Joint Strategic Commissioning Framework

March 2009
Partners IN Salford

JOINT STRATEGIC COMMISSIONING FRAMEWORK

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Foreword

The way people view local public services is changing. Individuals and communities want more efficient and responsive local public services. They want innovative services that put them in control. They also want services to meet needs and aspirations that are defined not around what providers do but around broad social, environmental and economic outcomes. Improving the way public bodies commission services in a co-ordinated and coherent way is fundamental to meeting the expectations of local people.

This Framework is Salford Strategic Partnership’s (the Partnership’s) first overarching outcome based joint strategic commissioning framework. It will achieve better commissioning to deliver its vision for Salford with the involvement of everyone. The Framework outlines the shared values, processes and skills needed in commissioning.

Community leadership is essential to joint strategic commissioning. This involves helping to develop a vision for Salford to inspire new solutions to current and future challenges and opportunities. As part of this process, joint commissioning ensures close engagement with service users at every stage, putting local people at the heart of decisions.

Joint commissioning will encourage innovation in services to meet strategic outcomes, creating more co-ordinated responses to individual and community needs and aspirations.

1. JOINT STRATEGIC COMMISSIONING

What is commissioning?

1.1 Commissioning:
   - Involves a continuous cycle of assessing needs and resources, planning, securing and managing services;
   - Recognises the importance of meeting the needs of people and communities;
   - may only involve one commissioning agent.

How does joint strategic commissioning differ from commissioning?

1.2 Joint strategic commissioning builds upon the basics of commissioning, focusing on the delivery of strategic outcomes through partnership delivery. This involves strategic planning and resource allocation, drawing together the expertise of local partners and developing working partnerships. It means a shared approach to understanding needs and markets, to planning and procuring services and assessing the quality and impact of service delivery. The Partnership Executive agreed its definition of joint strategic commissioning in September 2007:

   Two or more commissioning agents work together to co-ordinate their commissioning and improve outcomes. This matters where individual or community needs are complex and an integrated response is required, taking joint responsibility for the translation of strategy into action.

1.3 For simplicity, this framework refers to joint strategic commissioning as “commissioning”. Appendix 1 defines some other key and frequently used terms relating to commissioning.
Joint Strategic Commissioning outcomes

1.4 The Partnership expects the following outcomes from joint strategic commissioning:

a) High quality integrated services, with shared outcomes that meet the needs of all who are intended to benefit from them:
   - Closing the deprivation gap;
   - Ensuring accessible services for all residents;
   - Providing more integrated services;
   - Delivering maximum benefit against Partnership strategic priorities.

b) Better value for money:
   - Prioritising investment against strategic priorities and gaps in provision, releasing more resources to the front line;
   - Developing the quality and range of providers;
   - Making the most of current resources and finding new ones;
   - Investing to save.

c) Greater capacity to deliver more integrated services:
   - Developing local leadership and accountability;
   - Ensuring a common approach owned, delivered and developed by partners;
   - Developing commissioning skills and competencies;
   - Learning and mainstreaming good practice;
   - Embedding a positive commissioning culture.

Commissioning values

1.5 The Partnership will apply the following values in joint commissioning:

a) Being inclusive
b) Engaging with local residents and service users
c) Making decisions openly, base on quality evidence
d) Focussing on outcomes
e) Investing wisely for the future
f) Working towards a shared vision and outcomes
g) Committing to integrated working
h) Encouraging innovation and ambition
2 PARTNERSHIP JOINT STRATEGIC COMMISSIONING FRAMEWORK

2.1 The joint strategic commissioning partnership framework below is based on good practice within the Partnership and beyond. It identifies steps in the commissioning process to create integrated services that make a positive difference.

2.2 The framework is a continuous cycle with four phases: analysing, planning, doing and reviewing, each as important as the other. Resourcing analysis and service planning without monitoring would make it difficult for commissioners to understand what outcomes they were achieving and the quality of commissioned activities.

