

TUSLA

An Ghníomhaireacht um
Leanaí agus an Teaghlach
Child and Family Agency

*Tusla
Commissioning
Toolkit 2019*



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1. Introduction

What is this Commissioning Toolkit?

This is an operational **Commissioning Toolkit** that builds on the Commissioning Guidance (2013)¹. It is designed to operate in conjunction with the Tusla Commissioning Strategy (2019-2023) and Tusla Commissioning Priorities Discussion Document (2016)², all of which set out the strategic and corporate contexts for Tusla Commissioning.

It builds on the existing body of institutional knowledge within Tusla and captures the learning from the development of Area Commissioning Plans and National Commissioning Plans which have been developed³ with the support of the Institute of Public Care⁴.

The Toolkit is both a reference and training tool which will take commissioners through the whole commissioning cycle from:

- » The articulation of Tusla commissioning priorities and principles;
- » The selection and development of commissioning teams locally and nationally;
- » The identification of relevant local/national needs and assets/strengths and analysis of provision using Commissioning Plans [through meaningful consultation and related data collection and analysis];
- » The decision making processes involved in commissioning;
- » Fidelity monitoring to effectively monitor commissioned services;
- » Capacity building;
- » Identifying need and shaping provision;
- » Decommissioning;
- » Contracting and governance;
- » Training and mainstreaming.

The Toolkit therefore provides the framework, methodology, templates, tools and support to enable Tusla commissioners to commission confidently.

¹ Child & Family Agency: Commissioning Guidance, National Guidance & Local Implementation. (August 2013)

² Tusla Commissioning Priorities: Discussion Document (Quarter 2, 2016).

³ Stage 1 of the Commissioning Programme was undertaken in five Tusla Areas (Donegal; Sligo/Leitrim/West Cavan; Waterford/Wexford; Dublin North City and Dublin South West/Kildare/West Wicklow and one national thematic area, Domestic, Sexual & Gender-based Violence). Five more Tusla Areas undertook the new approach to commissioning in 2017 - the Midlands, Louth/Meath, Cork, Cavan/Monaghan and the Midwest. The remaining seven Tusla Areas began the new approach in 2019. A National Commissioning Framework will be launched in 2019 in respect of Parenting Support.

⁴ The Institute of Public Care is part of Oxford Brookes University and has provided specialist expertise and support in Commissioning Practice.

Who is it for?

The Toolkit is primarily for Tusla personnel involved in local, regional or national commissioning and for Senior Managers so that they can understand and effectively support the new approach to commissioning. Specifically, Area Managers, Senior Managers for Prevention, Partnership and Family Support (PPFS), Regional Directors, relevant finance and business support personnel and National Commissioning Unit personnel, will benefit directly from this Toolkit. It is a reference manual that will form the basis for **Tusla Commissioning Training** which will provide the necessary learning and development for Tusla staff.

The Toolkit will also be a useful reference for the community and voluntary and private sectors – both in terms of those currently receiving funding from Tusla through Service Level Agreements and those who are seeking to collaborate with Tusla in the future. It will provide these organisations with the necessary framework and understanding of the approach that Tusla will use for commissioning so that they can engage effectively with it. Additionally the Toolkit will be of interest to and a reference resource for all other statutory providers of services for children and young people who may engage with Tusla in Children’s Services Planning and/or the joint commissioning of services.

Definitions of commissioning

The Department of Public Expenditure and Reform has used the following definition identified by the Centre for Effective Services as an overarching definition of commissioning as *a strategic planning process linking resource allocation with assessed current and future needs, in order to achieve best outcomes for citizens and service users in line with policy objectives.*⁵

Tusla’s definition of commissioning, as per Guidance on Commissioning (2013)⁶ is: *the ... use of ... the total resources available for children and families in the most efficient, equitable, proportionate and sustainable way in order to improve outcomes for children.*

These definitions provide Tusla commissioners with the necessary foundation to develop our Commissioning Cycle (Figure 1) to support the National Service Delivery Framework (NSDF).

⁵ *Commissioning in Human, Social and Community Services - a Rapid Evidence Review (CES, 2015) cited in What we heard A summary of the key messages from the responses to the public consultation: Commissioning Human, Social and Community Services, Reform and Delivery Office, Department of Public Expenditure and Reform (2016).*

⁶ *Tusla Commissioning Guidance (2013).*

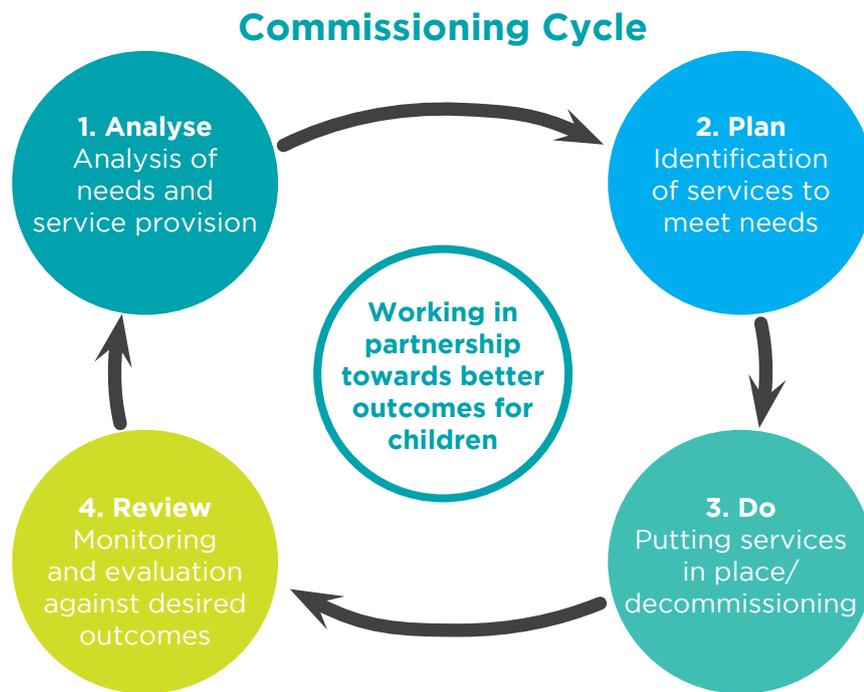


Figure 1: Commissioning Cycle, adapted from the Joint Planning and Commissioning Framework for Children, Young People and Maternity Services (DFES, 2006)

Commissioning and Tusla

Commissioners need to understand the strategic context of commissioning. These are provided by Tusla’s Corporate Plan, so commissioners should refer to the current Corporate Plan when commissioning.

Tusla’s Corporate Plan

Tusla’s Corporate Plan 2018-2020 identifies a range of strategic objectives and key actions for the Agency.

Many of which will be underpinned by the new approach to commissioning. Included as a key priority is the implementation of the Commissioning Strategy.⁷ ‘The strategy establishes a new framework within which the Agency will work with its partners to ensure improvement and availability of services for children, young people and families across the statutory and voluntary sectors.’

This Toolkit supports the implementation of the Commissioning Strategy. In addition, a significant sign-post for commissioning is to deliver on the requirements of the National Service Delivery Framework.

⁷ Tusla Corporate Plan, 2018-2020. P.15.

Tusla's National Service Delivery Framework

The development and implementation of a single, transparent, consistent and accountable National Service Delivery Framework (NSDF), focused on improving outcomes for children, is a key objective of the Child and Family Agency. Tusla also provides a range of services to support adults who have experienced Domestic, Sexual and Gender-based Violence (DSGBV). However, providing support to a child or young person and their family is not the exclusive responsibility of children and family services. The statutory services such as health, education, An Garda Síochána, local authorities and the community/voluntary sector all have a responsibility and a contribution to make in the protection and welfare of all children, which can be done in three ways. Firstly through participating in Child and Family Support Networks and through a focus on early intervention/prevention and the Meitheal Model; secondly by reporting child protection and welfare concerns in line with Children First Guidance and legislation; and thirdly by assisting in social work-led responses. The National Service Delivery Framework mandates Tusla to work across the continuum of care from early intervention and prevention, to child protection and welfare, to provision of alternative care services. All of Tusla's activities across this continuum will be underpinned by Tusla's new approach to commissioning as encapsulated within the *Commissioning Strategy 2019-2023* and this *Commissioning Toolkit*.

