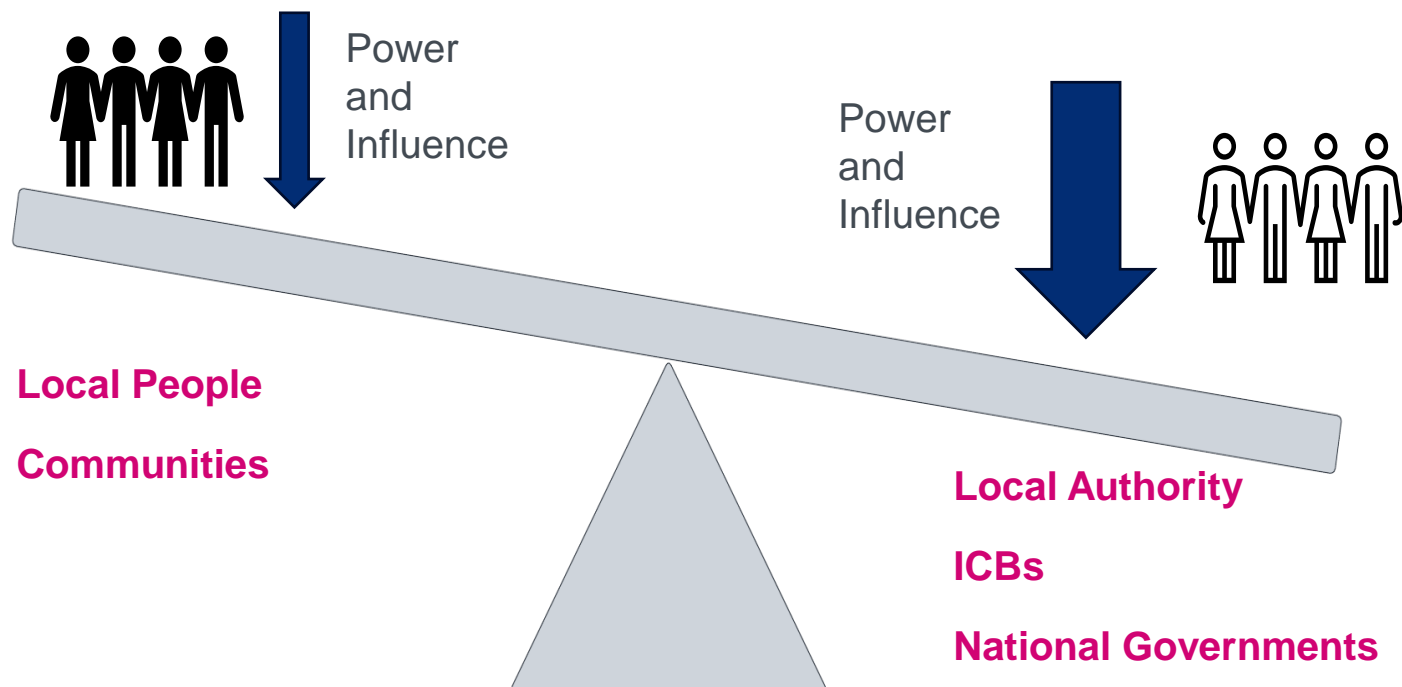
**Doing to
trying to fix people
with little or no
involvement**

No voice

Sharing decision making power



Listening



How do I decide?

- What is the objective?
- Who are the stakeholders?
- What stage of the process?
- What resources?



Top Tips for Achieving Co-Production



Culture Shift

- Co-production is not part of the job - it is the job



Involve people at the beginning of the process or decision

- The earlier you involve people, the more likely you can embed co-production



Time and Resources

- Co-production takes significant time and dedicated resources - and this must be built into timescales and budget management



Flexibility

- The more flexible you can be, the more co-productive your approach can be
- Things won't always go to plan and you need to be able to adapt to this



Understand the Interest

- Generally the more people are impacted by an activity, the more likely they will want to be involved
- If they want to be involved, find out why. This can be just as telling.



Clear Expectations

- Be clear about local people's roles and what is expected of them
- We may not agree on everything but we will be working as a collaborative



Outline scope of decision making power at the beginning

- Be honest how much scope local people have to shape, design and influence and where they do not



Start with relationships

- Ensure you take the time to interact with people on a human or personal level to help breakdown barriers and build relationships



Develop agreements on behaviour

- Encourage openness, honesty and create a safe space for people to share their views



Be Human

- We are people working with other people and we need to give people the space to share their experiences and views



Start with a blank page

- Where possible, come without an agenda and work in partnership with others to build and agree a shared vision for the activity



Support people involved in co-production

- Being involved in decision making may be an emotive experience for people it could affect - support must be available for those who need it

Top Tips for Achieving Co-Production



Think about location / venue

- Pick a location that is neutral, rather than a Council building or similar



Be clear on consent, confidentiality and safeguarding

- Be clear what will be recorded and shared and when you would need to break confidentiality



Make it fun and encourage creativity

- This will support people to want to keep involved but helps to open people's minds to think about new solutions or ideas



Keep people updated as regularly as possible

- Ensure you say what you are going to do and feedback on the progress and outcome of their contributions



Show people they have been valued and listened to

- People want to know their insights and experiences are acknowledged and have been acted upon



Training and skill development for people involved

- Invest and develop in your co-production group - helps people to understand their role and prepare them for the task ahead



Recruitment of local people

- Ensure your co-production group is representative of the target population and that everyone who wants to be involved is able to do so



Skills of public service professionals

- Professionals facilitating co-production must have the right skills and approach to foster co-production



Lessons Learnt

- Identify and share lessons learnt following a co-production exercise and share corporately



Identify barriers and consider how to overcome these

- Investigate and identify what might be getting in the way of effective co-production, working to overcome these where possible

Group Discussion

Share your experiences of involving people in commissioning care / services to shape services or decisions in West Sussex?

- What worked well?
- What didn't work so well?
- What improvements / changes do you think might be needed in the future to better involve local people and communities?



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The Commissioning Family Tree

– what skills are needed?



Your reflections from the course



We said:

By the end of the sessions, you will:

- Have evolved your knowledge and understanding of the different stages and activities of the commissioning cycle and awareness of your individual role, and roles of other colleagues and directorates, within the cycle.
- Be able to demonstrate understanding of the principles and theories of evidence-informed and outcome-based commissioning, and how this informs priorities and decision making across the commissioning cycle

Your reflections

- What has been your key take aways from the 2 sessions?
- What might this mean for you, your teams and West Sussex?
- Name at least 1 commitment or action will you take away from these sessions

Self Assessment Survey

Please [click here](#), on the agenda or using the QR code to access the **Smart Survey** which will ask you:

1. Your details
2. To assess your skills, knowledge and confidence in number of commissioning activities, across the quadrants of the cycle
3. Indicate if any other training opportunities across the Programme interest you
4. At the end of the survey, download and save a copy for your ongoing personal development / compare with your first survey



Feedback and thank you!



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