The Framework

1. ANALYSE citizens’ and customers’ needs and aspirations
   - Identifying and agreeing shared strategic partnership priorities and shared values.
   - Creating a strong evidence base to make informed decisions.
   - Identifying key stakeholders to engage in delivering these outcomes.
   - Ensuring a clear understanding of currently provision against priority outcomes.
   - Learning from good practice research and local examples and from elsewhere.

2. PLAN how to help citizens and customers to meet their needs and aspirations
   - Prioritising activity that can be delivered.
   - Designing outcome focused services based on sound evidence.
   - Commissioning for the short and long term.
   - De-commissioning or reshaping services to direct resources to future needs and priorities.
   - Analysing resources.
   - Understanding gaps in provision and in market.
   - Agreeing a strategic approach to commissioning with major partners.

3. DO - secure and manage delivery to help citizens and customers to meet their needs and aspirations.
   - Collating performance information on outcomes and outputs.
   - Reviewing services for value for money.
   - Celebrate good practice with providers and communities.
   - Reviewing the commissioning process itself:
     - Procuring new services and systems transparently and consistently to service specifications.
     - De-commissioning services that do not deliver priority outcomes
     - Managing resources
     - Managing and developing markets
     - Monitoring and managing contracts
     - Building commissioning capacity of agencies

4. REVIEW delivery to check how well we are helping citizens and customers to meet their needs and aspirations.
   - Prioritising activity that can be delivered.
   - Designing outcome focused services based on sound evidence.
   - Commissioning for the short and long term.
   - De-commissioning or reshaping services to direct resources to future needs and priorities.
   - Analysing resources.
   - Understanding gaps in provision and in market.
   - Agreeing a strategic approach to commissioning with major partners.
ANALYSE

2.3 Understanding what is already in place, the values and purpose of the stakeholders involved, the needs of the population (individual – community), strategic outcomes and priorities, the ability of the market to deliver these and the potential barriers faced. Activities could include:

a) **Identifying and agreeing shared strategic partnership priorities and shared values.**
   - Understand the relationships of outcomes in the Salford Agreement to identify priorities for integrating services.
   - Contribute to decisions about priorities by reviewing the needs of individuals and local communities, local strategies, legislation and guidance.

b) **Creating a strong evidence base to make informed decisions.**
   - Use appropriate information management tools and data collection and analysis to collate, analyse and present information.
   - Collate data of a kind and at scales needed for decisions, not just what is at hand. Address data gaps that inhibit informed decisions.
   - Use a range of quantitative and qualitative information sources.
   - Demographic information (age, sex, income, religion, disability, etc) highlights the needs and aspirations of all individuals, in particular those most vulnerable.
   - Record connected issues and outcomes to identify potential for integration.

c) **Identifying key stakeholders to engage in delivering these outcomes.**
   - Stakeholders include agencies, providers, experts, individuals, local communities, etc.
   - Understand stakeholders’ involvement, needs, interests, knowledge, power to influence and resources.
   - Highlight individuals or groups in most need and plan how to engage them throughout the commissioning process.

d) **Ensuring a clear understanding of currently provision against priority outcomes.**
   - Ask questions about who delivers services, where in the city, and what (type, scale, quality, costs and outcomes) and who is intended to benefit from it and who actually benefits from it.
   - Identify duplication and gaps, areas of strength and good practice and opportunities for more integration.
   - Ask if we are doing things right as opposed to doing the right thing - are services good but not addressing the city’s strategic needs?

e) **Learning from good practice research and local examples and from elsewhere.**
   - Share and learn what has and has not worked.
   - Listen to the views of providers and residents to understand the issues, barriers and good practice they know about.
PLAN

2.4 Using high quality analysis plan how priority gaps in service provision will be addressed within available resources. Engage identified stakeholders in the delivery of services to ensure maximum benefit when procured. Agree with stakeholders the process for ensuring quality commissioning, including performance and contract management. Activities could include:

a) **Prioritising activity that can be delivered.**
   Prioritisation will depend upon priority indicators, strategic steer, gaps identified and balancing input of resources to expected outcomes (is it value for money?).

b) **Design and plan outcome focused services based on a sound evidence base.**
   Engaging stakeholders, particularly individuals, local communities and providers ensures successful delivery and ownership. Engagement could include creating practitioners’ and service users’ networks or forums.