The Institute of Public Care

As noted, the Institute of Public Care (IPC) is providing technical support as Tusla develops its new approach to commissioning. IPC have extensive experience of supporting new approaches to commissioning and use an approach based on the following definition of shaping: *Based on a good understanding of need and assets, need and provision shaping is the process by which commissioners ensure there is sufficient, appropriate and value for money provision available to meet needs and deliver effective outcomes [for children] both now and in the future*⁸.

Tusla is adapting this approach in partnership with IPC and our community and voluntary sector partners in order to create a unique approach to commissioning that is appropriate to the Irish context.

⁸ Institute of Public Care, Oxford Brookes University, 2016.

2. Commissioning Principles

Tusla has agreed five key principles of commissioning which serve as a guide in implementing this methodology:

- » Early intervention/prevention will be prejudiced at all levels of service delivery – low, medium and high.
- » Priority will be given to programmes and services that are evidence-based or evidence-informed.
- » Tusla will carry out its commissioning approach using a partnership approach, with the full participation of all partners including providers, other commissioners, children, young people and parents/carers.
- » Commissioning will take account of and actively address the specifics of the local context e.g. rural and urban.
- » Commissioning will support both small highly targeted services and large scale local, regional and national services.
- » Commissioning should incorporate key capacity-building measures for the local community and voluntary sector in order that it can respond to the local context and the service requirements of Tusla.

It is important that commissioners be familiar with this document as each of these principles must be reflected in all commissioning work. A Commissioning **Decision Support Tool**⁹ is available here to ensure that these principles are fully embedded in all Tusla commissioning processes.

These principles must underpin all commissioning decisions and it is therefore essential that commissioners understand fully the six principles and embed them in their commissioning decision making processes.

⁹ See [Commissioning Decision Support Tool](#), 2016.

3. The Commissioning Landscape

Levels of commissioning

While Commissioning will occur primarily at Tusla Area level, commissioning can and will also happen across all of Tusla – at the local (Area), regional and national level.

Commissioning will involve thinking differently to find solutions to problems that happen at these different levels and applying a standard process as outlined in the *Commissioning Strategy 2019-2023* and *Commissioning Toolkit (2019)* to resolve these problems. For example commissioning may involve:

- » The contracting of an organisation to provide a distinct service or range of services within a specific geographical area or across a number of geographical areas.
- » The contracting of a consortium of organisations to provide a specific service or range of services within a specific area or across a number of geographical areas. This approach may also involve supporting consortia to form in advance of contracting.
- » The contracting of an organisation to provide a regional or national service or range of regional or national services.
- » The contracting of an organisation(s) to provide a specific franchised programme and related technical support and training for the delivery of a service by a partner agency, or agencies or by Tusla itself.
- » The contracting of a part of Tusla to provide a service to another part of Tusla. In this case the nature of the contract will be different but the commissioning methodology used to agree the contract will be the same.

Table 1 illustrates these levels giving some examples as they apply to Tusla services.

Table 1: Levels of Commissioning

National	<ul style="list-style-type: none">» Family Resource Centre Programme» Domestic, sexual and gender-based violence services» Residential care
Regional	<ul style="list-style-type: none">» Services that may require economies of scale greater than the local level» Services where efficiency and quality can be better negotiated at regional level
Local	<ul style="list-style-type: none">» A continuum of community-based services across prevention and early intervention; child protection and welfare; and alternative care» For example community-based family support; the Child and Family Agency Social Work Department; the fostering service
Individual	<ul style="list-style-type: none">» Individualised packages of support commissioned for a child or their family, for example, to support a Meitheal Plan or Child Protection Plan or as part of the Creative Community Alternatives initiative

In all these cases, the objective is to commission services so that there is no duplication or gaps in service provision across the areas, regions and nationally. Commissioners need to be aware of these levels of commissioning so that opportunities are not lost to improve services through reconfiguration of commissioned services within and/or across these levels of service. Commissioning therefore aims to ensure a continuum of service for children based on a minimum standard locally, regionally and nationally using the Agency defined principles to ensure quality, fidelity, value for money, and efficiency.

Who are the Commissioners?

There are a range of individuals involved in commissioning decisions within Tusla.

- » Area Managers and other Area staff with delegated responsibility for commissioning;
- » Groupings of Areas Managers and other Area staff with delegated responsibility for commissioning;
- » National Service Leads and other National Service staff with delegated responsibility for commissioning;
- » Regional Directors and other regional staff with delegated responsibility for commissioning.

The specific commissioners will vary depending on whether a service response is most appropriately commissioned at area, region or national level. Flexibility is essential if services for children, young people and adults are to be commissioned effectively across the continuum of service to ensure minimum standards are met across the whole organisation in line with Tusla's Quality Assurance Framework (2016).¹⁰

Recognising that Tusla commissioners will need support as the new approach to commissioning is implemented, Tusla will provide specific commissioning training to Tusla personnel. This Toolkit forms the basis for this training. Where there are opportunities to train Tusla and partners and providers together, these will be availed of.

What is being commissioned?

It needs to be recognised that commissioning does not refer only to contracting of external providers – commissioning also happens internally within the organisation and the Commissioning Toolkit outlined here applies equally to these internally commissioned services such as family support, child protection social work, educational welfare services and alternative care.

How will services be commissioned?

Commissioning Plans

Current commissioners will of course be familiar with what is being commissioned at present – a range of services for children are being provided by a diverse grouping of organisations within areas and nationally. This Toolkit will provide the basis for the new approach to commissioning using the practice of Commissioning Plans to determine local, regional and national needs/assets, and an analysis of what services (internally and externally) are available to meet identified needs and thus determine what will be commissioned in the future to achieve best outcomes. By the end of 2019 all Tusla's seventeen areas will have an Area Commissioning Plan. Commissioning Plans will also be developed by National Service leads. For example the Domestic, Sexual and Gender-based Violence (DSGBV) team has developed their first National Commissioning Plan. Where there is a need for national guidance but commissioning still occurs at Area level the term Commissioning Framework is used. A National Commissioning Framework for Parenting Support will be launched in 2019.

¹⁰ Tusla's Quality Assurance Framework (2016) http://www.tusla.ie/uploads/content/QA_Quality_Improvement_Framework.pdf

Commissioning Plans need to be updated and revised annually¹¹ in order to better identify current and emerging needs over time. This is essential if the new approach to commissioning is to be successful. Revisions will involve the use of more and better data, the incorporation of stronger and more sensitive consultation and the application of better analysis of this data and consultation.

The development of Commissioning Plans is the first step in the commissioning process – they identify the needs and the services available to meet them. The next step is in matching these needs to services that can meet these needs – internally or externally. Services will then be commissioned with explicit reference to the five agreed Commissioning Principles and within the context of the other Tusla decision making processes, with the ultimate requirement of achieving agreed child and family outcomes.

Identifying need and shaping provision and capacity building

Critical in this is the recognition that in some cases the needs identified cannot be met by currently available services – for example certain services will not be available in a given locality. In this case commissioners will engage in a process of proactive Shaping to develop provision so that the need can be met in the future. This identification of need and provision shaping will involve capacity building and related work to support actual and potential providers to meet identified needs. This might involve supporting organisations to re-orient current services, to develop strategic and business plans, to develop stronger monitoring and evaluation functions or stronger capacity to deliver. It might also involve encouraging organisations to work together in consortia or even identifying new organisations operating elsewhere, domestically or internationally, who can deliver in the future. This kind of shaping requires medium and long term planning, linked to a clear understanding of the importance of innovation, to ensure the meeting of identified needs.

There will be many cases where services are available, but these services have not demonstrated that they can actually address the needs, because they do not have evidence of impact, but again Tusla commissioners may support organisations to build their evidence-base as part of the capacity building approach.

¹¹ It is recommended that Local Commissioning Plans be updated annually. Some National Commissioning Plans may only need to be updated every two years or three years.

Commissioning and its linkages to the estimates and budget processes

Commissioning will operate alongside the annual estimates and budgets processes and underpin prioritisation decisions in order to shift resources to meet need effectively.

The Trutz Haase¹² Resource Allocation Model (RAM) uses an algorithm based on the Deprivation Index to weight various agreed criteria to allocate total available resources within Tusla.

The new commissioning approach will now provide managers with the effective tools to identify needs and strengths; assess how best to prioritise needs and capitalise on strengths; and provide a framework within which to shape the sector over time to meet these needs.

