

Short breaks for disabled children

Briefing Paper No. 1 – Commissioning



Acknowledgments

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The purpose of this Briefing Paper

This is one of a series of briefing papers produced to help local authorities, providers and families work together to improve the range and quality of short breaks for disabled children.

The Centre for Disability Research at Lancaster University (CeDR) and National Development Team for Inclusion (NDTi) were commissioned by the Department for Education (DfE) in 2009 to evaluate the impact of the short breaks Pathfinder initiative. The full reports were published in 2010 and 2011 (Hatton et al., 2011, Greig et al., 2010, Welch et al., 2010, Langer et al., 2010). The evaluation identified some key issues that needed particular attention. DfE asked NDTi and CeDR to produce four Briefing Papers as short summaries of the key actions that the research evidence indicates should be taken by local authorities, providers and families in order to improve short break provision and the experiences of children, young people and families.

This Briefing (No 1 of 4) considers specific commissioning actions that can result in improved outcomes.

Definition of the issue

The purpose of commissioning is to ensure that resources are used effectively to achieve policy aims and thus the best possible outcomes for people who use services. Although in practice much commissioning has focused simply on procurement, it needs to be a wider process that also strategically influences the way in which services are provided and the range of options available.

What does Government policy say about commissioning?

- The NHS reforms will provide new mechanisms for PCT clusters and those involved in commissioning children's health services to review commissioning arrangements. New Health and Wellbeing Boards will provide a forum for discussion of local need.
- As in other areas, short breaks policy has strongly promoted the involvement of people who use or who may use services in the commissioning process, with the aim of providing services which are more responsive, innovative and tailored to family requirements (DfE, 2011b, DfE, 2011c). Family members can, for example, be involved in identifying local needs, planning, identifying and selecting providers, formulating contracts and evaluating the services provided.
- Current policy also promotes partnership working between commissioning bodies; for example between local authorities and health services through joint needs assessments, shared strategies and joint commissioning (DfE, 2011b, DfE, 2011c).
- Short breaks policy encourages commissioning bodies to build strong and supportive relationships with local service providers, to formulate clear and proportionate contracts and to specify precise

requirements for service delivery, the outcomes to be achieved and how the service will be reviewed and evaluated (DfE, 2011b, DfE, 2011c).

- Each local authority is required to prepare and publish by 1st October 2011 a 'Short Break Services Statement' (DfE, 2011b, DfE, 2011a) which outlines what services are available, how eligibility is decided and how decisions about the range of services was decided. Local authorities' approaches to commissioning will be a key part of this statement.
- The development of personal budgets or direct payments is one way in which the commissioning of short breaks may be performed by families themselves, reflecting their personal choices and specific requirements (DfE, 2011b, DfE, 2011c).

What the Short Breaks Evaluation found out about commissioning

Almost all local authorities and partners were pursuing the same policy objective - to shift their short breaks provision from residential, high-cost, low-volume services to smaller scale provision and flexible packages of care. However their progress in doing so varied considerably and their pace of change was often a reflection of their approach to commissioning these services. Summarised below are the core components of those 'successful' Pathfinder sites where a considered approach to commissioning was helping develop the provision of short break services which were more flexible, creative, individually orientated and cost effective.

- **A clear vision from the outset of the overall aims for the short break service and the strategic steps required to achieve those aims.** For example one Pathfinder identified the following: simplifying access to support; maximising the control young people and their families had over their lives and the resources allocated to them for support; reducing dependence on specialist services; and improving 'life' outcomes by promoting and enabling inclusion in community activities. The most successful sites were those where there was strong leadership (often one key individual) in the creation and subsequent communication of this vision.
- **The creation of a robust analysis and understanding of current and projected population needs,** informed by local registers (e.g. one Pathfinder had a well developed register of children and young people with disabilities cross referenced with the SEN register plus national data and numbers under 18 claiming DLA). In addition, conducting an analysis of existing services in terms of usage and costs enabled authorities to assess the effectiveness and value of their services in seeking to meet those needs and enabled the subsequent identification of gaps in provision.
- **Regarding parents as core partners in all stages of the commissioning process.** For several Pathfinder sites this approach was at the core of their vision for service change. One site transformed their historical approach from minimal engagement to full involvement of parents by ensuring families made up 50% of the Commissioning group, represented the Short Breaks team at meetings (including with Government), chaired conferences and so on. One parent commented '*parents are no longer told there is no service, we are now being asked about needs and changes, looking at outcomes instead of outputs.*' Without fail all Pathfinder sites which involved parents as equal contributors could identify clear benefits to their decision making processes in terms of relevance, understanding, and identifying barriers to achieving successful outcomes. Those Pathfinders who struggled to do so successfully were generally

willing but often failed to recognise the importance of proactive support to set up the appropriate structures, the need to develop and nurture these groups, the associated costs in doing so (both in terms of direct resources and officer time) and the importance of ongoing commitment to that process.