   Encouraging innovation should be standard approach – this could be through commissioning a mix of high/low risk projects. Added value should be sought in designing services – inclusion, community engagement, capacity building of provider, opportunity to create joined up services.

c) **Commissioning for the short and long term.**
   Build capacity long term for service delivery and stability. This should be flexible enough to adapt to new legislation, research, etc. Use short term pilots based on strategic priorities. In service planning, consider the best scale to target provision: universal, specialist or individual.
d) **De-commissioning or reshaping current services to redirect funding to future needs and priorities.**

Adopt a clear process to agree which services to de-commission or recommission. Communicate comprehensively with providers, front line staff and service users about any such proposals, allowing enough time for people to adapt to change.

**e) Resource analysis.**

Remember that resources include money, community capacity, officer time and expertise, national support and buildings. Understand resources across the partnership to make best use of them, cut duplication and spot gaps.

Managing resources across the Partnership gives chance to align resources of all kinds, and enable comparison of investment and the outcomes achieved.

**f) Gaining greater understanding of gaps in providers and market provision.**

This will enable the creation of a plan to encourage diverse, high quality markets that deliver strategic outcomes. This plan could include actions ranging from the identification of new/potential providers (from private, public and voluntary sectors) to working with current providers to develop their skills and capacity.

The development of voluntary organisations is important because many of them use their local knowledge to deliver services to communities most in need. Strong relationships with providers, understanding their needs and them understanding the strategic context will be a major part of market development.

**g) Agreeing a strategic approach to commissioning with key partners.**

- Understand roles and responsibilities (governance),
- Agree commissioning values,
- Align resources and accountability.
- Develop good communications and strong working relationships between commissioning agents.
- Take a consistent and agreed approach to commissioning, in particular using a performance management framework that drives efficiency, outcomes achieved, good practice working, accessibility and quality.

**DO**

**2.5 Procurement of services aligned to clear service specifications based on analysis and planning.** Ensuring services are delivered efficiently and effectively to achieve strategic priorities and outcomes. Providers and markets are developed. Ongoing monitoring and management takes place to ensure good use of resources. Activities could include:

**a) Procuring new services and systems transparently and consistently to service specifications.**

Reshape public services and to develop joint services through methods such as purchasing, contracting, and grants. The procurement process will:

- Constructively challenge current service provision;
- Ensure legal, legislative and partnerships standards are at a minimum met;
- Explore the use of innovative new models of delivery;
- Base decisions on weighing up cost, quality and outcome;
- Work with providers to deliver best contract but maintain the commissioner/provider divide to ensure fair procurement.

**b) De-commissioning services that do not deliver priority outcomes**
Arrangements to ensure that services end in a way that enables service users and service providers to make alternative arrangements with reasonable notice and with minimum disruption.

**c) Managing resources.**
Ensure ongoing monitoring and development to make most of limited resources available against priorities. A resource management plan will need to be developed. This could include everything from building community capacity to training staff, aligning partnership mainstream budgets and funding, building in efficiency savings and invest to save opportunities.

**d) Managing and developing markets**
Developing a mix of service providers (public, private and voluntary) that exceed agreed partnership standards and deliver excellent services. The Partnership’s ability to reshape services so they are more co-ordinated and fill gaps in provision should be used to positively change the market. Good communication channels and relationships built with providers will be essential.

**e) Monitoring and managing contracts**
Stakeholders, in particular service users past, present and future should be trained to participate in reviewing and scrutinising the effectiveness, accessibility, quality and efficiency of services. Various different tools to undertake contract monitoring and management are mentioned under the below review paragraphs.

**f) Building commissioning capacity of agencies.**
Ensuring that organisations have the knowledge and skills at all levels for commissioning (see Organisational Competencies on page 17 below).

