

**Operational Policy for Borderline and Peterborough Joint Child Health and Wellbeing Commissioning Unit. (JCU)**

**Strategic Functions**

The strategic aim for the JCU will be to align assessment of local needs, commissioning activity and improve outcomes for children through improved Provider performance :-

**Integrating and co-ordinating the commissioning intentions of CCG/LCG's and Councils [Peterborough, Cambridgeshire and Northamptonshire] to reflect local priorities:** commissioning intentions and priorities will be aggregated and will form the basis for developing the overall commissioning strategy. This will ensure the JCU strategy is grounded in local priorities and reflects local development needs and fully aligns to the Health and Wellbeing Board strategies and action plans. Plus incorporating the NHS Commissioning Board child health developments in the strategy ensuring comprehensive commissioning approach.

**Ensuring equity and quality of service delivery:** the JCU will determine the required delivery approach to deliver on the integrated commissioning intentions. This goal ensures that the children's services are aligned to meet the needs of the local population, close gaps in current service provision and enables children and young people to receive quality services in their community. Achieving this goal will also mean that children and families experience a seamless pathway regardless of the different organisations providing services or who commissions them. All those services in the pathway of care will be involved in shaping the outputs produced by the JCU.

**Increasing children's services performance and delivering improved health outcomes:** the JCU will work with providers and develop a performance framework by which local and national targets including outcome based performance indicators will be measured. Quality and experience of early access and appropriate support will be monitored while effective delivery models will be explored to reduce admission rates into acute and specialist services plus address inequalities in access. This will enable an effective delivery of savings plans as a system wide approach to commissioning and delivery will be adopted.

**Ensuring services offer quality and value for money:** by developing close collaboration and commissioning relationships with a variety of providers, the JCU will be able to drive up quality and value for money through identification and dissemination of best practice.

**Ensuring that the children, young people & families/carers experience continually improves:** through improved feedback mechanisms the JCU will fully understand children & young people's concerns such as dignity, choice and quality of care, access, clean and safe environments. The JCU will be able to address these priorities through improved commissioning relationships and more effective performance management of providers.

**Delivery of effective children's commissioning function to the partners:** the JCU will enable all partners to significantly improve their commissioning competencies relating to children's commissioning. The JCU will operate as a delivery vehicle, which serves its partners equally whilst recognizing their varying needs. It will consider and align its functions with other commissioning priorities and cycles i.e. CCG Governing Body, LCG's Boards, Health and Well Being Board and Children's Joint Commissioning and Delivery Board and work with Public Health and the NHSCB to deliver on the Outcomes Frameworks, inform the

JSNA and facilitate the Healthy Child Programme and Special Educational Needs and Disability reforms.

### **Principles of Operation**

- The JCU will seek to improve the children, young people, and family/carer experience at every possible opportunity by improving provider performance. Children & Young People are at the heart of all activity. Commissioning is the key lever to ensure children and young people receive quality services and care. The JCU will be designed with the necessary ability to effect positive change for children & young people.
- Do things once rather than multiple times, wherever beneficial. Where there is opportunity to minimize bureaucracy and maximize value for money, activities will be undertaken once only for the CCG/LCG's and Council Children's Services.
- Lean, simple and robust governance. The governance structure of the JCU must not add to bureaucratic procedure; the design will ensure the JCU management structure is lean and the governance is simple to navigate, but not at the expense of quality or effectiveness.
- A delivery vehicle that serves its CCG/LCG's and Council Children's Services as equal customers. The joint arrangement is a delivery vehicle and does not challenge the statutory basis of the CCG/LCG's and Councils Children's Services remain accountable for commissioning. The JCU will undertake commissioning activities to achieve the CCG/LCG's and Council's children's Services strategic goals. In this role, the JCU will serve its partners equally and be responsive to their needs. It will work closely with the Area Team across joint pathways. The JCU will build on the existing capabilities of people including Children's Clinical Lead. The JCU is about all the partners becoming better commissioners, not about removing and changing existing capabilities. To achieve effective commissioning, the CCG/LCG's and Councils Children's Services are committed to enhancing their capabilities and expertise within the JCU by developing expertise as required, to deliver its objectives.

### **Operational Functions**

The JCU will support integrated working and will offer:-

- A comprehensive analysis of need
- A whole system approach to planning and investment
- An alignment of commissioning cycles and intentions
- An effective use of resources that:
  - prevent duplication of activity/effort,
  - offer solution focused early intervention
  - increase efficiencies in activities
  - create seamless, co-ordinated pathways to service delivery
  - deliver value for money, investing to achieve greatest community impact and reduce inequalities
  - deliver safe / quality outcomes
- Improved access to and effective provision for service users/patients
- Seamless, co-ordinated, flexible & responsive services
- A common market development and procurement approach
- Most important, improved outcomes for children, young people and their families.

Our approach to the use of resources will be:-

- Streamlining inputs, achieving statutory targets and measuring outcomes and impact on service users/patients

- Reducing costs by reducing duplication (procurement, labour costs etc.) for the same outputs, results and impact
- Measuring activity against cost and workforce skill mix
- Seeking proportionally more outputs and improved results and impact or improved quality in return for an increased resource

Specifically the JCU will:

#### Assess needs and prioritise

- Analyse health and local authority data to identify health and wellbeing needs: disease and population group
- Develop detailed plan for service delivery design

#### Develop Care Pathway and Service Design

- Support roll-out of new pathways and develop comprehensive service specifications
- Provide a basic workforce framework to accompany both care pathways and service design
- Make the necessary links with other CCG/LCG's and NHSCB contracts to support the above

#### Offer Strategic and capacity planning

- Build a baseline of current activities and capacity (financial and operational)
- Offer strategic options based on trends and models of good practice
- Calculate the necessary capacity to match demand and study how capacity can be further developed
- Provide budget management via aligned budget arrangements
- Prepare reports for Health and Social Care / Boards and Partnerships
- Work across services and directorates to oversee any additional health and Social Care related commissioned work

#### Ensure Service User/patient feedback

Whilst insight is critical at every stage, this is where it really matters. Finding out as much as possible about the service users/patients; their needs, experiences and barriers. Evidence sources can include surveys, community engagement, focus group participation, demographics, and social trend data. The approach will not just be a dialogue, but will involve co-design, co-production and consultation involving the respective organisations resources.

