

NATIONAL GUIDANCE &
LOCAL IMPLEMENTATION

August 2013



CHILD AND FAMILY AGENCY COMMISSIONING GUIDANCE

TÚSLA

An Ghníomhaireacht um
Leanaí agus an Teaghlach
Child and Family Agency

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1.0

INTRODUCTION

This document is the first nationally developed Commissioning Guidance for child and family services in the Republic of Ireland. The document outlines the current context regarding the commissioning of child and family services before moving to define and develop the understanding of commissioning within the context of the Child and Family Agency (The Agency). It must be viewed as one component within a suite of work being conducted by the National Office of Children and Family Services. Additional components include: What Works in Family Support?; a Parenting Support Strategy; a Participation Strategy; the Report of the National Survey of HSE funded agencies providing services to all children and their families; and the new National Service Delivery Framework inclusive of guidance on the implementation of an area based approach to prevention, partnership and family support and Meitheal – A National Practice Model.

For the purposes of this document, commissioning is defined as **the process of deciding how to use the total resources available for children and families in order to improve outcomes¹ in the most efficient, effective, equitable, proportionate and sustainable way².**

There may be a tendency to view commissioning narrowly, considering only the funding by the Agency of external organisations. However, the commissioning process applies equally to the use of human and financial resources of core services such as The Agency social work staff and residential care services. Also relevant are structured arrangements/agreements, such as memoranda of understanding/protocols, between the Agency and organisations with which it has no funding relationship, but from which it needs to agree service provision, whether statutory or non-statutory. The role of schools as a key agent in children's lives is particularly critical. The above definition also deliberately goes beyond mere financial efficiency to include reference to effectiveness,

1 An outcome is an articulated expression of well-being of a population in a place which provides all agencies with the opportunity to contribute to that outcome with their individual programmes. (CAWT, 2009, p.6)

2 Adapted from Commissioning Support Programme: Good Commissioning Principles and Practice (2011), Commissioning Support Programme, available at <http://www.education.gov.uk/childrenandyoungpeople/strategy/b0072465/commissioning>

equity, proportionality and sustainability. This is intended to accommodate the need for a social return on investment as well as considering cost efficiency. This holistic understanding of commissioning will be explored in more detail below. Secondly, 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. Also critical is the relationship between national and local structures in the areas of local government, education, justice, health and social protection. It is intended that this guidance will be driven nationally by the National Office of the Agency and implemented locally by the Agency Area Managers. The role of partnerships and of subsidiarity in commissioning will also be explored in more detail later. Integrated commissioning will be addressed, particularly in the context of Children's Services Committees and role of local government in contributing to the improved outcomes for children, young people and their families. Additionally, the relationship between commissioning and retaining an outcomes focus that is participatory for service users is also critical in the context of child and family services and this will likewise be further explored. Lastly, a commissioning guidance must also include guidance on how to manage change. The de-commissioning and re-configuration of services are specific challenges and so these issues are explored as part of the commissioning process.

1.1

AIM

The aim of this Commissioning Guidance is to ensure that the total resources available to children and families are applied to improving outcomes for children and families in the most efficient, effective, equitable, proportionate and sustainable way.

The Child and Family Agency Act 2013 provides for the bringing together of a range of existing services to children and families into one agency. The Agency's functions will include maintaining and developing support services, including support services in local communities in order to support and promote the development, welfare and protection of children and to support and encourage the effective functioning of families. In so doing the Agency will promote enhanced inter-agency cooperation to ensure that services for children are co-ordinated and provide an integrated response to the needs of children and their families. The Act also provides that the principles of the best interests of the child and of participation are applied to the Agency's work.

The Act also creates a new framework for accountability for the use of resources; for financial arrangements between the Agency and other organisations including not for profit service providers; and for non-financial service provision agreements with other statutory bodies.

This aim will be achieved by ensuring that all commissioning activities in the Agency are based on this one coherent guidance; support the implementation of the National Service Delivery Framework (NSDF) and are informed by a standardised approach to responding to assessed needs, based on evidence. Whilst it is envisaged that this Commissioning Guidance will lead to national coherence and a consistent approach, it is also important to remember that commissioning should facilitate local responses to locally assessed needs.

The overall outcomes referred to in the definition are the five national outcomes for children as outlined in the National Strategy for Research and Data on Children's Lives 2011-2016 (DCYA, 2011). These outcomes are that children will be:

- **Healthy, both physically and mentally;**
- **Supported in active learning;**
- **Safe from accidental and intentional harm / Secure in the immediate and wider physical environment;**
- **Economically secure; and**
- **Part of positive networks of family, friends, neighbours and the community / Included and participating in society**

1.2

RATIONALE

The overall strategic direction of the Agency and of other services to children and families is set by The Department of Children and Youth Affairs (DCYA). The DCYA Statement of Strategy 2011-2014 sets out this strategic direction. The DCYA Strategy outlines a number of policy imperatives that are particularly relevant to the Agency Commissioning Guidance. It outlines that the policy direction of the Department is necessarily framed by current economic conditions; that resources will be severely constrained, including financial and human resources; and that more will have to be done with less and, therefore, effective resource allocation and governance is required. A standardised approach to Commissioning by the Agency has the potential to contribute to this process. The DCYA Strategy specifically requires:

- **effective governance arrangements with all agencies and bodies in receipt of funds from the Department;**
- **effective risk management, budgetary controls and accountability within the Department;**
- **allocation of limited resources to be based on strategic priorities and compliance with accountability requirements (DCYA, 2012).**

The DCYA Strategy also outlines both the integrating and coordinating function of the Department as a wide range of stakeholders are required to deliver on its mission to improve outcomes for children and young people. This reflects both the integration of organisations, agencies and professionals that come under its remit and engagement across government and with external stakeholders. The Agency Commissioning Guidance is a key driver of this integration and coordination: in terms of the Agency commissioning some of these stakeholders as single agencies; in the formation of non-financial agreements

on service provision; and in its potential role as a joint commissioner of services through integrated commissioning.