**REVIEW**

2.6 Monitoring the impact of services. Learning from good practice and addressing barriers. Mainstreaming where appropriate and managing service and commissioning improvements. Activities could include:

**a) Collating performance information on outcomes and outputs.**
This should include outcomes expected and unexpected, as well as things that worked and didn’t work. This shouldn’t burden local providers. It could involve a quick paper based exercise (quarterly/ yearly). This should be supported by visits and one-to-one discussions with providers and service users past, present and future. The performance management framework should encourage the recording of innovation and good practice. Excellence and continuous improvement in services needs to be emphasised.

**b) Reviewing services for value for money.**
Based on the resources inputted, efficiency of delivery and effectiveness of service (in delivering desired outcomes, high quality, added value and accessibility). Other reviews could include external scrutiny/ audits, internal self assessments. These should be complimentary.
This information needs to be fed into a strategic review, which takes on board any legislative changes, market position or new needs assessment, etc. This may lead to changing the focus for delivery and could lead to contract renegotiation or de-commissioning.

c) **Celebrate good practice with providers and communities.**
Learn from what has and hasn’t worked. Where appropriate mainstream or provide long term contract to successful new practice.

d) **Reviewing the commissioning process itself:**
- Did it commission against strategic priorities?
- Was it accessible and did it engage and build relationships with stakeholders?
- Were contract and service management processes in place to enable joint working?
- Have markets improved?
- Was the evidence base sufficient to make informed decisions?
- Does the Partnership have the right skills and capacity to deliver commissioning?
- Did we deliver the strategic outcomes – if not what can we learn from this?

3 **DELIVERING IMPROVED OUTCOMES THROUGH COMMISSIONING**

When to use joint strategic commissioning

3.1 Joint strategic commissioning will not be necessary on all issues, but it will be important to identify those issues which matter most and which require a more highly joined up approach.

Commissioning competencies needed to deliver the framework

3.2 Commissioning competencies are the knowledge, skills, behaviours and characteristics that underpin commissioning. When put into practice they become capabilities. It is essential that there is the capacity within the partnership that allows the capability to transform people’s lives for the better.

Embedding joint strategic commissioning in Salford

3.3 Commissioning organisations competencies based on Department of Health’s ‘World Class Commissioning Competencies’:

1. Lead delivery of partnership priorities;
2. Work in partnership to ensure maximum benefit;
3. Engage with residents and services users, shaping services to meet their needs;
4. Work with providers;
5. Use and manage information and knowledge
6. Encourage diverse and high quality markets;
7. Be innovative and contribute towards a learning partnership;
8. Develop joint commissioning processes;
9. Commissioners who are skilled and informed;
10. Manage and develop local service delivery;
11. Make sound financial investments.
3.4 This will be done through a practitioners’ network that work on the coming year’s agenda, the outcomes they aim to achieve and the resources they need to ensure that the outcomes are delivered. They will also progress the development plan for the partnership ensuring that all the competencies, skill, knowledge and behaviours are embedded in the partnership.

Governance

3.5 Governance arrangements for joint strategic commissioning will reflect differing arrangements across the Partnership, but all will enable sound decision-making with due accountability. The details of the Partnership’s approach will be the subject of a report to its Executive in May 2009.

How will we know if this is improving the way we commission and deliver services?

3.6 Joint strategic commissioning will take time and commitment to implement fully. In some cases it will mean transformational change in how the Partnership works. We will improve by continuously monitoring and evaluating progress against milestones identified in the commissioning competencies, activities identified in the commissioning framework and around the delivery of strategic outcomes we will be able to improve the way we commission together and improve outcomes for the citizens of Salford.

4 COMMISSIONING IN SALFORD

4.1 Commissioning already takes place in Salford in various contexts, particularly relating to health and social care, including Supporting People, and to services for children. Some of it relates to priorities in the Salford Agreement. Local research in 2008 with commissioning officers and officers leading the Agreement Think delivery boards revealed various commissioning approaches, with many aspects of good practice. In particular, there was evidence of:

- strong and mature partnerships
- management and operational systems, including administrative support
- needs assessments and gap analyses;
- engagement and consultation with users and providers;
- knowledge and monitoring of market demand and provider supply;
- variable contracting aligned to delivery performance;
- performance monitoring;
- reviews of processes.