- **Ensuring a joined up collective approach to the vision with the active engagement of local partners,** such as the NHS, voluntary and independent sector providers, mainstream services and parents. One Pathfinder site held ‘launch days’ to present and discuss their overall plans with different interest groups, resulting in mixed working groups to develop the detail, culminating in the final strategic plan. Representatives of these groups subsequently formed the main group overseeing the ongoing implementation of the plan and the delivery of the desired outcomes, as identified and refined by the initial working groups.
- **Embracing the expertise and knowledge of service providers from both the voluntary and private sector in the commissioning process.** Whilst some authorities preferred to keep the commissioning and provider sides quite distinct, the evaluation identified that the most impressive progress was being made where there was close working and a true sense of partnership between commissioners and providers. This enabled the commissioners to utilise the breadth of experience of providers to help ensure (for example) decisions were rooted in realistic expectations in terms of services, timescales, costs and outcomes. One Pathfinder site held ‘market testing days’ where providers and parents collectively discussed and debated the proposed service specifications to test viability and relevance. This often resulted in partnership arrangements (rather than competition) between voluntary providers who felt they could meet the specification more effectively by working together. Once contracts had been awarded this same site continued to meet monthly with providers to monitor progress, identify barriers and work together to improve and smooth the processes. Several providers commented on the immense value of this constructive relationship *‘other Authorities just want to provide services, they are getting their teeth around outcomes...this is new for them too so it is great to work in partnership working out how we can help each other move forward.’*
- **Cascading the message consistently and clearly through organisations** was equally important, in particular securing the ‘buy in’ of existing staff to alternative approaches and the reasons for doing so. Overcoming cultural or traditional ways of working was often a challenge and in several instances ‘new’ teams or posts were created to work alongside existing services to deliver short breaks in alternative ways. This often proved to be a difficult transitional process but over time it was hoped/anticipated that these two ways of working would gradually become much more integrated.
- **Identifying the desired outcomes for short break services and setting up systems at the beginning of the planned changes to measure the impact of these services and evaluate their effectiveness.** Demonstrating the value and cost effectiveness of the new services is absolutely essential to the future development of short break services, yet almost all Pathfinder sites had struggled to put any systems in place to enable them to do so. Only one site had established a performance framework for their newly established community team which linked the specific outcomes identified for the family to the use of resources i.e. the costs of the support package required to deliver those outcomes. This was applied on an individual basis (e.g. measurable and meaningful outcomes such as two unbroken nights sleep a week for parents or a child to have made two friends by November). Such information could then be collated and analysed across a range of fields such as age, geography, and costs of services. Another site had

begun to identify individual outcomes for the children as they accessed different services, resulting in children being 'progressed on to' different services as their outcomes were achieved. However this was not without opposition from some parents who preferred their children to remain within specific services with which they were most comfortable.

- **Utilising evaluation and feedback to influence and change the commissioning process.** Most Pathfinder sites had some forms of feedback from parents and young people in place however minimal, but it was often hard to see how this information fed back into the planning structures and the extent to which their views had significantly influenced existing and future services. This relationship was much more evident where parents were actively engaged in the commissioning structures as they would often play a part in the gathering of this information and would ensure it was used constructively.
- **Engaging new, alternative providers.** This was a challenge for many sites where provision tended to be concentrated on established specialist providers, but without exception authorities wished to develop a broader range of provision. To attract new providers a range of approaches had been adopted:
 - Proactive contact with potential providers, often of mainstream services, offering support and training both initially and on an ongoing basis;
 - A review of procurement procedures in an attempt to: reduce the quantity of paperwork required to ensure it was more proportionate with the size of the contract; implement manageable timescales to allow for CRB checks etc; and recognise the financial pressures on small organisations and the need to pay for contracts in a reasonable timescale.

Developing this approach was particularly important when commissioning individualised support for families. Many sites had created posts such as short break co-ordinators who worked with individual families and sought to purchase the most relevant and enjoyable short breaks for the family and child from a diverse range of mainstream and specialist providers. However enabling this process to take place smoothly and effectively was a challenge in many areas as co-ordinators came across bureaucratic barriers to procuring one-off activities in mainstream services. One manager commented '*the more creative we are the heavier the bureaucratic process behind it all.*' A number of sites had addressed this by setting up an 'inclusion grant', funds which could be accessed quickly and easily to get extra support for a child to access a diverse range of activities.

Checklist for Effective Practice

From this evidence, a series of inter-connected commissioning actions can be identified that – if implemented in a coherent and integrated way – are likely to result in significantly improved services and outcomes.

Effective practice to improve short breaks will involve the commissioning function:

1. Leading the development of a clear strategic vision and the steps required to achieve that, whilst paying attention to this being developed by (and having the support of) all key partner agencies, in particular families.
2. Creating a system that offers a robust analysis and understanding of current and projected population needs through using and/or developing local registers.
3. Conducting an analysis of the usage, costs and impact of short breaks (particularly as judged by families) to help understand the effectiveness and value of these services and identify gaps in provision.
4. Adopting a culture of seeing parents as full partners in the commissioning and delivery process and investing the time and resources to enable this to happen.
5. Taking action to ensure a joined up collective approach with the active engagement of local partners, such as the NHS, voluntary and independent sector providers, mainstream services and parents.
6. Recognising providers as key partners and involving them in service planning and design – creating systems and structures that enable this to happen in an open and non-competitive way.
7. Ensuring a communication strategy that promotes a wide understanding and buy-in of the new ways of working that are expected – including by investing in appropriate leadership and skilled staff to lead this work.
8. Developing outcome measurement systems that are genuinely about the experiences of children, young people and families rather than service processes, and linking those to resource allocation decisions in order to increase the impact of available resources and to be able to evidence value for money.
9. Utilising outcome-focused evaluation evidence and consumer feedback to influence and change commissioning decisions and openly demonstrating this to parents and other stakeholders.
10. Engaging new, alternative providers including a focus on mainstream, community organisations and adapting commissioning processes to facilitate entry to the market by smaller providers.

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