The DCYA Statement of Strategy also states that the DCYA will adopt an increasing focus on prevention and early intervention approaches that help children, young people and their families realise their true potential and to review, redesign or curtail programmes and services in the light of both research evidence on effectiveness and available resources. The emphasis placed in this Commissioning Guidance on the effective use of available resources, evidence based and evidence informed commissioning and the outlining of a process for de-commissioning aligns well with DCYA policy. This approach is similarly consistent with the Irish Government's obligations under the UN Convention on the Rights of the Child. General Comment 13 of the Committee on the Rights of the Child, issued in 2011, in referring to the need for States to develop holistic child protection systems with an emphasis on primary prevention, outlines guidance that:

Human, financial and technical resources needed across different sectors have to be allocated to the maximum extent of available resources. Robust monitoring mechanisms must be developed and implemented to ensure accountability regarding allocation of budgets and their efficient utilization. (CRC/C/GC/13)

The DCYA *Working Together for Children Initiative* sets out the basis for enhanced cooperation amongst relevant agencies in order to secure better developmental outcomes for children. The central driving mechanism for this initiative locally is the Children's Services Committees (CSCs). Therefore, this guidance deliberately takes into account the potential role of CSCs in the commissioning process. Similarly CSCs may provide the focal point for aligning the work of the Agency with other agencies and bodies, particularly local government and the education sector. The Department of Environment, Community and Local Government document *Putting People First, Action Programme for Effective Local Government* (October 2012) proposes that:

- **The capacity of local authorities will be utilised as fully as possible to work with or on behalf of other bodies in undertaking relevant functions and services locally.**
- **Building on its role in developing sustainable communities, the potential for a wider local government leadership and co-ordination role locally will be explored, for example, in relation to sectors such as education, health and welfare.**
- **The potential for more far reaching expansion of the local government remit will be pursued as the reforms across the local government system take effect.**

Particular heed will need to be taken to the relationship with the planning function of the Socio-Economic Committees proposed in *Putting People First* and the role of local development companies. Area based approaches to child poverty, where in place, must also be taken into consideration when implementing this guidance.

The Health Information and Quality Authority, *National Standards for the Protection and Welfare of Children* (2012), include reference to the planned use of resources. Standard 4.1 requires that resources are effectively planned, deployed and managed to protect children and promote their welfare. The Agency will be independently inspected by HIQA and will be required to provide documentary evidence of its compliance with this standard. The following features are identified as required to meet the standard:

- **The service demonstrates an understanding of the levels of need and demand for services in order to inform the planning and allocation of resources and services.**
- **There are clear plans that take account of the funding and resources available to provide a quality service for children and families.**
- **Resources are effectively deployed to meet prioritised needs.**
- **The service convenes regular meetings with all the agencies that provide services to vulnerable children and families to support the delivery of safe and effective services, which protect children and promote their welfare.**
- **The service demonstrates transparent and effective decision making when planning, procuring and managing the use of resources in services that receive public funding.**
- **The financial performance and cost-effectiveness of the service is monitored and evaluated on an annual basis to improve service delivery.**

(HIQA, 2012)

The application of the commissioning process outlined in this guidance will be critical for the Agency in meeting the requirements of this standard in each of its operational areas. The production and review of an annual commissioning plan required by this guidance will provide the Agency Area Manager with documentary evidence of their compliance with standard 4.1 of the National Child Protection and Welfare Standards.

The Commissioning Guidance is a central part of the operational policy of the Agency. The Commissioning Guidance is part of a wider programme of projects being change managed through to implementation as part of the creation of the Agency.

1.3

CONTEXT

The understanding of commissioning in health and social care services has advanced in recent years and has garnered greater attention from academics, policy makers, practitioners and service users. The role of commissioning within child and family services has also garnered particular attention internationally. This Commissioning Guidance is being brought forward during a period of intense change, including the creation of the Department of Children and Youth Affairs and the Child and Family Agency. Initially the Agency is being formed from the amalgamation of HSE Children and Families Services; the Family Support Agency and the National Educational Welfare Board. The budget of the Agency is likely to be in the region of €550 million euro, with a staff of approximately 4000. The DCYA will continue to consider the amalgamation and rationalisation of other services into the Agency after its establishment. This Commissioning Guidance is part of a wider process of reform related to the establishment of the Agency.

At the service delivery level the context is set by the development of the NSDF, which is required to:

- **Have an integrated system of children's services that have formal linkages with external services and that will establish processes and procedures that have children's well being as their focus at all levels;**
- **Have clear and consistent referral pathways for children and families which are based on assessed needs and with responses appropriate to meeting these needs;**
- **Provide clarification around thresholds for assessment and intervention;**
- **Ensure each referral is dealt with in an efficient, effective and proportionate manner, and that families are directed to appropriate services in a timely and competent manner.**
- **Support and encourage referrers to exercise their judgement in an effective way and work collaboratively to use their resources in the best interest of children; and**
- **Provide a framework for information sharing between core Agency services and other services;**

2.0

COMMISSIONING – MOVING TO LOCAL IMPLEMENTATION BASED ON NATIONAL GUIDANCE

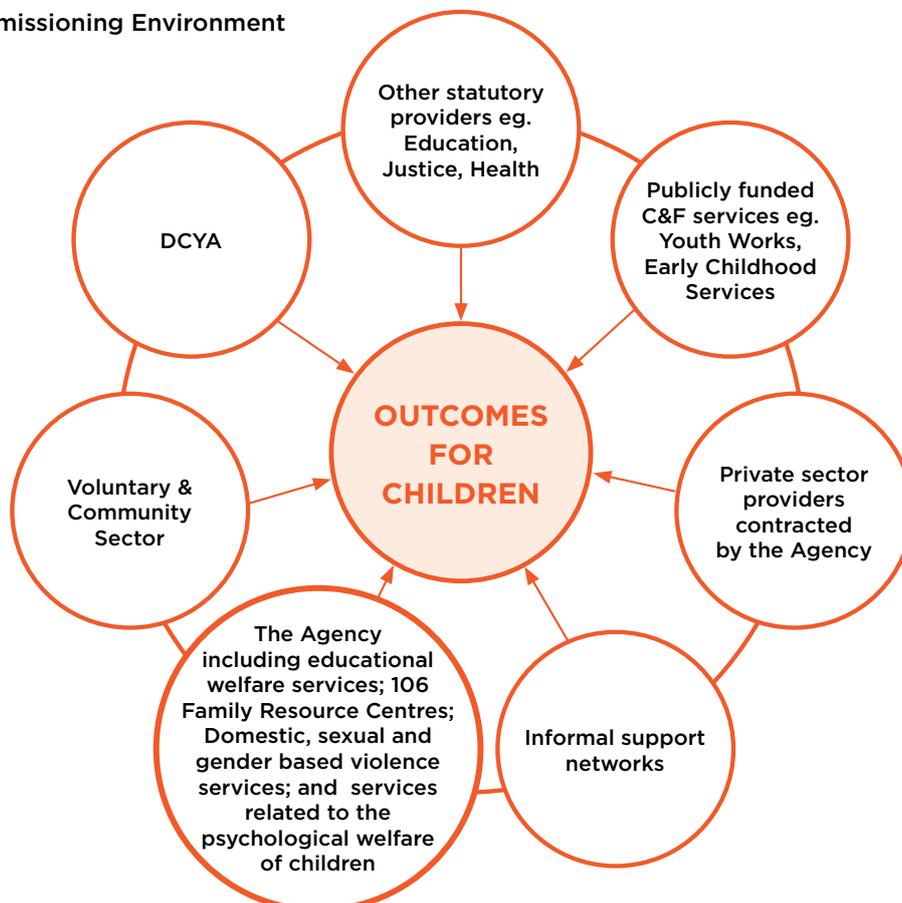
This Section outlines in detail the approach to commissioning proposed by this guidance. This will commence with situate the commissioning approach of the Agency within the wider context of children and family services. A set of specific principles will then be outlined to guide the implementation of this Guidance. These principles should be frequently returned to, especially when obstacles or difficult questions arise. The organisational levels of the Agency, at which commissioning applies, will then be outlined, followed by the cyclical stages of commissioning, including the detailed steps within each stage. Lastly the role of commissioning in change management will be explored.