What are the gaps in current commissioning in Salford?

4.2 Commissioning officers and Think lead officers considered that the following activities need greater consistency and attention:

- engagement and commitment of a broad range of stakeholders and advisors (local, regional, national) in developing and reviewing services;
- ensuring we have a clear picture of current commissioned services and providers;
- understanding, developing and managing markets and suppliers, including the community and voluntary sector
- developing more market capacity through contracting strategies
- greater awareness of opportunities for consolidation, particularly relating to Salford Agreement priorities, enabling joined up working and removing duplication
• de-commissioning and re-commissioning processes
• data collection, sharing and analysis
• encouragement of innovation by providers
• workforce skills for commissioning
• partnership processes for performance, outcomes and future decisions on commissioners/commissioned services;
• identification and celebration of good practice in commissioning and its adoption across the Partnership.

4.3 In addition, the officers consulted saw a need for:
• a joint strategic commissioning framework
• a joint strategic commissioning development plan
• cultural change in relation to respect to wider partner involvement in defining and agreeing strategic service priorities, and reviewing/scoping service delivery;
• management of supply and demand;

4.4 They also identified opportunities for joint strategic commissioning with existing services:
• the Charlestown and Lower Kersal New Deal for Communities was evaluating the end of its programme, covering continuation strategies and recommendations for future delivery
• Salford Primary Care Trust was applying the ‘world class commissioning' model;
• Children’s Services was adapting commissioning to cover multi-layered commissioning;
• Chief Executive’s Directorate’s Economic Development Section was adapting commissioning for local and “wrap-around” services for work and skills.

5 NEXT STEPS

Governance

5.1 Clarity about who can take what decisions in the Partnership’s framework is part of the Partnership’s overall governance framework which will be reported to the Executive at its meeting on 27 May. The proposals will take into account good practice in existing commissioning processes, such as the one for the Supporting People programme. The proposals will aim to ensure that decisions are transparent, with due accountability to elected members in the city council and to other governing bodies such as the Primary Care Trust’s Board, particularly for priorities in the Salford Agreement.

Organisational competencies

5.2 The other major next step for the framework is a practitioners’ network based on meetings and discussions so far during the preparation of the framework. The network will guide a programme to develop organisational competencies. These are based on the world class commissioning model which the Primary Care Trust has adopted as part of reforms intended to make the NHS “locally driven, looking outwards not upwards”.

March 2009
The Commissioning Dictionary

**Capacity Building:** ensuring that the right skills and resources are available to deliver commissioning and services.

**Collaborative commissioning:** two or more agencies co-ordinating their strategies for using their resources.

**Commissioning:** specifying, securing and monitoring services to meet needs at a strategic level. This applies to all services, whether they are provided by the local authority or by the private or voluntary sectors.

**Commissioning strategy:** agreed outcomes for a commissioning process

**Contracting:** putting the purchasing of services in a legal agreement.

**Contract monitoring:** continuous evaluation by commissioners of providers’ performance in delivering to agreed contracts

**Data analysis:** assessment of qualitative and quantitative data.

**De-commission:** reducing or ending service activity in line with commissioning objectives.

**Gap analysis:** comparison of current provision and needs and aspirations.

**Joint strategic commissioning:** two or more agencies pooling their resources to implement a common strategy for providing services.

**Joint strategic needs assessment:** an analysis of future population needs that the law requires the Primary Care Trust and the City Council to produce.

**Markets:** how the purchasers and providers of types of services do business with one another. As in all markets, there are different combinations of purchasers and providers, interacting differently in all the service sectors for each of the service user groups and sometimes differently within the same authority.