As needs are better identified and prioritised through the Commissioning Cycle, the need to ensure adequate resources are available to address these needs is essential. Using the RAM will allow Tusla to determine prioritisation of budgets more effectively than the more traditional incremental budgeting approach. This will require Area Managers and National Service leads to work to integrate these processes. The National Commissioning Unit will assist Area Managers and National Service leads in managing this interface between commissioning, RAM and budgeting and will ensure, progressively, that budgets are determined by prioritised need rather than historical allocations¹³. The Unit will liaise closely with Tusla Finance to manage this interface. The basic Commissioning Cycle, with these considerations added is set out in Figure 2.

¹² This is the Model Tusla uses as the basis for resource allocation nationally across geographical areas.

¹³ It is worth noting that this approach has been used successfully by other statutory bodies: Irish Aid of the DFA established a process of moving away from historical budgeting to budgeting based on quality and outcomes by setting annual percentage-based targets to shift the budget process away from historical allocations.

3. The Commissioning Landscape



Figure 2: Commissioning Cycle with additional considerations

Practice Leadership and Commissioning

It is important that all practitioners understand the relevance of Tusla’s commissioning approach to their individual practice. Whilst the commissioning approach to the continuum of care is relevant to service planning it should also be applied to the concept of practice leadership and relationship-based practice. Critically the continuum can be understood as a nested structure indicating that all children exist within a community requiring leadership and contribution from all practitioners across the continuum of care serving their child and family support network. Children requiring a high level of support continue to need the base support provided by services that primarily deal with low and medium level need and risk.

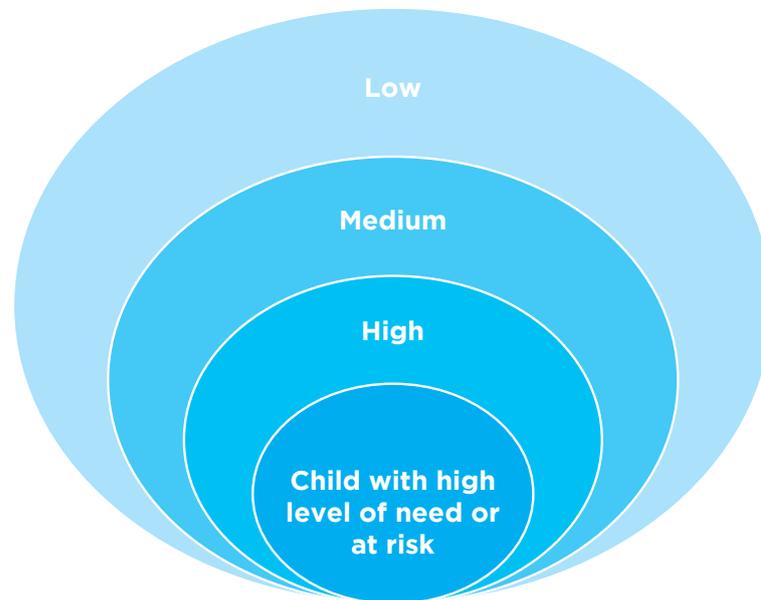


Figure 3: Child with high level of need or at risk being supported by all levels of service

So a child who requires support from a service at the high level will also require support from a universal service. For example good quality early years care and education can be an essential part of the safety plan for a child at risk of harm or a home visiting programme operating at low level can be requested to visit a family with high need or risk much more frequently than other families. An adolescent with mental health difficulties and engaged in risky behaviour may equally benefit from a normalised school experience or youth club as well as Child and Adolescent Mental Health Services. Community-based family support services that provide services primarily at the low and medium levels can also provide essential support at the high level. This ease of access to integrated support at all levels enhances the experience of services for families requiring the full range of supports.

Similarly children and families requiring services at the low and medium levels will require that support to be informed by the expertise of specialist practitioners in order to prevent those children and families requiring higher levels of support in the future. The expertise of Child and Adolescent Mental Health Services; Community Psychology; Speech and Language Therapy; and Occupational Therapy practitioners for example can be utilised to add value to low and medium level support services. A specialist service can operate outreach clinics in low and medium level settings to support parents and inform practitioners about potential prevention and early intervention approaches that can address trauma and enhance resilience.

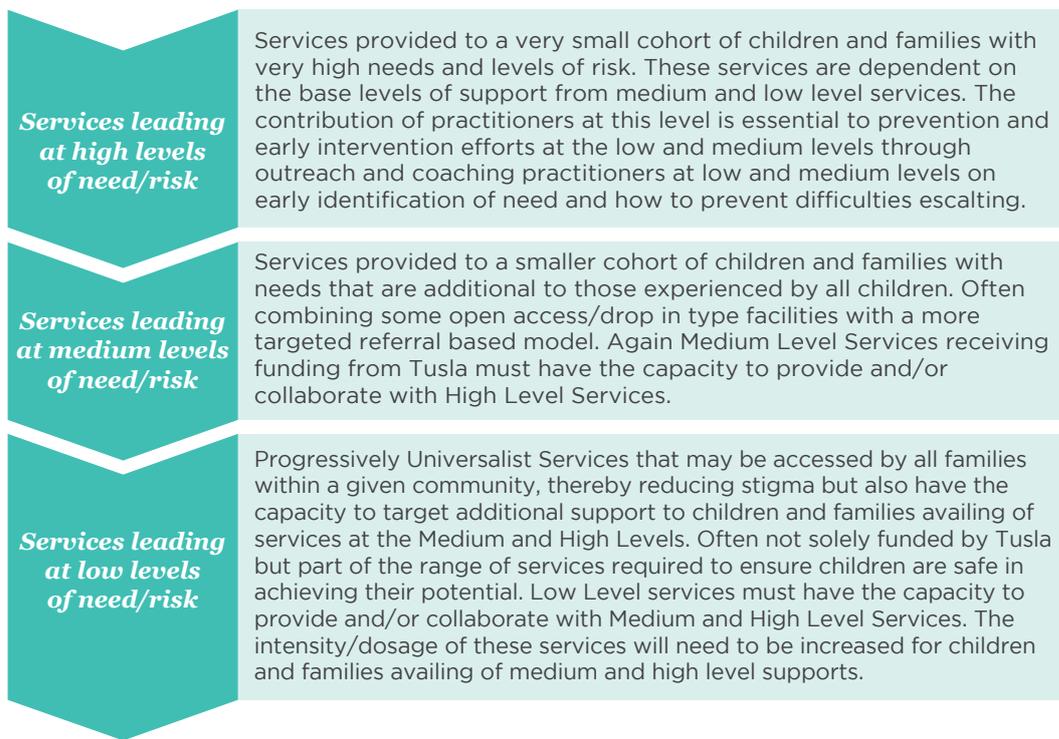


Figure 4: Practice Leadership and Commissioning – low, medium and high support across the continuum of care

So there is a need to move away from the perception that low or medium level services do not have a role in the lives of children with acute difficulties and equally a need to move away from the perception that high level services do not have a role in prevention and early intervention. Practice leadership requires a whole system approach at all levels. Practice leadership is also essential in promoting a culture of participation; integrated working; use of evidence; and model fidelity envisaged in Tusla's commissioning approach. In order to achieve this:

- » All services should engage in integrated working using the appropriate Plan.
- » The connectivity between services at each level is essential.
- » All services are members of the Child and Family Support Network(s) for their catchment area. High level services may serve multiple networks and therefore may have associate membership of those networks.
- » All services are maximising their use of evidence and fidelity to evidence-based models.
- » All services are concerned with individual strengths and community assets and capitalise on informal supports.
- » All services are participatory for the children and adults who use them and human rights-based.
- » In addition to leading at their level, all services make a contribution at other levels.

4. How to develop a Commissioning Plan

Developing a Commissioning Plan involves a series of steps through data collection and analysis, alignment with national strategic direction, and consultation with stakeholders including other commissioners; providers; and children, young people, individuals, families and communities. Having a commissioning approach will mean moving to more robust needs assessment and service mapping arrangements that influence and shape provision in terms of quality, evidence-base, value for money and a focus on outcomes.