2.1

THE COMMISSIONING ENVIRONMENT OF CHILDREN AND FAMILY SERVICES

The whole child, whole system approach outlined in the Agenda for Children's Services (2007) requires situating the Commissioning Guidance of the Agency within the wider children and families service environment. This whole system approach is necessary in order to speak to the five national outcomes for children. Figure 1, below illustrates the range of environmental factors which need to be considered in a commissioning framework. Whilst informal networks are not commissioned, they are included in the commissioning environment due to their relevance to children's outcomes and, subject to needs analysis, services that facilitate the development of informal support networks may need to be commissioned.

Figure 1:
The Commissioning Environment

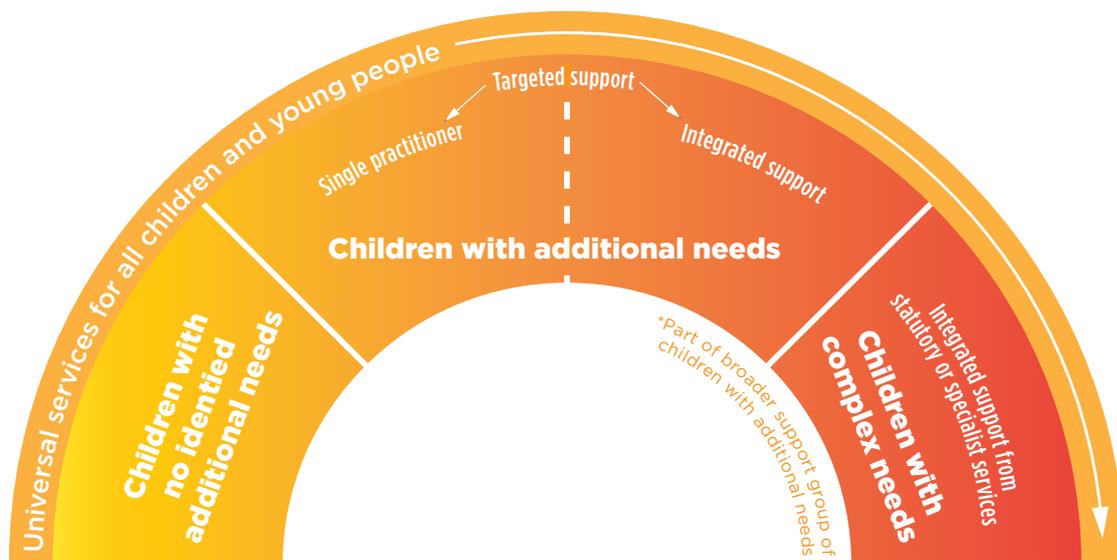


Reflecting the approach being applied in the NSDF, towards the development of an integrated pathway to support children and families, individual practitioners and service managers are required to view themselves as working in collaboration in this system towards improving outcomes for children. Commissioning is one tool that can be applied to achieve the whole child, whole system, integrated approach. In moving towards a culture of commissioning, 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 outcomes focussed and equally accountable for results. The UK Department of Education, Commissioning Support Programme found that commissioners who have a good understanding of the whole children's services system can identify opportunities for integration, support service improvement,

reduce gaps and overlaps, move resources, intervene early and increase efficiencies (Commissioning Support Programme, 2011, p.11).

The Report of the Taskforce on the Child and Family Support Agency (2012) recommended that the Agency should be as broadly based as possible. This should include those services that might in the first instance help prevent problems arising for the family, that would identify problems and provide supports at an early stage, and that assist children and families in managing serious problems that require specialised interventions beyond their own resources. Therefore, in addition to child welfare and protection services, the core services of the Agency must include a broad range of primary prevention, early intervention, family support and therapeutic and care interventions. Thus, this commissioning framework needs to consider the commissioning of services across the full continuum of the Hardiker Model (See Figure 2 below).

Figure 2:
'Windscreen Wiper' representation of the Hardiker Model (CWDC, 2009)



2.2

PRINCIPLES OF COMMISSIONING FOR THE NEW CHILD AND FAMILY AGENCY

The commissioning of health and social services and specifically children and family services requires a unique approach when compared to the commissioning of goods and services in other, less complex, sectors. This guidance also seeks to adapt international best practice for the Irish children and family services context. The following principles underpin this Commissioning Guidance and have been adapted from other sources to reflect the unique context faced by children and families in Ireland:³

- 1. All commissioning decisions must consider the social return on investment and be focused on improving outcomes for children and families, recognising the importance of stable, long-term relationships for vulnerable children with trusted adults.**
- 2. The commissioning process will recognise the rights of children and parents and facilitate their participation in needs analysis, service planning and monitoring and evaluation.**
- 3. Whilst the commissioning process provides a national standardised approach, the principle of subsidiarity will apply so that decisions are made at the lowest level and are responsive to locally assessed need.**
- 4. A partnership approach will be taken, engaging other statutory partners and respecting the unique role of community and voluntary organisations, including small scale providers.**
- 5. There will be a focus on a progressive universalist approach to providing a continuum of seamless support to all children and families. A balanced approach will be struck between developing primary prevention and early intervention services whilst maintaining secondary and tertiary services with a re-distribution of resources to areas of high need⁴.**
- 6. 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.**
- 7. Value for money and long term sustainability will be key considerations and commissioning activities will adhere to all public sector procurement guidelines.**

³ Informed by Commissioning Support Programme: Good Commissioning Principles and Practice (2011).

⁴ What Works in Family Support? highlights the experience of the last few years of the Department of Children and Youth Affairs Prevention and Early Intervention Programme and related major interventions funded by the Atlantic Philanthropies. The Prevention and Early Intervention Programme requires funded services to evaluate the effectiveness of their services in improving outcomes for children. This learning from this initiative is being disseminated by the Promoting the Learning Advisory Group. A parallel project; Capturing the Learning is also underway under the management of the Centre for Effective Services. This project aims to synthesise the collective overarching learning from the initiative as a whole (See www.effectiveservices.org, also see www.preventioninpractice.ie for further information on prevention and early intervention).

2.3

COMMISSIONING LEVELS

Commissioning of services in the Agency will need to take place at a number of service management levels (See Figure 4). The recently revised management structure of Children and Families Services provides for a direct line of accountability from 17 Area Managers to 4 Regional Service Directors up to the National level headed by the CEO. This management structure reflects the service management levels for the purposes of commissioning:

- **National or Regional strategic commissioning of services which may be required for full geographic saturation of required programmes/interventions or of highly specialist services.**
- **Area operational commissioning of services to provide a continuum or suite of Child and Family services at local level.**
- **Procurement of individualised packages of support for vulnerable children and families.**

National and Regional strategic commissioning can be used as a tool to push forward the agenda for change as per the new National Service Delivery Framework. For example there may be universal primary prevention programmes or public awareness campaigns, suitable for national whole population saturation. Equally, greater value for money may be achieved by nationally or regionally commissioning highly specialist services, such as High Support or Special Care arrangements.

