

9th DRAFT

# **Worcestershire PCT and Worcestershire County Council Partnership Arrangements**

## **A CONCORDAT TO DEVELOP JOINT COMMISSIONING IN WORCESTERSHIRE**

**March 2008**

## INTRODUCTION

Partnership work between our organisations - the County Council and the PCT in Worcestershire - is fundamental to improving the health and wellbeing of the local population. Whilst we have made steady progress in recent years, we now agree that the time is right to progress our partnership work more rapidly and comprehensively.

Therefore this Concordat describes our commitment to implement an action plan this year to establish a joint commissioning function. We consider it to be the most important step to take to strengthen our partnership.

Our Joint Commissioning Group, chaired by the Chief Executive of the PCT, and attended by the Directors of Adult and Community Services and Children's Services, is leading this work.

We are overseeing this process for adults services via the Health and Social Care Partnership Board and for children's services via the Children and Young People's Partnership. We have established these bodies to set strategic direction for the partnership, and ensure its work is reflected in the Local Area Agreement, and Local Development Plans.

## WHY IS PARTNERSHIP WORK AND JOINT COMMISSIONING SO IMPORTANT?

If we work in partnership and commission services jointly we can achieve things that cannot be achieved by working within our individual organisations. This includes many benefits for service users and their families, and for the organisations involved.

The government sees it as central to its policy for improving the health of the nation and has established monitoring arrangements to ensure that all Local Authorities and PCTs give it the highest priority. A series of policy statements have been produced which set out detailed expectations, following the publication of the White Paper 'Our Health, Our Care, Our Say'<sup>1</sup>, which set a new direction for social care and community health services with four main goals: -

- *Better prevention and early intervention for improved health, independence and well-being*
- *More choice and a stronger voice for individuals and communities*
- *Tackling inequalities and improving access to services*
- *More support for people with long-term needs.*

The government has set out its intention to ensure that local partnership arrangements are strengthened in order to implement these goals. The White Paper 'Strong and Prosperous Communities'<sup>2</sup> states that: -

*"This White paper will create a sustainable framework for local action on health and wellbeing, so that partnership working is strengthened and there is greater*

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<sup>1</sup> Our Health, Our care, Our Say – Making it happen – P.6 - Published 2007.

<sup>2</sup>

*clarity over who is responsible for agreeing and delivering local health and wellbeing targets. Our aim is to make it easier for local authorities and NHS bodies to work together”; and*

*“We will build on the reforms set out in the Health Act (1999) and Our health, our care, our say (2006), by engendering systematic partnership working between NHS bodies, local authorities and other partners, for example through greater use of joint appointments, pooled budgets and joint commissioning;” “We will ensure the priorities, reporting systems and performance management arrangements for health and social care are joined up”*

For services for children and young people, the Government issued guidance in 2006. This states that: “Joint planning and commissioning is a tool for children’s trusts – to build services around the needs of children and young people – and to deliver their outcomes most efficiently and effectively” [Joint planning and commissioning framework for children, young people and maternity services, DfES, 2006]

These documents reinforce existing legislation that enables the NHS and Councils to work effectively in Partnership across the country, pool their budgets, commission services jointly and integrate their provider services.

The Guidance document ‘Commissioning a Patient-led NHS’ laid out the ground for Practice based Commissioning. More recently in 2007 further Guidance was issued concerning the formation of Professional Executive Committees (PECs). Practice based Commissioners and PECs will both need to be involved in the development of joint commissioning, which will be of significant assistance to the development of their plans.

## TAKING PARTNERSHIP WORK FORWARD IN WORCESTERSHIRE

We are already carrying out a lot of well co-ordinated partnership work in Worcestershire, but there is a need to build on what has already been done. This requires careful thought and planning.

As the development of a Joint Commissioning function is the most important step in our process of building on current developments, an active programme of preparatory work is being carried out. Work will continue through this year to ensure that all the necessary preparations are made to produce a sustainable and high quality joint commissioning process.

Our PCT, County Council Children’s and Adult and Community Services Directorate Management Teams have met to ensure that we understand each other’s intentions and priorities for wanting to work in partnership, and are fully committed to a common vision and values for the services they commission. We have identified the shared vision and values that drive our joint work. We have also reached full and clear agreements about why joint commissioning is important, what we aim to achieve, and how we will build on the trust that has been developed over the previous four years between the Council and the PCT to cement their support for these arrangements.