A Commissioning Plan (CP) is ***a published document produced by commissioners, following a co-productive process of development with partners, which summarises need and provision, and identifies commissioners' future intentions.*** The Commissioning Plan should be the basis for commissioning decisions and be published, reviewed and updated regularly, every year for Area Commissioning Plans (ACPs). It is intended to be used by commissioners and providers to plan for the future to ensure that ***the correct range of supports and services are available to meet the needs of children, young people and their families.***

A Commissioning Plan should enable providers to work with commissioners, understand the direction commissioners are taking, why they are going in that direction, and what evidence this is based on. The involvement of providers in the development of the Commissioning Plan should enable providers to better position themselves to provide what is needed. The involvement of other commissioners should lead to a reduction in duplication and an increase in appropriate joint commissioning. The involvement of children, young people and their families should lead to a greater fit between need and provision and a greater uptake in services.

Having a published commissioning plan ensures transparency in terms of identifying the way Tusla spends public money on evidence-informed interventions and evidence-based programmes that are most likely to achieve the required outcomes.

The range of supports, provision or services available in a local area, including those targeted to meet the specific needs of children, young people and families is the context of need and provision. This includes the strengths/assets of the community and informal support networks. The purpose of identifying need and shaping provision is to ensure a diverse range of appropriate supports, provision or services in a local area, and ensure the sector as a whole remains vibrant and sustainable.

This chapter of the Commissioning Toolkit highlights good practice in the development of Commissioning Plans and aims to help commissioners understand how they can be used as a stimulus for identifying need and shaping provision.

What does a good Commissioning Plan look like?

A good Commissioning Plan should help commissioners understand the local context, clarify their intentions and build effective working relationships with providers. It should also identify what children, young people and families are saying about services.

The substantive characteristics of a Commissioning Plan are that it:

- » Contains a picture of current needs and provision, what that might look like in the future and how commissioners will support and intervene in a sector.
- » Supports its analysis by bringing together material from a range of sources such as needs assessments, asset mapping, surveys, service monitoring or reviews, and statistics into a single document.
- » Presents the data that all stakeholders need to know and use; and helps providers develop effective plans.
- » Is the start, not the end point, of a cycle of identifying need and shaping service provision.
- » Is provided in a straightforward and easy to use format, in a brief document that analyses as well as describes.

To ensure a consistent overall structure to our commissioning plans, but encourage the inclusion of local information, priorities and plans, we have developed a Commissioning Plan template with seven sections as outlined below. The detailed Commissioning Plan template, is provided to each Area by the National Commissioning Unit and follows the format below:

- » Standard foreword by Tusla Head of Commissioning Unit and localised foreword by Area Manager.
- » Introduction.
- » Direction of Service: Tusla's national direction and link with local service direction.
- » Commissioning Priorities.
- » Prediction of future needs, identifying key pressure points.
- » Current provision of services.
- » Likely future level of resourcing.
- » Identified models of practice.
- » Support commissioner will offer to providers.

How do you know if your commissioning plan is good enough? Ask people or self-assess it. **Appendix 1** is a Commissioning Plan checklist that offers a relatively quick way of assessing whether a Commissioning Plan covers the right ground, and the extent to which it contributes to understanding current and future need and provision. You can use it as part of a peer review process, i.e. ask another Tusla area to review your Commissioning Plan, or as part of wider stakeholder engagement discussions with provider organisations or other partners such as other statutory bodies.

Each Area Commissioning Plan is likely to be different. The Commissioning Plan template should provide a consistent structure, but you will need to decide what information you will use in your Commissioning Plan and how you will present it.

Below are some examples from the pilot sites:

Dublin South West, Kildare and West Wicklow pilot site used a table to summarise the profile of the local area:

Table 2:

	Dublin 12	Dublin 24 (Tallaght)	Kildare	West Wicklow
CYPSC	Dublin South City	South Dublin	Kildare	Wicklow
Key Facts	Urban	Urban	Rapid Population Expansion Urban centres Commuter belt Rural areas	Commuter belt Rural - isolated
Deprivation	High	High	Pockets of deprivation	High
Total Population	39,000	115,000	21,000	18,000
Under 17 (2011) % of Population	7,850 20%	30,000 26%	60,000 28%	5,000 27%

This shows the diversity of this Tusla local area.

Sligo Leitrim and West Cavan pilot site used maps to show both Tusla and partner agency services who covered which parts of the local area:

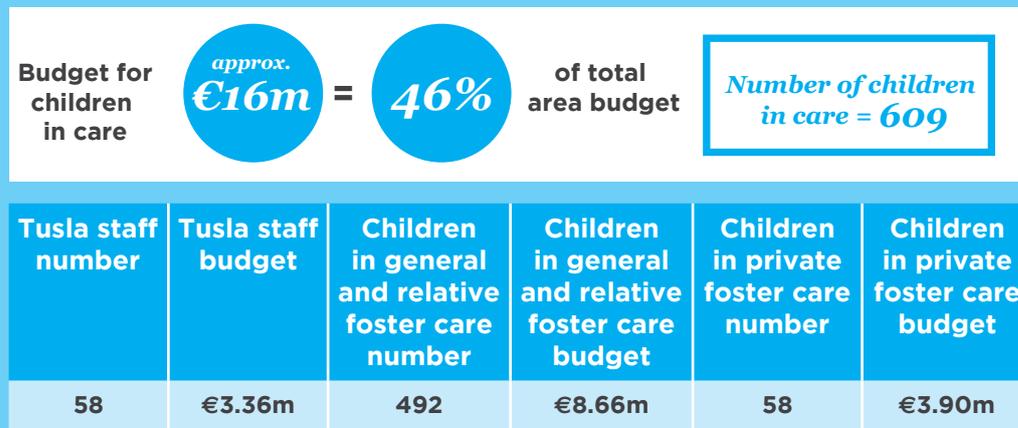
Figure 5



This provides a useful baseline picture of the current geographical distribution of services and could help to identify where there are gaps.

Dublin North City pilot site presented a breakdown of their approximately €16million spend on children in care:

Figure 6



This shows the proportion of the area's budget spent on children in care. It would be possible to work out the average spend per child.

Wexford and Waterford pilot site used case studies to give examples of services or models of practice that they would like to encourage, the Glór project is a youth project within South West Wexford Family Resource Centre specifically for young people at risk:

Jane is a young service user aged 14 years, who was engaging in high risk behaviour patterns including, self-harm, missing from the home, violence against siblings and drug misuse. Jane was accepted as a referral by the Glór project which she attended for two full days per week. The staff developed a programme of intervention that allowed Jane to engage in her passion for horses, but also around direct intervention for the issues presenting in her life. Jane has now reengaged with education and is no longer in danger of requiring a care placement.

Good practice in developing a Commissioning Plan

There are some key questions to be answered before you can really get to work:

1. What aspect of need and provision are we focussing on and therefore, what services are ‘in scope’ for this Commissioning Plan?
2. Who is going to lead, develop and author the Commissioning Plan?
3. What organisations or partners need to be involved in developing the Commissioning Plan and, specifically, how will service users and providers get involved in its development and use?

Being clear about the answers to these questions from the outset will help to avoid unnecessary delay, frustration and cost.

Scope

Firstly, what services are ‘in scope’ for your Commissioning Plan and what are your statutory obligations for this range of services? A Commissioning Plan will be for either a local Area or a national service. Either way it should cover internal services/staff as well as those contracted or grant funded by Tusla. For an Area Commissioning Plan you will need to be clear which nationally organised services, such as residential placements or adoption, are in scope and which are out. A Commissioning Plan is trying to answer the question – is this the best use of the totality of resources available to us? As such the Commissioning Plan needs to be ‘owned’ by the Tusla Area or national service management team that it relates to.

Development Team

It will be important to put together a Commissioning Plan Development Team that has the right mix of skills and roles to ensure that a local area or national service can complete the task. Developing a Commissioning Plan requires resources to pull together existing material, gather new data, engage with providers and families, and to author a document. The skills and roles needed to develop a Commissioning Plan are listed in the left hand column of the table below. The potential members of a team are listed in the right hand column of the table below.

Table 3: Commissioning Development Team

Skills and roles needed in a Commissioning Plan development team	Potential members of a Commissioning Plan development team
Lead the development and ensure there is capacity to deliver the plan	Area Manager
Project manage the development and evidence gathering	PPFS Manager
Gather local data and analyse national demographic and performance information	Regional Implementation Manager
Provide a breakdown of spend/resources or other financial analysis	CYPSC Co-ordinator
Review, plan and facilitate stakeholder engagement activities, including with children, young people and families	Principal Social Worker, Team Manager or other operational staff
Write the plan	Business Manager

This chapter started off by stating that a Commissioning Plan is a document produced by commissioners following a co-productive process with partners: providers, children and families who use services and other agencies or partners. Consequently, plans need to be put in place for how relevant material will be shared with partners, how their views can be effectively sought and what process is needed for reviewing and updating the plan in future. Thinking about how the plan can be used with the provider community should be part of its development.