Area operational commissioning of Child and Family services will be a key function of the 17 Area Managers. It is important to recognise that local commissioners and providers have a better understanding of local needs and local providers can bring this understanding as well as a direct link to the voice of users of services to the commissioning process. It is also important that good relationships are built between service providers, users and commissioning agents⁵. For example, depending on localised assessment of need, the Agency may need to commission and have available an agency to work closely with Social Work Departments to carry out Family Assessments in relation to children and families when a referral has been accepted but the level of risk is considered low to moderate (Differential Response Model). While this guidance envisages a strong emphasis on area based commissioning, it also envisages that a common approach and methodology will be applied by all local areas.

⁵ OPM Literature Review, Multi- level Commissioning (2008).

In relation to **procurement of individualised packages** of support for children and families, the development of local structures to match resources to needs on a case by case basis should be considered.

What Works in Family Support? will help to clarify what needs to be commissioned at these three different levels. There is a need to establish criteria for commissioning of services at national/regional versus local level. Suggested criteria are outlined below at Step 2 of Stage 2 of the Commissioning Process when the commissioning level needs to be considered.

Decisions about the level at which particular services are commissioned should be transparent and should be documented. If a service is currently being commissioned at a particular level solely due to an historic anomaly, this should be reviewed with a decision made as to the appropriate level for commissioning to be managed.

Figure 3: Commissioning Levels

<p>National</p>	<ul style="list-style-type: none"> • High support and special care residential services • Guardian ad Litem services • A nationwide public awareness campaign eg. Parents who Listen Protect • A nationwide universal service eg. Public Health Nursing
<p>Regional</p>	<ul style="list-style-type: none"> • Specialist services that may require economies of scale, eg. multi-dimensional treatment fostering • Services where efficiencies can be negotiated regionally
<p>Area</p>	<ul style="list-style-type: none"> • A whole continuum of community based services providing seamless support to children and families
<p>Individual</p>	<ul style="list-style-type: none"> • Individual packages of support offered to children and families in need eg. crèche place, respite care, home help

2.4

COMMISSIONING PROCESS

As stated in Section 1, Commissioning is defined as the process of deciding how to use the total resource available for children and families in order to improve outcomes in the most efficient, effective, equitable, proportionate and sustainable way.

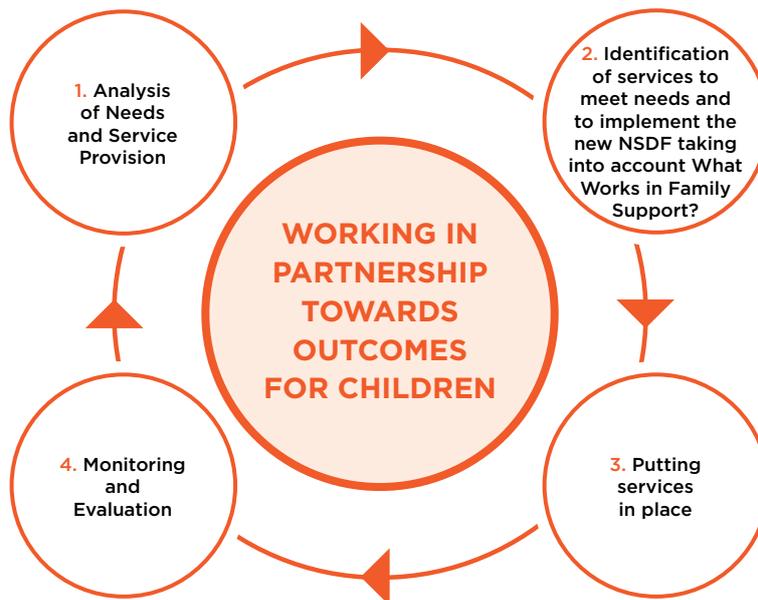
Commissioning is a cyclical process involving four clear, discrete stages (see Figure 4 below):

- 1 Analysis of needs and service provision.** This analysis must have a focus on the desired outcomes for children and families that relate to the identified needs. Children and families, and partner service providers, must be included in the analysis. Also included as part of this stage is a review of existing service provision relative to the identified need.
- 2 Identification of the services required to meet those needs and to implement the NSDF, with reference to evidence of What Works in Family Support?**
- 3 Consideration of how to put these services in place. This may involve re-commissioning existing services;**

- decommissioning services; re-configuring services; and commissioning new services.**
- 4 Monitoring and Evaluation (M&E).** The commitment to the use of evidence in commissioning does not end at the point of identifying services to meet needs. It is an ongoing process, part of the cycle of commissioning and involves repeat M&E rather than once off evaluation.

This process will require the management structure of the Agency to ensure a standardised approach to commissioning at national, regional and area level is realised. The Agency will be required to use the existing HSE contracting and Procurement Teams at National and Regional levels to ensure the commissioning process is open, fair and transparent.

Figure 4: The Commissioning Process:⁶



⁶ Adapted from the Joint Planning and Commissioning Framework for Children, Young People and Maternity Services, DFES (2006).

The commissioning stages are represented diagrammatically in Figure 4 and then broken down in greater detail into the steps within each stage. The first stage is critical to ensure the rest of the commissioning process is guided by a robust assessment of need. Both national and local analyses of needs and service provision are carried out for a variety of reasons by partner agencies. Therefore all efforts should be made to coordinate this exercise with partners nationally and locally to avoid duplication or repetition. As a result, at a national level, one, integrated, up to date picture of needs and provision to meet needs should be utilised. Similarly at a local area level this exercise should be performed in an integrated way with partners. This process will be supported by improvements already established and ongoing in relation to data collection. The National Strategy for Research and Data on Children's Lives, 2011-2016, identifies four cross cutting issues in relation to data and research in all areas of children's lives. These are:

- **The development of a national strategic approach to information around children's lives;**
- **The improvement of administrative data systems;**
- **Building capacity across all areas of research and data development, particularly Analytic capability;**
- **Supporting evidence-informed policy and practice.**

The integrated analysis proposed should also be used to implement the Parenting Support Strategy, Investing in Families: Supporting Parents to Improve Outcomes for Children and to plan and implement the area based approach to prevention, partnership and family support, including ensuring necessary allocation of resources to support the implementation of the Meitheal Practice Model. Where Children Services Committees are in place, the analysis of needs and provision should be done through one process locally and this analysis can inform service planning by other partners such as local authorities. In this regard the Toolkit for the Development of a Children's

Services Committee (2012) will support the commissioning process in areas where a CSC is in place. This collaboration should ultimately lead to integrated commissioning by relevant local partners.

This staged, cyclical, process is now set out including a detailed breakdown of steps within each stage. The human rights based transparency, accountability and participation brought about by the application of this process are critical in the development of relationships of trust with all stakeholders including other statutory providers, non-statutory providers and critically, children and families. Stakeholders should not only fully understand the process but also be fully included and participate in it.