To demonstrate the commitment of our organisations we have agreed this Concordat, which sets out: -

1. Our jointly agreed vision for services, and the shared values upon which it is based.
2. A description of the arrangements being put in place, featuring two closely linked Joint Commissioning Units, one for Adult and Community Services and one for Children's Services.
3. The key points of our action plan that is being implemented to establish the arrangements.

## BACKGROUND

We formed the Health and Social Care Partnership Board in 2002 to promote the partnership for adult services. It currently comprises the County Council, PCT, Hospital and Mental Health Trusts, Voluntary Sector, and District Council representation.

In 2003 we signed the first of a series of legal S31 (now S75) Agreements between the commissioning authorities, and between the County Council and Mental Health Trust. These have subsequently been maintained and broadened. They expire in March 2008, and we have agreed that they will be replaced by two Framework agreements – one each for commissioning and for providing, that will include annual agreements for each service. We are preparing these agreements during 2007/8. They will provide a formal confirmation of our commitment to strengthen further our partnership, in particular by creating a joint commissioning unit.

The Children and Young People's Partnership was created in 2003, to promote the partnership in services for children and young people. The partners intend to capture their mutually desired outcomes, strategic objectives and management and governance arrangements in a formal legal agreement during 2008/9.

## VISION AND VALUES

We agree that: -

Our **Partnership and joint commissioning work** should be: -

- **Done for the right reasons**
  - Always keeping the interests of patients and service users at the heart of what we do.
- **Transparent**
  - Promoting trust and openness, so that we can: -
    - Work together with confidence and flexibility
    - Have a shared sense of success.

This should **impact on services** by: -

- **Improving outcomes** – that we cannot achieve in our individual organisations

- **Creating personalised services** - that raise people's aspirations and combat inequalities.

#### WHAT ARRANGEMENTS ARE WE PUTTING IN PLACE?

We are establishing two joint commissioning units: -

1. For Adult health and social care services, with responsibility for services for Older People; People with Learning Disabilities; People with Physical Disabilities and/or Sensory Impairment, and Mental Health Problems.
2. For Children aged under 18.

Lead arrangements will be agreed for each Joint Commissioning Unit, and their teams of commissioners and support staff. Some services, e.g. substance misuse services, will be closely associated with but out posted from the main units.

#### HOW SUCCESS WILL BE MEASURED

We will sign and monitor annual agreements for each jointly-commissioned service. These will set out: -

1. The governance structure for the service, and how users, carers and the voluntary and community sectors will be involved.
2. The outcomes that we wish to achieve through commissioning services jointly.
3. The priorities for the following year (to implement the next stages of 3+year strategies and plans)
4. Their investment intentions.
5. National and local outcome measures by which our progress will be monitored and reviewed.
6. A work plan to make sure the necessary developments happen to standard and timetable.

#### THE AGREED WAY FORWARD

We are in the process of taking four major steps in order to establish joint commissioning: -

1. Decide exactly what the units will do, appoint lead officers for Joint Commissioning, decide on the staffing structure and any staff transfer arrangements that will apply. Establish the units fully during 2008/2009.
2. Complete a Joint Strategic Needs Analysis (JSNA) for adults and children's services by April 2008. This is the first year of implementation of a 3-year programme to produce and utilise a really comprehensive JSNA. The jointly appointed Director of Public Health is leading this work.
3. Review and refresh all commissioning plans produced by the partners to ensure that they: -
  - Fully reflect joint strategies and priorities,
  - Are fit for purpose as joint commissioning plans.

- Inform the Adult Health and Social Care S75 Framework agreement that will be in place as from April 2008.
4. Prepare the Framework Agreement, ensuring that the quality of its content reflects the commitment and investment made by the partners.

#### MONITORING ON CROSS-CUTTING ISSUES

Additionally, in order to co-ordinate high level strategic planning across Childrens' Services and Adult Social Care Services with the PCT, there will be a twice yearly meeting to discuss key issues and cross cutting matters. These meetings will involve the Chief Executives of the County Council and the PCT, the relevant Cabinet Members, the Chairman of the PCT, one or two PCT Non Executive Directors, and the three Directors from the Council.

#### SIGNATURES

The Concordat is signed

For **Worcestershire Primary Care Trust** by

Name.....

Designation.....

Dated the     of                     2008

For **Worcestershire County Council** by

Name.....

Designation.....

Dated the     of                     2008