



Preparing for Adulthood: Joint Commissioning in action

Budgets Review
 Housing Learning
 Partnership
 Strategy
 Relationships
 Plan
 Do
 Adulthood
 Collaboration
 Joint
 Community
 Commissioning
 Understand
 Care
 Employment
 Transition
 Personal
 Support
 Education
 Outcomes
 Progress
 Services
 Development
 Individual
 Personalisation
 Vision
 Inclusion
 Health

Contents

Purpose and audience	2
Introduction	3
The joint commissioning cycle of activities	3
Progress in developing joint commissioning	6
Using the joint commissioning cycle to promote independence	7
Using the joint commissioning cycle to personalise planning and support	12
Using the joint commissioning cycle to develop commissioning processes and practice	17
Linking the individual and strategic/operational joint commissioning cycles	19
Conclusion	24
Acknowledgements	24

Purpose and audience

This is the second publication by the Preparing for Adulthood programme to help local authorities, clinical commissioning groups (CCGs) and their partners to deliver on the joint commissioning duties contained in the Children and Families Act 2014 and, with particular reference to the interface between children's and adult services, the Care Act 2014. This document gives practical examples of how different authorities have made some progress in jointly commissioning services and suggests ideas and ways in which authorities and their partners can make progress with joint commissioning in practical, realistic and often small-step ways. The intended audience is those responsible for strategic planning and commissioning in adults and children's services in health, education, social care, public health and beyond.

The [guide to joint commissioning resources](#) (Jan 2015) offered explanations of commissioning, joint commissioning and personalisation, supported by evidence from literature and experience. The summaries of learning and practical tools included in the guide are not repeated here, so it will be useful to look at the two documents together.

Introduction

In order to achieve the Preparing for Adulthood outcomes of employment, independent living, community life and good health, approaches to joint commissioning need to engage not only the education, social care, health and public health sectors but also wider 'whole system' partners such as those concerned with employment and housing. Approaches to joint commissioning also need to take place across children's and adult sectors.

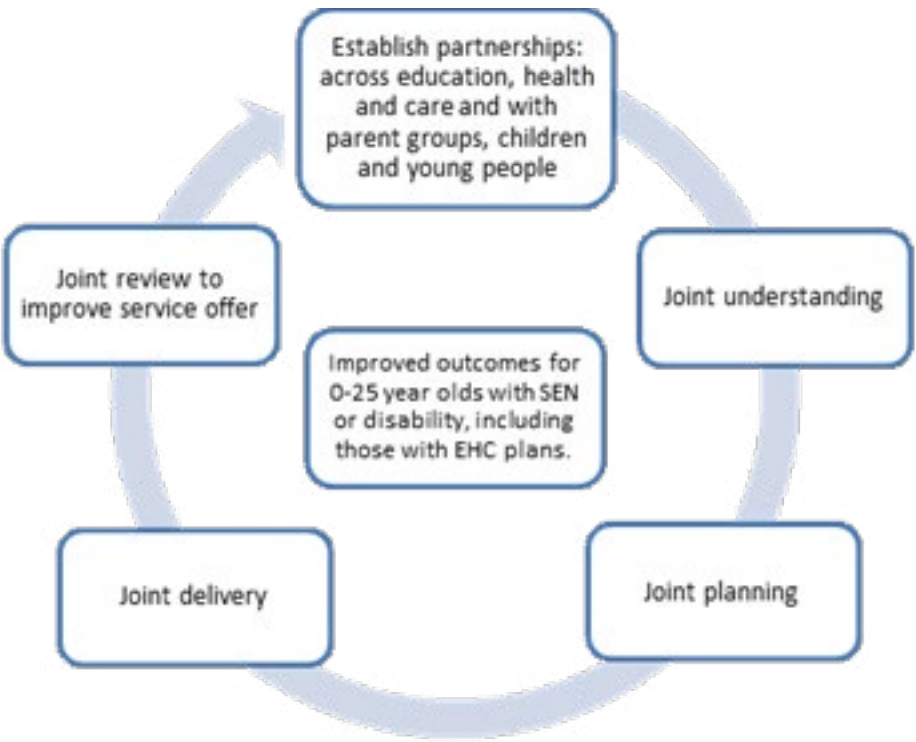
Our summary definition of joint commissioning, drawing on research and accounts of practice, is:

"A method for two or more partner agencies to commission collaboratively to secure better outcomes for a defined population than either can achieve on their own".