STAGE 1 – ANALYSIS OF NEEDS AND PROVISION

The Analysis of Needs and Provision can be broken down into a series of steps reflecting specific data categories which must be considered. These steps are listed in table 1 and illustrated in Figure 6, as being connected by all stakeholders' concern for outcomes for children. The performance of this task marks the commencement of an approach to **stakeholder engagement** and **workforce development**. Workforce development here refers to the whole of the workforce involved in providing services to children and families and includes but extends beyond the staff of the Agency. Many of the likely providers and users of services will be included in the analysis of needs and provision. This means that partners, particularly community and voluntary organisations, are aware of the strategic needs of the community and have the opportunity to best position themselves to meet this need. The mutually reinforcing tasks of stakeholder engagement and workforce development continue throughout the stages of the commissioning process and are repeated as the cycle is repeated.

- **Quantitative data on children and families, including indicators around the 5 National Outcomes for children.**
- **Qualitative information on Children's lives.**
- **National and local service provision.**
- **National priorities.**
- **Stakeholders perspectives, for example community and voluntary sector partners, other statutory providers and views of children and families.**

Table 1 - Steps for the analysis of needs and provision

- **Other performance indicator data collected by the Agency and relevant partners should also be utilised including from the monitoring and evaluation stage of the commissioning process such as the family support performance indicators and data on the implementation of the Meitheal Practice Model.**
- **Central Statistics Office (CSO) Data and associated mapping, for example, POBAL Maps, providing deprivation indices and socio-demographic data should be used.**

It is important to examine what the indicator data tells us about worrying issues and trends, nationally, regionally and locally. Appendix 17, Quantitative Indicators Template can be used to collate this information.

QUANTITATIVE DATA ON THE LIVES OF CHILDREN, YOUNG PEOPLE AND FAMILIES

There are a variety of sources that provide quantitative data relevant to the lives of children, young people and families.

- **The website www.outcomesforchildren.org has initially focused on border counties. However it is currently being populated with all island data.**
- **The State of the Nation's Children's Report, conducted biennially by the DCYA provides relevant data.**
- **Other research on child well-being should also be used, for example quantitative data from the Growing up in Ireland Study.**
- **All data relating to the 5 national outcomes for children, and associated Indicators should inform the analysis. The DCYA CSC toolkit outlines the outcomes and lists of indicators suitable for indicating the progress towards outcomes.**
- **The Agency Measuring the Pressure data collection provides information on child protection and welfare referrals.**

QUALITATIVE DATA ON THE LIVES OF CHILDREN YOUNG PEOPLE AND FAMILIES

Similarly there are a variety of sources providing qualitative data on children, young people and families' lives. Some of these sources will overlap with the sources of quantitative data. For example the Growing up in Ireland Study is a key source for qualitative as well as quantitative data. Similarly, the data collected from the monitoring and evaluation stage of the commissioning process will involve both types of data. Ongoing academic research will provide relevant data as will research undertaken locally. Issues identified locally by staff of the Agency or partner agencies can also inform the assessment and may signpost the need for formal research.

As with quantitative data, it is important to explore qualitative data locally with partner agencies and other stakeholders to identify common issues and areas of concern. Use Appendix 2⁸, Qualitative Indicators Template to collate this information.

⁷ Adapted from CAWT Guidance for Outcomes Based Planning (2012).
⁸ Ibid

NATIONAL AND LOCAL SERVICE PROVISION

It is important that stakeholders are brought together to discuss the nature and scale of the challenge, and to identify current service provision in relation to the issue. The Report of the National Survey of HSE funded agencies providing services to all children and their families will inform this analysis. This information can then be mapped onto the Hardiker Model, taking account of the relevant age ranges and key transitions stages that children and young people encounter. This exercise will assist all partners to understand their role within the Child and Family Support system and will highlight gaps in provision. Use appendices 3-4, Services Template and Resources collation Template to collate this information⁹ and then map it onto the continuum of need as illustrated in Figure 6.

NATIONAL POLICY PRIORITIES

It is important to take on board national policy priorities in determining regional and local priorities. Ultimately national priorities are charted by DCYA policy such as the Statement of Strategy (2012) and the forthcoming Children and Young People's Policy Framework. The Agency operational policy such as the Guidance for the implementation of an Area Based Approach to Prevention, Partnership and Family Support, Children's First Implementation and the Agency Parenting Support Strategy also need to be considered at this point. There should be a coherent connection between national strategic policy set by the DCYA, The Agency operational policy and local implementation by the Agency Area Managers and relevant partners. The systematic and standardised approach of this Commissioning Guidance will help to achieve this.

STAKEHOLDERS PERSPECTIVE

The structure of NSDF will provide appropriate fora for discussion amongst all partners to occur and where CSCs are in place this structure will link with them. Use Appendix 3¹⁰. Services Template, to collate this information.

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. This right is reflected in the forthcoming DCYA National Participation Policy for Children and Young People. Formal structures and dedicated resources are required to ensure that service users are supported to participate. The Participation Strategy for the Agency requires engagement with children and young people in relation to service planning, design, development, delivery and evaluation. The Parenting Support Strategy requires a partnership approach that involves the full participation of parents.

Collating the views of children and families and service providers forms part of the stakeholder engagement that continues throughout the cycle of the commissioning process.

⁹ Ibid
¹⁰ Ibid

Figure 5 - Steps within the analysis of need and provision, connected by the mutual concern for outcomes for children of all stakeholders.



At the end of stage 1 of the commissioning process:

- There will be an agreed understanding of the needs of children, young people and families in the area; the extent of service provision to meet these needs; and of the gaps in service provision.
- Stakeholders will be engaged with the process.
- The analysis undertaken will be publically available in a document that can be shared with all relevant stakeholders. This document should be structured in line with the steps set out in Table 1.

STAGE 2 – IDENTIFICATION OF SERVICES TO MEET NEEDS

The task now is to design and/or plan for services to meet the identified needs. This involves outlining service development priorities to meet the identified needs and targets for their achievement. As stated earlier, this includes providing seamless support for the full continuum of need identified and striking a balance between the demands of acute need and providing prevention and early intervention services. At this stage, new service specifications may need to be drawn up, outlining the rationale for the proposed commissioning of services. This stage can also be broken down into a series of steps for consideration (Table 2). A Commissioning Plan will be drawn up and these steps will form the basis of the plan:

- Consider stakeholder perspectives
- Decide on commissioning level of service
- Locate the services on the continuum of seamless support
- Consider fit with NSDF and wider policy priorities
- Consider research evidence
- Consider the type of commissioning required
- Consider Stakeholder Engagement

Table 2 – Identification of Services to Meet Need

CONSIDER STAKEHOLDERS PERSPECTIVE

There is a need to establish a commissioning forum to address the gaps and needs analysis and to determine how best to proceed. The views of children, young people and families should be sought to input to the planning and design of services as highlighted at Stage 1 of the commissioning process. It is important to be specific in consultation with children, young people and families about the issues which you are attempting to address, the proposed solutions and how these solutions will deliver better outcomes.