Case study: using survey to inform the needs analysis

Donegal used an online survey to send a questionnaire to all agencies and providers under the umbrella of the CYPSC (Children and Young People's Services Committee). The focus was on improving the commissioning of services (now and in the future). It was limited to 10 questions, which ranged from 'gaps in services' to 'anticipate future needs over the next 3/5 years'. The survey also asked people to identify how they can best be supported to engage with the commissioning process. Top tip: give it 6 weeks before closing the survey and target your response audience via heads of services, and do reminder email every 2 weeks.

Case study: external assessment of need and services

Dublin North City, in discussion with partner agencies and under the CYPSC umbrella, commissioned an external agency to undertake a first stage needs and services mapping exercise. This helped to provide both improved quality of data mapped across the geographical area as well as starting to identify more clearly those cross cutting needs that can't be addressed successfully by one agency alone.

Case study: focus group feedback from Tusla staff

Dublin South West, Kildare and West Wicklow held two consultations with their staff teams on commissioning and the development of the Commissioning Plan. These were to provide an opportunity for staff to comment and give input to the key messages in the draft plan and ensure they reflect what staff feel are the priorities for the area. The discussions also included what would be useful in terms of communication within Tusla to help inform local commissioning. Staff welcomed the opportunity to contribute and provided valuable feedback on the priorities.

Case study: unmet need questionnaire

The Sligo, Leitrim, West Cavan development team sent a questionnaire to all professionals and providers asking them to identify unmet needs from a service and network area perspective. In support of the questionnaire, stakeholder events were organised with the three network areas across Sligo, Leitrim and West Cavan to directly seek the views of professionals and providers working in the areas and to identify needs and common ground.

Stakeholders should be engaged purposefully at different development stages, rather than presenting them with a completed plan. Figure 7 suggests a potential approach to the development of a plan that recognises that stakeholder engagement should be ongoing:

4. How to develop a Commissioning Plan

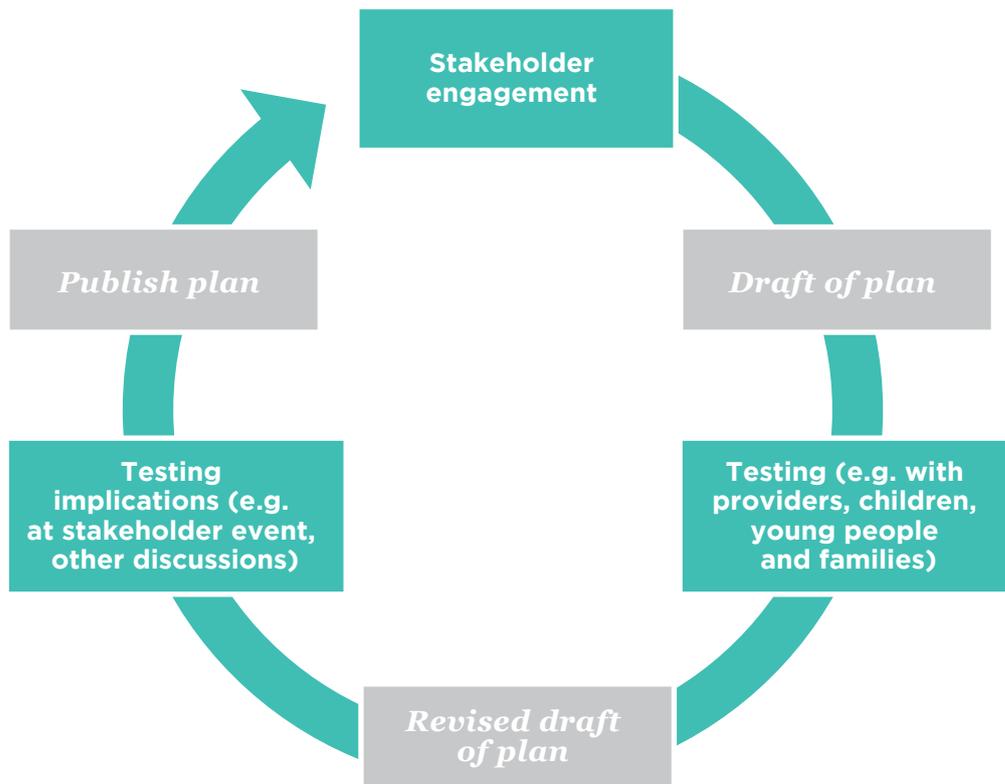


Figure 7: Development of Commissioning Plan

What this diagram attempts to show is that publishing your first iteration of a plan is not the end of the process. It should be reviewed and updated regularly. However, you need to start somewhere. Set out in Table 4 overleaf, is an outline of an activity list that you can adapt and use to develop a plan over a six month period. It shows the key activities that the development team might need to carry out (or organise for others to do). It also identifies some example tools or materials that you can adapt and use to help you carry out those activities.

Table 4: Commissioning Plan timeline

Stage	Commissioning Plan development activity	Timeline	Tool
1	Area or national manager to identify members of the Development Team using the skills/roles identified in Table 3.	Start	
2	Initial meeting of the Development Team to review existing data/documents and Plan activities to develop a plan	Month 1	Action Plan – Appendix 2
3	Stakeholder event ‘An introduction to identifying need and shaping provision’ for all interested parties	Month 1	Stakeholder event materials
4	Initial workshop with providers to inform them of and engage them in the process	Month 2	
5	Initial workshop with frontline operational staff and managers to inform them of and engage them in the process and define their role in its development	Month 2	
6	Review of key messages from existing consultation or engagement with children, young people and families	Month 2	
7	Undertake a review of local needs and services, with stakeholders, to help identify gaps and priorities	Months 1-3	Unmet needs questionnaire
8	Development of first draft plan	Months 2-3	Plan template
9	Engagement session with CYPSC to consider the need and services analysis and determine local priorities	Month 3	CYPSC workshop
10	Facilitation of stakeholder workshop to consider key messages in the draft plan	Month 4	
11	Revision of the draft plan	Month 5	Development team meeting agenda
12	Peer review of final draft plan	Month 5	CP checklist – Appendix 1
13	Facilitation of stakeholder conference to test implications of the plan	Month 5-6	
14	Preparation of the final version	Month 6	
15	Sign off and publish the plan	Month 6	

4. How to develop a Commissioning Plan

Lastly, we asked the pilot sites to summarise their learning from developing the initial Commissioning Plans in 2016. Their top tips are given in the table below.

Table 5: Pilot Sites Top Tips

Pilot Sites Top Tips
Get all of local senior management team on board.
Social workers may perceive that the plan has little to do with them and more to do with commissioning funded agencies only.
Try to avoid school holidays for the time-frame for completing your plan, particularly stakeholder engagement activities in order to ensure schools are included.
Use people with community development experience as they have important skills in relation to stakeholder engagement.
Engage some outside resource/support person to assist with needs analysis.
Be rigorous around data, clearer on what to include, and have the references properly recorded at the beginning.
Be clear in developing the plan how Tusla staff and external agencies feed in and out of it, have clear feedback processes.
Have clarity on how local structures including CYPSC are utilised.
Don't under estimate the importance of good communication – trickle down is not enough.
A map of structures and roles and responsibilities is helpful.
Do an early workshop with the Tusla local team to establish shared pressure points, gather ideas of how to tackle the problems.
Don't be afraid of communicating and develop listening skills when dealing with funded/non funded agencies and statutory agencies.
Time limits and practical limitations curtail the level of engagement possible. Yet if we were to afford organisational parity of esteem in the process we would be involving providers and partners in the design, implementation and evaluation of the process. This means providing the necessary resources to facilitate their engagement.
Information meetings with providers and partners provided room for discussion and understanding of the process of commissioning and the purpose of Commissioning Plans.
Examples of completed Commissioning Plans provided a useful guide.
Accessing the voice of the seldom heard people and groups and making the process relevant to them has been hard. This is being approached through the services and groups working on the ground in local areas. Make service user participation central to the process.
The timing of the development of the plan means the old census figures are being used. This should be updated when new figures become available.
There was concern in relation to the process of commissioning with funded organisations. Information provided on commissioning and the opportunity for discussion assisted in alleviating this.
There is a benefit in sharing experiences in developing the plan with other areas.