**Market analysis:** understanding current market against needs and supply.

**Market/supplier development framework:** plan to develop and sustain both markets and suppliers.

**Market performance:** the market trend over time plotted against needs.

**Population needs:** the outcomes highlighted in the Joint Strategic Needs Assessment.

**Purchasing or procurement:** securing or buying services. Procurement and commissioning are often taken to mean the same thing, but in fact procurement is one part of the joint strategic commissioning cycle

**Re-commission:** process of renegotiating a service which is currently commissioned.
**Service Level Agreements**: written undertakings agreed between purchasing and providing agencies.

**Stakeholders**: all of the relevant parties including councillors, managers and staff of local authorities, other related commissioning bodies, such as Health, service providers in the statutory, private and voluntary sectors, providers and, above all, service users and their associated advocacy organisations.

**Workforce competencies**: The standards that the workforce needs to meet to deliver commissioning and improved outcomes.

March 2009
Appendix 2

Salford Strategic Joint Strategic Commissioning

PRACTITIONERS' NETWORK AND DEVELOPMENT PLAN

1. Joint Commissioning Practitioners' Network

Jean Rollinson  Sustainable Regeneration Directorate, Salford City Council
Alison Burnett  Charlestown & Lower Kersal New Deal for Communities
Chris Dabbs  Community Health Action Partnership
Janet Roberts  Salford Primary Care Trust
Steph Mitchell  Salford Council for Voluntary Service
Gerry Stone  Salford Strategic Partnership

2. Development Plan

a) Communication

Develop plans to inform:

- residents and service users about why, how and what the Partnership commissions, highlighting how local people have influenced it to; and to,
- raise staff awareness of joint commissioning framework and structures.

b) Organisational competencies

Lead delivery of Partnership priorities

- Emphasis to residents, providers and commissioners about the Implications for commissioning of the Partnership’s visions for Salford and of its priority outcomes.

Work in partnership to get most benefit for local residents and service users

- Maintain understanding of commissioning processes and resources within the Partnership.
- Review the effectiveness of joint commissioning.
- Monitor and improve the quality of joint commissioning with outline standards.

Engage with residents and services users, shaping services to meet their needs

- Describe clear roles for local communities and individuals in all stages of commissioning, including consultation, service user group involvement, scrutinising services and commissioning own services.
- Enable service users and residents to identify ways to promote engagement in commissioning.

Work with providers

- Develop mutual expectations and standards for commissioners and providers.
- Develop a Partnership approach to provider engagement, including a programme to build providers’ capacity to deliver against priorities.

Encourage diverse and high quality markets

- Promote good practice on understanding markets from Office of Government Commerce and from local examples.
Skilled, resourced and informed commissioners
- Identify commissioning skills and competencies for inclusion in staff competencies, inductions and appraisals.
- Understand the current level of commissioning skills and resources available across the Partnership and build this into workforce and resource planning
- Provide support is to encourage and facilitate commissioning.
- Develop a Partnership training and development programme.

Be innovative and contribute towards a learning Partnership
- Provide guidance on innovation for commissioners and providers, showing what enables innovation and what hinders it.
- Set up a practitioner’s network to share learning and develop commissioning across the Partnership.

Manage and develop local service delivery
- Clearly defined processes for reporting performance information and acting on it.
- Clear criteria and process and for de-commissioning and re-commissioning and for creating flexibility in contracts to improve how they fit requirements and aspirations.

Make sound financial investments
- Develop clear picture of what resources have been invested against which priorities. Also identify non committed resources across the Partnership which could be better used to jointly commission new services/ activities.

March 2009
ORGANISATIONAL COMPETENCIES FOR COMMISSIONING

The organisational competencies below and their descriptions are based on the NHS world class commissioning model.

1. **Lead delivery of partnership priorities**
   Commissioners will work together to deliver Salford’s vision: *In 2016, Salford will be a beautiful and welcoming city, driven by energetic and engaged communities of highly skilled, healthy and motivated citizens, who have built a diverse and prosperous culture and economy which encourages and recognises the contribution of everyone, for everyone.* The Partnership will make best use of its resources to pursue its strategic priorities, particularly those in the Salford Agreement. It will commission services on sound evidence and knowledge of local need and aspirations to create more efficient joined up services that help residents to achieve better for themselves.