DECIDE COMMISSIONING LEVEL OF SERVICE

Decisions need to be made at this point as to whether a service is best commissioned nationally, regionally or locally. Criteria for decision-making need to be followed in this regard, for example:

- **The nature of a specialist service required, for example a small cohort of children requiring service such as High Support and Special Care may be suited to national commissioning.**
- **National saturation, consistency and standardisation of service required for example, adoption services or a policy decision to commission an evidence based prevention programme nationally.**
- **Management of demand-led programmes/services. There is a need to apply national unit costing methodologies to these types of services so as to ensure consistency of pricing, full geographic availability and best value for money, for example, legal services, guardian ad litem services, private foster care and private residential care. Where national geographic and costing standardisation are required, national commissioning should be applied.**
- **Community based family support services providing a continuum of support to children and families will need to be commissioned at local level in order to ensure responsiveness to locally assessed needs.**

As stated earlier, decisions about the level at which particular services are commissioned should be transparent and should be documented in the Commissioning Plan. If a service is currently being commissioned at a particular level solely due to an historic anomaly, this should be reviewed with a decision made and guided by this Guidance, as to the appropriate level for commissioning to be managed.

LOCATE THE SERVICES ON THE CONTINUUM OF SEAMLESS SUPPORT

Given that the services are being identified to meet assessed needs and to fill identified gaps in provision, it should be clear where they belong in the continuum of seamless support offered to families. The same mapping process used in the analysis of service provision in Stage 1 should be used at this point. This should allow each Agency Area to gradually build up a service map, indicating the complete Child and Family Support System for their area. The service map can be contrasted before and after services are developed or reconfigured to indicate progress. In line with the commissioning principles, there will be a focus on a progressive universalist approach to providing a continuum of seamless support to all children and families. A balance will be struck between developing primary prevention and early intervention services whilst maintaining secondary and tertiary services with a re-distribution of resources to areas of high need. In addition to considering levels of need, consideration should be given to the life course with particular attention paid to key transition points in a child's life which may present opportunities to offer additional support. An example of an optimal child and family support system for children and families in is outlined in Figure 6 below. It is intended to illustrate a whole child whole system, integrated approach whereby all services work together to meet needs, improve outcomes and realise rights for children, young people and their families.

Figure 6 - Optimal Child and Family Support System

See Diagram on next page

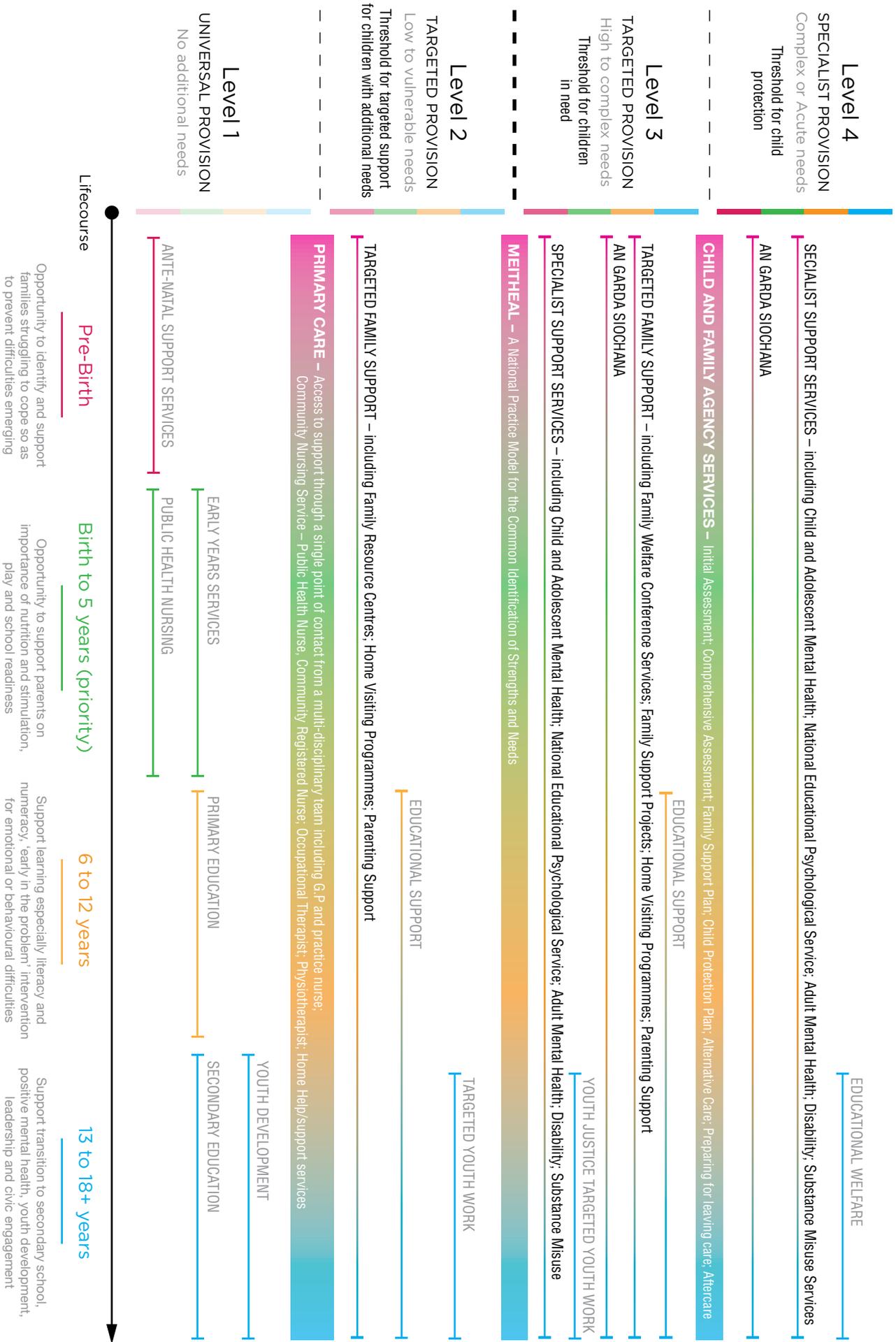
CONSIDER FIT WITH NSDF AND WIDER POLICY PRIORITIES

The development of services in response to locally assessed need is an integral aspect of the development of the NSDF. Consideration should be given to situating and relating the identified services to the development of the NSDF. This will involve reference to how the services both meet locally assessed need but also meet the national requirements of the NSDF. The identified services will have a role in the development of integrated local area pathways that form part of the NSDF. The identified services will be required to support the primacy of the Children First Guidance, 2011. Some commissioned services will have a specific remit in supporting the Agency in the response to families referred under Children First Guidance, 2011.