#### Stimulate the market

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- Work with providers to develop new delivery models
- Develop new providers and identify opportunities to commission integrated delivery

#### Manage the supplier network

- Work with the existing providers to ensure optimum delivery of the strategic plan
- Develop robust performance management methodology and tools
- Monitor provider performance/quality e.g. Clinical and analyse activity
- Benchmark data against national and international standards
- Manage the improvement programme for failing providers
- Identify where pathways are not working or do not exist
- Ensure Action Plans are implemented
- Work with services, directorates and partner agencies to identify need, gaps in provision and plan for system wide delivery
- Decommission existing services where these are no longer required

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#### Inform contract and procurement activity

- Develop commissioning strategies
- Develop service specifications
- Inform contract negotiations
- Inform procurement process

### **Resources Implications**

#### Accommodation

Officers supporting the functions of the JCU will be based at Council premises and should have access to an nhs.net account and other health premise hot desks to enable working across the partners.

#### Human Resources

The JCU will be managed by the Head of Children's Community Health Commissioning in Peterborough City Council working in partnership with Directors and Heads of services to deliver the aims and exercise key responsibilities of the JCU. There will be close working with other commissioning leads in the CCG/Local Authority and Children's Clinical Lead in the LCG's.

The Local Authority Head of Children's Community Health Commissioning will support:

- a) The required clinical governance of all the commissioning activity
- b) Interface with CCG and LCG structures
- c) Engagement with other CCG commissioning activity and contracts, particularly the Head of Commissioning for Children's acute services and Maternity.
- d) Link to CCG/LCG's and LA Commissioning Board structures
- e) Guidance and updates on any policies and regulations

#### Additional Support Requirements

The following support needs have been identified and would be required from CCG and Council

- Performance management data
- Safeguarding information
- Quality information
- Public health support including identifying needs as part of the JSNA process, advice on the evidence base, outcome measures and evaluation
- Links into Participation, Professional and Clinical Networks
- Communication (strategy, protocols and pathways)
- Workforce development
- Specialist input re Procurement and Tendering
- Finance
- Legal services
- HR
- Formalized agreements for information sharing that are Information Governance compliant and appropriate NHS Net Accounts, etc.
- Commercial support for market stimulation and development

#### **What will not be included in the Joint Commissioning Unit**

- Children's acute and maternity services

- Specialist services commissioned by NHSCB

### **Operational Responsibilities**

Develop a S75 to delegate the commissioning function and responsibilities from the CCG to the LA and aligned Budget Arrangements within a Joint Commissioning Unit model for:

- The Looked After Children Health Team
- Therapy services including occupational therapy, physiotherapy & speech and language therapy
- Nursing Services including **continuing care**, community and special school nursing.
- Equipment
- **Community Paediatrics**/Child Development Centre
- Children's Mental Health Services, **including CAMHs**
- Early support, including portage and children's centres
- Short break services and home and community services for children with disabilities and complex health needs
- Palliative Care
- Drug and Alcohol Services for children
- Youth Offending Service – Health
- School Nursing
- Sexual health services for children and young people
- Services for children and young people who have been impacted on by domestic abuse
- Working closely with Health Visiting, including Family Nurse partnership and Midwifery services
- Ensuring the requirements of the Special Educational Needs and Disabilities reforms are met by health and local authority providers; particularly in relation to the Education, Health and Social Care Plans.
- Ensuring governance arrangements are in place and further develop performance management and quality assurance frameworks building on existing joint commissioning activity.
- Develop service specifications for future pathways to support children in the local system.
- Establishing the strategic commissioning plans within a devolved budget management infrastructure subject to the Partners agreement.
- Operating in collaboration with CCG/LCG's to a commissioning cycle of identifying need, prioritizing resources, securing effective and efficient services, monitoring impact through robust performance management arrangements and effective business planning.

### **Financial Baseline**

To be agreed

### **Governance**

The JCU will be formally constituted through Section 75 allowing the CCG to delegate its Commissioning function under the Health Act and using a Section 256 Agreement to enable transfer of funding as and when required related to specific projects.

The Children's Health Strategic Partnership (CHSP) will manage the partnership arrangements as outlined in the S75. To oversee the JCU operations, evaluate impact of JCU functions and monitor delivery and impact of services for children and young people in Peterborough. (Including in Cambridgeshire, Northamptonshire and Herts where appropriate) (As set out in the Section 75 Schedule 7)

Furthermore, an operational local JCU group will also be established to provide a focus for the operational functions as described above. Members will include leadership officers across the Council and CCG/LCG's who will review performance management information, identify issues and where provision needs improving, make recommendations and inform planning and future commissioning.

### **Financial Governance**

As set out in the Section 75 Schedule 4.

### **Compliments and Complaints**

Compliments and Complaints will be dealt with through the host organisations policy and procedure.

### **Risk Management**

The JCU will develop and maintain a risk register.

### **Review**

The Section 75/256 Agreements maybe reviewed at the request of Peterborough City Council or the CCG/LCG's .The Agreement will run initially for 2 years.

6<sup>th</sup> December 2013