5. Outcomes and Evidence

Tusla and the importance of evidence

Commissioners will be familiar with what is being commissioned at present. One of the core principles as noted in this Toolkit is the requirement now to focus on commissioned services that are evidence-based and evidence-informed in order to achieve defined outcomes. However, Tusla at present does not know what percentage of the programmes it commissions are evidence-informed and/or evidence-based but it may be less than 5% of total commissioned services. In its commissioning practice, Tusla recognises the need to set achievable targets in terms of commissioning evidence-informed and/or evidence-based programmes.

The Commissioning Guidance states that *the commissioning of services will be informed by a consideration of evidence on effectiveness both in the planning and monitoring and evaluation of services to meet needs and Tusla now has defined four levels of evidence* that will be used in determining how services are commissioned in the future and has set targets which commissioners will aim towards as they commission services using the new approach:

Table 6: The four levels of evidence, adapted from Veerman and Yperen, 2007

Level of Evidence	What this means in relation to commissioning?	Target % of commissioned service by level of evidence starting 2019
Level 1 – Describes the goals, activities and target groups for a particular service	Does this meet Agency priorities and intended outcomes for service users?	Year 1 60% Year 2 80% Year 3 100%
Level 2 – Identifies the sound theory which underpins the intervention, as well as an identification of how and why this particular intervention will lead to specific outcomes	Does this meet Agency priorities and intended outcomes for service users?	Year 1 15% Year 2 30% Year 3 50% Year 4 70% Year 5 100%
Level 3 – Involves systematic evaluation to show desired changes have occurred with the clients engaged with the intervention.	Are there proven measures of effectiveness?	Year 1 5% Year 2 10% Year 3 15% Year 4 20% Year 5 25%

continued

Level of Evidence	What this means in relation to commissioning?	Target % of commissioned service by level of evidence starting 2019
Level 4 - With this level of evidence, it is possible to judge if a particular intervention is efficacious or not. This level of evidence can answer whether the intervention itself has caused the outcome.	Are there proven measures of effectiveness linked to outcomes?	Year 1 2% Year 2 3% Year 3 5% Year 4 8% Year 5 10%

Given the low level of commissioned services that are evidence-informed and/or evidence-based commissioners will inevitably have to recognise that they will in the main be commissioning services that are presently at Level 1 and Level 2. While some services are well-evaluated with proven results, the majority are understood to be delivering good outcomes for children and families, but have not been formally evaluated. Commissioners will need to set realistic annual targets for commissioning services at the different levels of evidence and really engage the sector, through active capacity building, to encourage the services (internal and external) to move their services up the levels as noted here. An example of this occurring internal to Tusla is the partnership between Tusla and the Centre for Effective Services on Empowering Practitioners and Practice Initiative¹⁴ and the implementation of the Signs of Safety¹⁵ as part of the Child Protection and Welfare Strategy.

In summary, a key focus for commissioners, with the support of the National Commissioning Unit, is to give consideration to:

- » The level of evidence that *applies* to service provision.
- » The level of evidence we *require* in order to commission services.
- » The optimum *balance* between evidence-informed commissioning and striving for innovation through trialling new practice approaches.
- » The need to *ensure fidelity monitoring* to Agency priorities for all services.
- » The need to engage in *capacity building* to shape the sector to meet the priority needs of children as defined by Tusla through its Commissioning Plans.

¹⁴ EPPI – <https://www.effectiveservices.org/work/tusla-empowering-practitioners-and-practice-initiative>

¹⁵ <http://www.signsofsafety.net/>

Again the Commissioning Decision Support Tool will be useful in supporting commissioning decisions with regard to evidence (www.tusla.ie/about/commissioning/). It will provide a record of the current status of commissioned services in regard to their level of evidence. The National Commissioning Unit will provide specific support to commissioners in terms of services and evidence.

Innovation and Rapid Response

Within this context commissioners need to recognise the importance of innovation and rapid response. Needs can change rapidly and Tusla commissioners need to be able to respond to these emerging needs. A typical example might be changing needs as a result of the impact of the global refugee crisis and the arrival of programme refugees or asylum seekers to a geographical area. Another might be needs arising due to changes warranted by legislation. In both cases commissioning needs to be flexible to respond to emerging needs and so commissioners may decide to identify and commission a service which only has Level 1 in terms of evidence but the commissioner believes nevertheless that the service can still meet agency priorities and intended outcomes for children and formal evaluation can be implemented as quickly as is feasible.

Similarly commissioners may decide on occasion to commission services that are testing out new approaches to intractable or problematic needs and which therefore might only meet Level 2 in terms of evidence in that they have a sound theory that underpins the innovation but as yet, no evidence, for example as part of the Creative Community Alternatives initiative. In this instance commissioners are identifying need and shaping provision by encouraging provision in a new direction to address needs and this should be encouraged.

Furthermore, commissioners will also need to consider innovative management approaches – changes to the way services *are structured and delivered* – so that services are better delivered in the future. For example aligning services with Child and Family Support Networks to create coterminosity, bringing organisations together into consortia, bringing in services that are being delivered elsewhere, the ‘franchising in’ of evidence-based programmes to be delivered by Tusla staff or partner organisations – these and other management approaches reflect the need for commissioning to be innovative and responsive. The National Commissioning Unit will actively support commissioners in investing in these types of innovation.

6. Capacity Building

One of the agreed Tusla Commissioning principles is that: *Commissioning should incorporate key capacity-building measures for the local community and voluntary sector in order that it can respond to the local Sector and the Sector position of Tusla.* There is also a need for capacity building for services provided internally to Tusla.

A partnership approach will be taken, engaging other statutory partners and respecting the unique role of community and voluntary organisations, including small scale providers.

Commissioning within an Irish context must take account of the significant role played by the community and voluntary sector in providing services to children and families on behalf of the State. It is imperative that all elements of the service provision system understand service costs and the contribution that they are required to make to improve outcomes for children. Partner providers (whether for profit or community and voluntary sector) and all public sector providers should be needs-led, outcomes focussed and equally accountable for results. This means that partners, particularly community and voluntary organisations, who are aware of the strategic needs of the community will have the opportunity to position themselves to meet these needs. The community and voluntary sector plays an important role in the co-production of services and very often in the development of more innovative solutions to identified needs. Once a service specification is drawn up for key target developments, service rationalisation, re-configuration and priorities, it is important to have a formal engagement with internal and external stakeholders to communicate the service requirements; and to engage in proactive problem-solving and change management to ensure that the priorities can be met. This will happen during the Commissioning Plan development process.

It is important to determine the quality and cost of service provision in the external environment versus the internal and to determine how to proceed from a value for money and quality perspective, whether through providing a service internally or by contracting an external agency to provide the service. Either solution may involve reconfiguration of existing service arrangements to meet the service need. Certain services will be best provided directly by the Agency. In some instances, this may be a statutory requirement. Other services may be better provided, or could be provided, by an external partner of the Agency. For example, there may be instances where a community-based voluntary organisation is better placed to provide a service due to service user preferences.

Or there may be a gap in expertise which can be best met by an external provider. Similarly there may be instances where a service is best provided by another statutory agency. This may require the Agency to negotiate the provision of the service by the statutory partner in the form of a non-financial agreement. This arrangement is provided for in the Child and Family Agency Act, 2013. The Agency should aim to avoid replicating services optimally provided by other statutory partners.

A key focus for Tusla moving forward is the need to shape the interaction of need and provision to ensure that Tusla, along with its statutory and voluntary and community providers, is able to meet the needs in a coherent, strategic and effective manner. Tusla will use capacity building to shape provision using short, medium and long-term strategies that will focus on:

- » Recognising the significant role played by the community and voluntary sector in providing services to children and families on behalf of the State.
- » Providing support to the community and voluntary sector, to internal Tusla services and to private providers to provide optimal service solutions to meet the identified needs, e.g. Evidence Showcase Events, training and development, coaching.
- » Ensuring that Tusla can provide a service internally or commission the service from elsewhere.
- » Exploring opportunities for joint commissioning with other statutory agencies.