CONSIDER RESEARCH EVIDENCE

The development of services should be informed by a consideration of research evidence on effectiveness. The document *What Works in Family Support?* will assist Area Managers to consider evidence at this point as well as later during the Monitoring and Evaluation stage. Other documents will also be of assistance in the consideration of research evidence. For example the work of the Centre for Effectiveness Services provides a range of supports for the use of evidence in child and family services (see www.effectiveservices.org) including a Development of What Works Process and Tools for Working with Clients. Likewise the messages from the Promoting the Learning Advisory Group and the Capturing the Learning process will inform the commissioning process at this stage.

In order to have credibility, the consideration of research evidence on the effectiveness of interventions must apply equally to the application of internal and external resources and equally to the work of the statutory sector as well as to the not for profit sector. Therefore, this Commissioning Guidance requires a shift in the approach of the Agency to considering evidence for the effectiveness of core work of



responding to concerns referred under Children First, 2011. Interventions arising from responses to such referrals must be subject to a consideration of research evidence. It is also important that research evidence is considered both in relation to programmatic (evidence based) interventions and (evidence informed) interventions by individual practitioners in the course of their day to day work. Neither should evidence based programmes be seen as wholly separate from mainstream services and the commissioning process must create the space for core existing staff to participate in the roll out of evidence based programmes. A fuller discussion of evidence based, and evidence informed approaches, is contained in What Works in Family Support?

The consideration of evidence is a requirement of HIQA standard 2.4, which states that Children and families have timely access to child protection and welfare services that support the family and protect the child. The standard identifies the following as a feature required to meet this standard. The Commissioning Guidance will assist to develop this feature in the Agency commissioned services.

The service is planned and delivered using the models of service provision and takes into account the best available evidence, national policy, Children First, the needs of children and families and available resources (HIQA, 2012).

CONSIDER THE TYPE OF COMMISSIONING REQUIRED

The Commissioner needs to consider at this point the optimum commissioning solution to meet the need/gap identified. Potential options include:

- **Re-writing existing Service Level Agreements/Grant-aid agreements or internally mandating the required change or re-focus. This is most useful when it is identified through stakeholder consultation and analysis that the organisation (s) has the capacity and skill-base to effect the change. This is referred to as reconfiguration.**

- **Drafting of new service specifications, where the service needs to be externally provided, requiring full commissioning and contracting processes to be implemented. This could also involve re-drafting of roles and responsibilities where new service delivery frameworks and models are required to be implemented by internal service providers. This is referred to as commissioning and contracting of new services.**
- **De-commissioning of services refers to the termination of a contract, or a service within a contract because the service has been identified as not required in the continuum of support to meet identified needs or failing to demonstrate achievement of intended outcomes.**
- **Integrated commissioning. The Framework for Integrated Planning for Outcomes for Children and Families (2009) defines integrated commissioning as being about moving the [integrated] plan towards identifying services and service providers to achieve outcomes. It involves two or more agencies taking joint responsibility for translating strategy into action (CFRC/CAWT, 2009, p.18).**

Integrated commissioning of services requires a number of agencies/Departments to sign up to common objectives in relation to outcomes for children and to agree a process of jointly commissioning specified services to meet those objectives. This can be done through an agreed Children's Plan for an area, under the auspices of a Children's Services Committee or may be done on a cross-agency, multi-disciplinary basis to implement the required approaches to deliver on the new National Service Delivery Framework for Children and Families. It is important that where integrated commissioning, possibly requiring pooling of budgets, is implemented, that one agency is assigned the lead commissioning function and that the procurement guidelines set by that agency apply.

Arising from this stage of the commissioning process, there is a need for a national uniform approach to the drafting of service level agreements and contracts. Guidance will need to be produced to inform this process.

CONSIDER STAKEHOLDER ENGAGEMENT

The Community & Voluntary services play an important role in the co-production of services and very often in the development of more innovative business solutions. Once a service specification is drawn up for key target developments, service rationalisation and re-configurations 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. The National Consultative Forum created by the Chief Executive of the Agency or sub-groups of same can be used in this regard for national commissioning and the Multi-agency Steering Committees, as part of the local area pathways component of the National Service Delivery Framework or CSCs where in place, can also be utilised at Area Management level for this purpose.

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 buying the service from elsewhere. Either solution may involve reconfiguration of existing service arrangements to meet the service need. Certain services will 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 provided for through a commissioning process. 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.

It is important to fill in the Template at Appendix 6, Identification of services to meet need to address and document the detailed steps undertaken under Stage 2.

At the end of Stage 2 of the commissioning process:

- **Service development priorities to meet the identified needs and targets for their achievement will be clarified.**
- **New service specifications will be drawn up outlining the rationale for the proposed commissioning of service.**
- **A Commissioning Plan will be drawn up addressing key actions against the points raised above.**

STAGE 3 – PUT SERVICES IN PLACE

The aim here is to put services in place to deliver the priorities and targets identified from the first two stages. This may involve re-commissioning existing services; decommissioning services; re-configuring services; and commissioning new services. It is the practical implementation of the decisions made in Stage 2 of the process.

The Care Services Improvement Partnership¹¹ outlines 4 key considerations involved in putting the relevant services in place:

- **Managing the balance of services to reduce risk, including which services should be undertaken in-house and which should be contracted from other providers (considered in Stage 2 and implemented in Stage 3).**
- **Ensuring a good mix of service providers, offering consumers an element of choice in how their needs are met.**
- **Developing good communications and effective relationships with existing and potential providers.**

¹¹ Care Services Improvement Partnership, Commissioning ebook (2009), for more information on commissioning see <http://www.thinklocalactpersonal.org.uk/>

- **Making arrangements to ensure service quality, including identifying the quality assurance criteria that should be included in contracts in order to ensure services meet the standards required.**¹²
- **Purchasing new services and de-commissioning services that do not meet the needs of the client group (considered in Stage 2 and implemented in Stage 3).**

For new service acquisition, formal procurement processes will need to be followed. Re-configuration of existing service provision may be managed through re-negotiation of existing Service Level Agreements or Grant Aid Agreements. The commissioning process should drive the specifying, contracting and purchasing of services activities.

A current practice exists whereby the majority of resources both internal and external are commissioned in an indefinite 'roll over' fashion. The application of the commissioning process outlined in this guidance calls for a different approach. When services are put in place, the contract should specify an agreed timeframe for the arrangement with a clear and documented rationale for the timeframe. Some services may be contracted for a period of one year or less. Other services may need to be contracted on a multi-annual basis. For example commissioning long term alternative care placements must be on the basis of multi-annual funding.

The Family Support Agency (2010) outline that multi-annual funding allows organisations to:

- **Plan within a given timeframe.**
- **Deliver a quality service.**
- **Add stability to the sector.**
- **Give stability to their staff.**

Criteria for the assessment of performance will need to be identified at this stage and included in the written agreement with the service provider. This agreement will need to reflect an outcomes-focussed approach and apply the comprehensive approach to monitoring and evaluation, dealt with next, in the final stage of the commissioning process.