2. **Work in partnership to ensure maximum benefit for local residents and service users**
   The Salford Strategic Partnerships Commissioning Framework will need to be developed, implemented and owned by all partners, with strong buy in from other stakeholders including local residents and providers. Commissioners from across the partnership will ensure increasingly joined up services that deliver their maximum benefit. A shared understanding of commissioning will ensure that wherever appropriate services are jointly commissioned to drive improvement in our outcomes, particularly for those most in need.

3. **Engage with residents and services users, shaping services to meet their needs**
   Commissioners are responsible for investing and delivering services on behalf of Salford communities, building trust through engagement in planning, doing and reviewing services delivered by the partnership. Decisions made are based on the aspirations and needs of local residents. Services commissioned will actively seek the views of service users and the wider community and commit to engaging them throughout the commissioning process to ensure their knowledge and skills support joint commissioning. Commissioning of services could be devolved to local communities or individual service users.

4. **Work with providers**
   Involving providers of service strengthens commissioning. Their knowledge of needs and issues, the effectiveness of services and of barriers to delivery as well as their relationship with service users on the front line can support innovative and personalised services. Commissioners will work with providers to improve services. Providers will meet the high quality expected from commissioners and service users. Commissioners will recognise the wider positive outcomes achieved by providers.

5. **Use and manage information and knowledge**
   The Partnership will base commissioning decisions on sound evidence that will include cross-cutting or interdependent issues to highlight potential for integrated working. Local stakeholders’ views, particularly those whose needs are greatest, will lie at the heart of decisions. Evidence used will be that necessary for informed decisions, rather than merely that which is available. Understanding national legislation, guidance and good practice is essential. Analytical skills will ensure that highlight needs, gaps and trends for use in decisions.
6. **Encourage diverse and high quality markets**
   The Partnership will understand the current quality and range of provision from public, private and voluntary sectors, particularly where there are gaps in addressing needs and aspirations. Where gaps in market provision exist, the Partnership will develop clear strategies to restructure current services or create new ones. Markets will be encouraged to deliver higher quality services, particularly in areas where there is relatively poor access or provision. The Partnership will encourage diverse, competitive and self sustaining markets that provide services covering the universal and the personalised services. Providers will be encouraged to adapt to guidance from commissioners on standards, service design, choice, innovation, contract arrangements and expected outcomes.

7. **Be innovative and contribute towards a learning partnership**
   Commissioners will encourage an innovative and ambitious commissioning culture. They will think innovatively and make space in service planning and design to try new things. Providers and local communities should be encouraged to contribute to finding innovative solutions to local issues. Commissioners will share their learning and knowledge of good practice to drive continuous improvement across the partnership.

8. **Enable and develop joint procurement processes**
   Developing joint procurement and contracting processes, which are clear will ensure strong agreements between commissioner and provider. Value for money and continuous improvement are at the heart of these processes. Partners and providers will understand their respective responsibilities and accountability. Transparent contracting and procurement processes will facilitate strong working relationships with our providers.

9. **Be skilled, resourced and informed**
   Commissioning requires that everyone involved in commissioning, paid or unpaid, to have a range of skills. Commissioning resources will be integrated where this will lead to more effective commissioning.

10. **Manage and develop local service delivery**
    Commissioners will need to manage contracts, relationships and outcomes with providers to ensure value for money and maximum benefit. Providers will need to understand and agree to deliver against the partnerships vision, priorities and standards. Information needed to manage contracts will be agreed before services are delivered. Performance information will be outcome focused and will also record the quality of provision and provider. Management information will be used by providers and commissioners to drive service improvement and make decisions on whether activities should be de / re commissioned or mainstreamed.

11. **Make sound financial investments**
    Proactively manage financial investment, focusing available resources on agreed strategic priorities - particularly areas of most need. The financial strategy will need to place investment in the context of wider Partnership delivery; ensuring services are affordable and can be sustained where appropriate. Investment should be considered within a risk and assurance framework.