Underpinning all these components is the Tusla commitment to:

- » a partnership approach to identifying need and shaping provision
- » transparency and openness throughout the commissioning process

7. Decommissioning

As per the *Better Outcomes, Brighter Futures Policy Framework: Resource allocation within services will be based on evidence of both need and effectiveness, and services that are not working will be decommissioned.*

Decommissioning literally means ‘to remove from service’¹⁶. In the context of children’s services it means *the process of planning and managing a reduction in service activity or terminating a service or contract in line with commissioning objectives.*¹⁷

Commissioners are sometimes cautious of using the concept of decommissioning because of well-founded concerns that it will be negatively construed as a tool to cut services. Commissioners need however to embrace the concept of decommissioning as an integral part of both shaping provision and moving the organisation towards services for children that are evidence-based, needs-led, strategic and cost effective.

Effective decommissioning will involve a series of steps, but must be predicated on transparency. It should be fully clear why a decision has been taken to decommission a service and it needs to be known and understood by all stakeholders. Decommissioning needs to be planned as an integral part of the commissioning cycle.

As part of the Commissioning Cycle decommissioning needs to occur in a planned strategic manner, so that resources are released and reinvested. Also as services are reviewed, reconfigured and potentially decommissioned, it is important to remember that decommissioning is only one of a number of options for commissioners to consider. Consideration should be given to maintaining and developing existing services, and negotiating changes in contracts to facilitate change.

Prepare. These are the activities that should be undertaken before a decision to decommission a specific service is taken and will contribute to the success of the process when it is needed. This is about ensuring there is the right environment for decommissioning, including the right policies and processes and the right levels of expertise. There are legal and contractual issues to consider, the management of expectations of organisations and the potential impact on organisations and their clients to assess.

¹⁶ Oxford Dictionary.

¹⁷ Strategic Commissioning 11 December 2012.

Decide. This is the approach to making a decision about a particular service, and will include consideration of what services are needed, effective and cost effective; what are the financial implications of decommissioning, and whether there are any contractual restrictions. There will need to be the appropriate level of consultation and engagement with stakeholders, particularly service users. The development of the Commissioning Plan will be central in this decision-making as will the move away from assuming rollover of historical budgets.

Do. This is the actual process of decommissioning a service, and includes the need to communicate effectively with a range of stakeholders, as well as ensuring smooth transitional arrangements. Tusla commissioners will need to recognise that decommissioning may occur *in parallel* to the development of new or alternative service arrangements with the organisation whose service is being decommissioned. Tusla commissioners will need to assess whether decommissioned organisations might need capacity building support to get them to a level where they can re-engage with Tusla in the delivery of services.

Review. This ensures lessons learnt can be applied to any future decommissioning and should particularly inform the preparation stages of the process. The decommissioning of services should be undertaken against a background of ongoing performance management and review of services. Equally, it is important to have developed a constructive relationship with providers. This will not only inform any decommissioning decision (given their knowledge of the service), but will also support the decommissioning process itself.

There should be clarity with all involved parties about the risks involved in the process, and the approach being taken to manage such risks. It is best practice to develop a risk assessment and management plan for all decommissioning processes with consideration given to proportionality in respect of scale and impact of the service.

The Tusla National Commissioning Unit will provide support to commissioners at local, regional and national level in regard to the planning processes required for effective and fair decommissioning as part of the Commissioning Cycle. This will include support for the consequences of decommissioning as Tusla commissioners move through the process. For example commissioners might need to prepare for the lobbying of local politicians by decommissioned organisations, for negative media coverage or negative public responses. These can be difficult to manage and need to be anticipated and planned for. Access to legal advice and reference to a clear policy environment are critical and the National Commissioning Unit will ensure that these are available to

commissioners. Whilst recognising that the situation of an organisation that has had a service decommissioned is not the responsibility of Tusla, there is a need for Tusla to be aware of the consequences of the decision for the organisation and for other providers. Support should be provided to assist organisations to deal with the aftermath of decommissioning and to allow for the potential of future commissioning of an organisation that has had a service decommissioned.

Within Tusla's methodological approach, decommissioning requirements will therefore emerge as Commissioning Plans are developed and refined over time. These Commissioning Plans will progressively identify current services that represent 'legacy' services that do not now fit with the needs-led, outcomes focussed and evidence-based/evidence-informed approach Tusla is adopting. Managing this set of legacy services may take more than one annual cycle and commissioners need to be prepared for this.

8. Fidelity Monitoring

Definition

Fidelity Monitoring is a method to ensure that something has been accomplished according to a predetermined plan. It is a way of preventing ‘project drift’¹⁸ and involves agreeing and tracking targets using an implementation science approach. It is not enough to identify the needs and then commission the services required using the Commissioning Principles. The use of service contracts and regular partner meetings will now be supplemented by fidelity monitoring processes that will track impact. The new commissioning approach will therefore require all commissioners to develop effective tools to monitor Outputs using *Indicator Sets* to ensure that commissioned services are progressing towards the agreed Outcomes. This should not be complex but it will require training and support for commissioners within Areas and National Services in the development and application of Fidelity Monitoring (and implementation science) tools.

The National Commissioning Unit will include specialist staff who can embed this approach across the organisation and who will, with Tusla Workforce Learning and Development, provide training and support to staff that require it, including providers and partners. Fidelity Monitoring will allow commissioners to determine in real time the extent to which commissioned services are achieving outcomes for children, young people and adults. Tusla as an organisation will have to change to embed this fidelity monitoring component of commissioning – Tusla will need to agree minimum standards of service across the continuum of care – low, medium and high – so that commissioners can identify and agree the necessary outcomes they need to achieve. Furthermore, Tusla will develop new and standardised templates for developing and preparing project plans/ submissions for all services. These will be outcomes-based so that impact can be measured and service approvals standardised against Agency priorities. The Commissioning Decision Support Tool will also be utilised to ensure baseline criteria are met in commissioning processes.

Tusla’s new approach to commissioning therefore embeds fidelity monitoring within the Commissioning Cycle. It is not an add-on or a supplementary requirement, it is fundamental to the success of the new approach. Fidelity Monitoring builds on best practice in the sector and provides a mechanism for directing resources to where they are most needed by confirming that these resources are having the desired impact on a day to day basis. Commissioners will need to embed this approach within their teams and build their monitoring functions to meet this requirement.

¹⁸ The unintentional subtle changes to a plan over time.

9. Engagement with children, young people and families on Tusla Commissioning Priorities

This Toolkit should be read in conjunction with and be informed by other key documents that relate to consultation with children, young people and families. The Tusla Child and Youth Participation Strategy¹⁹ requires engagement with children and young people in relation to service planning, design, development, delivery and evaluation. The Parenting Support Strategy²⁰ requires a partnership approach that involves the full participation of parents. Meaningful consultation and participation of children, young people and families is critical to the successful development of Commissioning Plans and commissioners will need to demonstrate that they have adequately engaged and consulted with these groups. The views of children, young people and their families should be sought to develop an overall, integrated needs assessment. Children and Young People have a right to participate in all matters affecting them under the United Nations Convention on the Rights of the Child and Tusla, under Section 9.3 of the Child and Family Agency Act, 2013, are required when planning and reviewing the provision of services to ensure that consideration is given to the views of children. This right is reflected in the National Strategy on Children and Young People's Participation in Decision-making (DCYA, 2015) for Children and Young People. Formal structures and dedicated resources are required to ensure that service users are supported to participate within the Commissioning Cycle. Collating the views of children and families and service providers, forms part of the stakeholder engagement that continues throughout the Commissioning Cycle.

¹⁹ *Child and Youth Participation Strategy 2019-2023*. Child and Family Agency, 2019.

²⁰ Available at: http://www.tusla.ie/uploads/content/Tusla_Investing_in_Families_Parenting_Support_Strategy.pdf

10. Commissioning in partnership

Joint Commissioning is defined as *the ways in which health and social care agencies work together to decide what kind of services should be provided to local populations, who should provide them and how they should be paid for.*²¹

The Barker Commission which was established in the UK in 2013 to look at this issue took the concept of joint commissioning further and described 'integrated commissioning' and recommended that the UK *move to a single, ring-fenced budget for health and social care with a single commissioner.*²²

Commissioning for Better Outcomes from the Department of Health in the UK states that *effective commissioning cannot be achieved in isolation and will be best achieved by collaboration with other key services.* In Northern Ireland, joint commissioning was adopted through the development of Joint Commissioning Plans for the Health and Social Care Boards based on 2009 legislation. As noted in its *Commissioning Strategy*, Tusla will explore and examine opportunities for integrated commissioning on a multi-lateral basis with other statutory organisations and through the structure of Children and Young People's Services Committees. Tusla is currently exploring working opportunities for integrated strategic commissioning with the HSE, to increase reach and access of parenting supports and conjoint learning opportunities in relation to the hidden effects of parental drug and alcohol use and mental health problems and domestic, sexual and gender-based violence on children and young people. Tusla, in its lead role with the Children and Young People's Services Committees (CYPSC), will further explore opportunities for integrated commissioning to develop new creative responses to service user needs.