At the end of Stage 3 of the commissioning process:

- **The services identified to meet the needs assessed at Stage 2 will be procured, contracted or funded to provide such services.**
- **The initial timeframe for the service to be provided will be identified and agreed in writing.**
- **The criteria against which the performance of duties will be assessed will be agreed in writing.**

STAGE 4 - MONITOR AND EVALUATE

A central component to a commitment to an evidence informed approach is the collection of data on the implementation of programmes and interventions. The Agency's commitment to an evidence informed approach and the implementation of this Commissioning Guidance necessitate a comprehensive approach to Monitoring and Evaluation (M&E).

The document *What Works in Family Support?* provides the template for thinking about evidence in supporting children and families. Evidence of effectiveness should not be viewed as static. If a programme or intervention is evidence based or evidence informed this provides a good starting point. However, as addressed in *What Works in Family Support?*, it is well established that evidence-based programmes and practices that are adopted will often fail to produce intended outcomes because of the challenge of successful implementation. Therefore each implementation of the programme or intervention requires ongoing monitoring and evaluation. Similarly a commitment to evidence should not stifle innovation and experimentation. If a service is commissioned without a high level of evidence of effectiveness, the M&E stage of the commissioning process should be used to gather such evidence. In this way the Agency will be both contributing to, as well as drawing from, the body of evidence on the effectiveness of child and

12. For example in addition to important standards required through existing service level agreements such as financial probity, the implementation of Children First Legislation will require robust standards. The Agency Participation Strategy will also require high standards for the participation of children and young people from Agency partners, including commissioned service providers.

family services. As with the earlier stages of the commissioning cycle, M&E should be undertaken in a spirit of partnership with the full participation of stakeholders, including other providers and service users. Therefore arising from this stage of the commissioning process, one national, standardised, monitoring and evaluation framework will need to be developed. This framework should be developed in tandem with and aligned to the National Child Care Information System.

An Annual Report on commissioning of services should be produced by each Area Manager and this should contribute to Regional and then a National Commissioning Report on an annual basis. These Reports should provide information on:

- **The number of Service Level Agreements and Grant-aid agreements in place with the non-statutory services and costings, as well as the number of private arrangements contracted and associated costings.**
- **A summary of the analysis of needs and provision performed at Stage 1 of the commissioning process.**
- **The service map developed at Stage 2 of the commissioning process.**
- **Number of beneficiaries of such programmes/services.**
- **Outcomes focused data on the impact of programmes/services for children and families.**
- **Analysis of adherence to relevant quality standards including those which support the implementation of Children First Legislation, HIQA standards and the Agency Participation Strategy.**
- **Level of evaluation applying to funded programmes.**
- **Value for money analysis of services funded against the agreed targets with unit costing analysis.**
- **Analysis of compliance with the SLA/GA/ Private Arrangements HSE Governance framework.**
- **Clearly identified additional or changed service provision arising from the commissioning process.**
- **Commissioning targets for the next financial year.**

At the end of Stage 4 of the commissioning process:

- **Data on commissioned services will be collected as part of an ongoing standardised approach to monitoring and evaluation.**
- **This data will have enhanced the body of evidence on the effectiveness of commissioned services.**
- **A Commissioning Report will be completed.**
- **The Commissioning Report will inform the ongoing commissioning process.**

2.5

CONCLUSION

This Guidance has outlined the approach of the Agency to commissioning. This approach represents a radical change in approach as compared to that applied previously by the HSE Children and Family Services. This Guidance briefly states the rationale, aim and context for The Agency commissioning. The Guidance then focuses primarily on the detailed commissioning process that the Agency is required to implement. It is envisaged that the application of this process will be a critical element in the adherence of the Agency to the standard 4.1 of the National Child Protection and Welfare Standards.

The Commissioning process involves identifying the aggregate level of assessed needs and current service provision to meet that need. This first stage is broken down into a set of detailed steps. These steps form the outline for the documentation of Stage 1. This is followed by the second stage, the identification of services to achieve outcomes based on the needs identified in the first Stage. Stage 2 is also broken down into a set of detailed steps. These steps provide the structure for a clear and comprehensive commissioning plan. The third stage involves the putting the identified services in place and focuses on the contractual and financial aspects of the process. The fourth stage involves the monitoring and evaluation of the services commissioned at stage 3. The data arising from this stage will back feed into the first stage as the process is repeated.

As alluded to in the introduction, this Commissioning Guidance is part of a wider set of reforms intended to improve outcomes for children, young people and families and to enhance their participation in the design, delivery and evaluation of services, with a view to improving accountability and transparency.

These documents collectively are characterised by a concern for partnership, evidence of effectiveness, prevention and early intervention and a balanced continuum of support for all children, young people and their families.

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1

Appendix: Quantitative template

This template has been designed to assist commissioners to analyse the quantitative indicators provided and to identify those areas and issues of concern.

OUTCOME - which outcome/s does this relate to?	
INDICATOR - is this of concern and likely to be a priority for action by the group?	
CONTEXT NOTES - what is the story/history behind this trend?	
<ul style="list-style-type: none">• How can the trend be redressed?• Is there work going on already?• Is there a need for service re-configuration?• Is there a need for service de-commissioning.• Is there a need to commission a service response? Specify?	

2

Appendix: Qualitative template

This template is designed to collate local knowledge and qualitative information from locality planning groups and communities to inform the development of an action plan.

OUTCOME - which of the high level outcomes does this issue relate to?	
QUALITATIVE INFORMATION - describe the issue being raised including any historical or contextual information.	
SOURCE - Who has raised the issue? Has any research/survey or evidence been gathered to refine the problem?	
SOLUTIONS <ul style="list-style-type: none">• What needs to be done?• Is there work going on already?• Is there a need for service re-configuration?• Is there a need for service de-commissioning.• Is there a need to commission a service response? Specify?	

3

Appendix: Services template

This template is designed to collate the knowledge and information about service provision to inform the development of an action plan.

OUTCOME - which of the high level outcomes does this issue relate to?	
SERVICES - identify gaps in services that you are aware of across the group's area.	
DETAIL - Reasons for gap in service.	
EVIDENCE <ul style="list-style-type: none">• How does this relate to the outcomes/ indicators/qualitative information?• Is there any evidence to show that filling this gap in services should be a priority for the group e.g. statistical indicators, etc• Is there a need for service re-configuration?• Is there a need for service de-commissioning.• Is there a need to commission a service response? Specify.	
Views of Children & families	
Views of stakeholders	

4

Appendix: Resource Collation Template

This template is designed to collate information on the available service provision resources to inform the development of an action plan.

Resource	Source and Lead Agency	Period for which available	Total available	Geographical areas in which deployed

5

APPENDIX: Identification of services to meet needs template

This template is designed to collate information on the available service provision resources to inform the development of an action plan.

Commissioning Plan	Actions Taken and Details	Targets set
Key gap/issue identified:		
Service development need to meet the gap identified?		
Consider stakeholder perspectives		
Decide on commissioning level of services		
Decide whether services are best commissioned internally or externally to the Agency		
Locate the services on the continuum of seamless support		
Consider fit with NSDF and wider policy priorities		
Consider research evidence		
Consider types of commissioning required?		
Undertake Stakeholder Engagement and testing		



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

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