²¹ Dickinson, Jan 2013. Health Services Management Centre. Birmingham University.

²² King Fund: Humphries. June 2015. Options for Integrated Commissioning ... Beyond Barker.

11. The National Commissioning Unit

The Commissioning Strategy and this Commissioning Toolkit will form the basis for the work to be delivered by the National Commissioning Unit. This Unit is a key Output within the Tusla Corporate Plan. The National Commissioning Unit will comprise three main functions:

- » Strategic Planning and Commissioning
- » Identifying Need and Provision Shaping
- » Commissioning Performance and Quality

These are described in more detail below but they relate to all of the activities as described above within the Commissioning Cycle.

Strategic Planning and Commissioning

The core activities to support commissioning and planning will include:

- » Developing and co-ordinating systems and processes for the collecting and analysing of data/intelligence to contribute to service or Area, Regional and National Commissioning Plans and Frameworks. This includes consultation and communication with a wide range of stakeholders, with clear links to the Tusla Participation Strategy.
- » Presenting data and proposing directions for change to organisational business planning, strategic planning and specific commissioning strategies.
- » Provide support to Regions, Areas, Children and Young People's Services Committees and national programmes in the form of collating and analysing information in order to inform the commissioning and development of local services on a multi-agency basis.
- » Ensuring that effective Commissioning Plans for improving services are in place in all localities and that these Plans are fully implemented.
- » Providing specific supports for the implementation of Area Commissioning Plans.
- » Develop and provide support to regional, area and specialist commissioning partners, through the development of National Account Managers for specific areas.
- » Involving key commissioning agencies and stakeholders, including providing advice and support to a range of agencies about their role in the Commissioning Cycle.

- » Leading on providing support to a range of commissioning groups and partner organisations in relation to commissioning best practice and legislation, including pooled budget arrangements across agencies.
- » Developing cross-agency monitoring arrangements, and reviewing contracts and commissioning strategies based on these criteria.
- » Highlighting where services that are poorly performing or redundant and may be de-commissioned.
- » Leading on service development for a specialist area and developing service redesign proposals in conjunction with working groups.
- » Identifying shortfalls in performance and ensuring that effective action plans for addressing these are developed.
- » Setting up and managing internal pooled budgets, as required.

Identifying Need, Provision Shaping and Contracting

The National Commissioning Unit will also have lead responsibility for support for identifying need and shaping provision in order to stimulate and manage the type of providers that are best suited to achieve effective delivery of key outcomes for children and families and develop positive relationships with existing, as well as potential, providers. This will be achieved by:

- » Developing and embedding common processes to service specifications.
- » Supporting the increased use of an outcomes-based approach to service specification, monitoring and reward.
- » Pro-actively monitoring and reviewing all commissioned services (internal and external).
- » Establishing and managing contracts with a variety of providers and supporting Area commissioners to ensure compliance with national contracts. Tusla will monitor and review contracts regularly as part of the Fidelity Monitoring processes.
- » Supporting a mixture of providers for long-term sustainability of outcomes.

Commissioning Performance and Quality

The National Commissioning Unit will also have key responsibility for Performance and Quality of Commissioned services.

The Unit will link with Tusla's Quality and Risk Department to ensure key performance data and information about needs of clients on a locality basis using national prevalence data, local data and aggregated data from a range of assessments is widely available to all commissioners.

Specific responsibilities will include:

- » The provision and facilitation of information to regularly challenge and improve the performance of all commissioned services.
- » Providing information, support, training and expertise in the development of commissioning strategies, plans and monitoring and evaluation processes.
- » Communicating with and support to providers to improve monitoring and evaluation performance and to share information.
- » Ensuring that the development of all Commissioning Plans and associated activities meet the standards specified in the Commissioning Guidance, Commissioning Strategy and Commissioning Toolkit.

Central to the Units role in Performance and Quality of commissioned services will be the new component of fidelity monitoring outlined above.

Conclusion

This Toolkit is a *How To* for commissioning that translates the Tusla Commissioning Strategy (2019) into practice. It provides a methodological framework and reference manual for commissioners. It describes how commissioning will be embedded across the organisation using the methodology of Commissioning Plans; identifying need and shaping provision; fidelity monitoring; and reviewing and evaluating so that need is prioritised and services are evidence-based and evidence-informed.

It is intended that as a result, services will have a greater impact, which lead to better outcomes for children. This will occur progressively in a planned manner, driven within the organisation by the National Commissioning Unit. This Unit will support commissioning by ensuring the tools, training and support that commissioners need is in place. It will act as a repository for best practice and a technical resource for all staff engaged in commissioning – locally, regionally and nationally.

Commissioning requires a radical shift in the way Tusla works – a shift that requires all staff to use this Toolkit and work through the interrelated processes that commissioning requires. Commissioning will still happen locally within the remit of the Tusla Areas, independently, in partnership with other areas and regions and also within national services. This won't change but what *will* change is the process by which commissioning takes place, supported by the National Commissioning Unit.

Appendix 1: Commissioning Plan Checklist

How does your Commissioning Plan fit the bill?

This checklist offers a relatively quick way of assessing whether your plan covers the right ground, and the extent to which it is Sector facing. You can use it to review your own plan, and perhaps as part of a wider discussion with provider organisations or other stakeholders.

Score 1 to 5, from 1 = not at all, to 5 = very well

Question	Score
How well does your Commissioning Plan describe the direction of the service?	
How well does it analyse the current population, unmet needs, community assets and anticipated projections of future demand for services?	
How well has understanding of needs been informed by service users, their families and/or carers?	
How well does it show the number of people currently being supported in the area/service and spend (or with partner commissioning agencies)?	
How well does it show what services are available, where they are and who provides them?	
How well does it set out the state of the sector, identifying whether it is growing, contracting or stable?	
How well does it set out where there may be a shortfall of provision?	
To what extent does it offer intelligence about the quality of provision, i.e. performance as shown through complaints, monitoring, inspections, research etc?	
How much information is provided about the resources which are likely to be available in the future?	
To what extent does it describe what services or models of care commissioners would like to see in the future?	
To what extent does it set out the support commissioners will offer to providers e.g. future contract opportunities, training and development, etc.?	
How much information does it offer about the opportunities there are likely to be for providers in the future?	
To what extent is the Commissioning Plan concise, readable and clear?	

Appendix 2: Commissioning Plan Action Plan

This Action Plan is designed to support you to produce a Commissioning Plan by helping you think through your initial actions for its development. It focuses on your current needs assessment and service provision data and, given that, what actions you might need to take next to start to develop your plan.

Section	Questions to consider
Future needs	<ul style="list-style-type: none"> » What needs assessment information do we currently have about our population now and in the future? » How are our communities likely to change in the next five years? » What are providers telling us about what children and families need, or what they think about current services? » What else do we know about the views of the local community? » Do we need to carry out further consultation or engagement activities with stakeholders?
Current provision	<ul style="list-style-type: none"> » What is our current spend on services and how is this broken down? Has this changed over time? » What services are provided, by who, where and to whom, and what has changed over time? » What do we know about the outcomes or impact of these services? » Do we have any gaps in provision? » What are the particular strengths in what we currently provide?
Level of resourcing	<ul style="list-style-type: none"> » What is our predicted future spend on this range of services? » What would we like to change?
Identified models of practice	<ul style="list-style-type: none"> » What are the key outcomes we want and how will we measure the impact of services in the future? » What types of services are likely to achieve these outcomes? » What does research tell us about best practice about these services? » What national and/or local drivers or initiatives do we need to take into account? » What services are we likely to decommission or stop supporting in the future, and why? » Given the above, what are the high priority areas for us where we are likely to focus our efforts? » Do we have clear commissioning intentions around what we will/won't support in the future?
Key next steps?	

Can we answer these questions? If not, what action might we need to take to do so?

TÚSLA An Ghníomhaireacht um
Leanaí agus an Teaghlach
Child and Family Agency

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