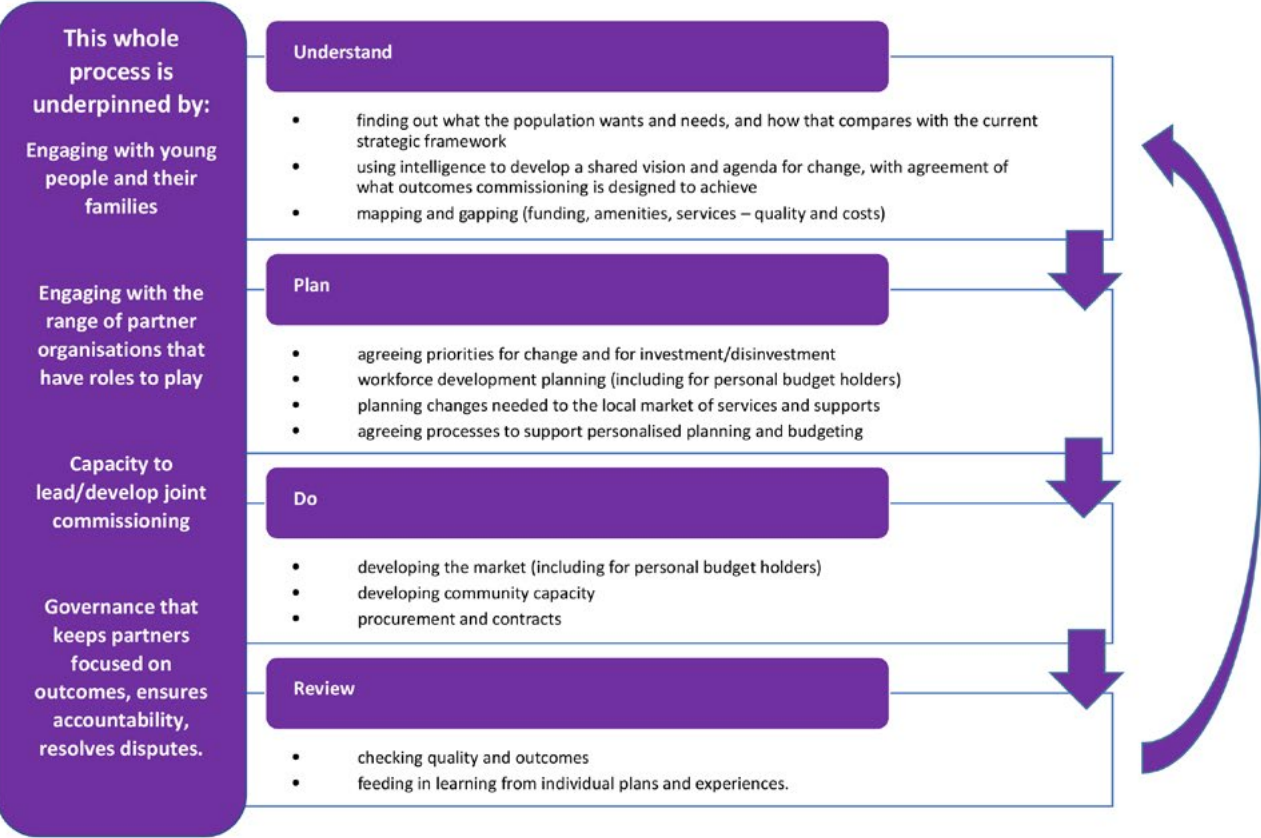
Given the lack of evidence on a 'right' approach, we suggest that it is more useful to focus on local agreement about clear boundaries around joint commissioning – what is in, what is out and (if appropriate) start by working together on a small scale rather than whole system change.

The joint commissioning cycle of activities

The Code of Practice for the Children and Families Act 2014 includes a diagram (p.30) to illustrate the joint commissioning and joint working cycle:



Another way of illustrating the cycle is shown below to emphasise the commissioning activities and demonstrate how some activities run through and support the whole cycle: engagement with young people, their families and other partners; capacity to lead and develop joint commissioning, and governance.



The joint commissioning cycle can be replicated at different levels:



Progress in developing joint commissioning

Development of joint commissioning has been supported by the special educational needs and disability (SEND) pathfinders programme¹ and the 'Making it Personal: 2' project². Resources from these programmes demonstrate a range of good practice; however, most reported joint commissioning activity still³ relates:

- either to children and young people (with some examples of extension to age 25)
- or to adults.

The Preparing for Adulthood programme supports two action learning networks focused on joint commissioning across the transition from children's to adult services. These networks each bring together commissioners for young people and for adults to support each other in developing joint commissioning in their areas. Some common themes have emerged:

- promoting independence⁴ and aspirations for adulthood from an early age, so that young people and their families do not encounter a sudden change in approach in their interactions with statutory services
- personalising planning and support to achieve Preparing for Adulthood outcomes
- developing commissioning processes and practice to support new aspirations and new ways of working, such as more flexible supports, recognition of 'natural' supports, increased choice and control
- linking individual and strategic commissioning, so that individual plans and outcomes inform strategy and the strategic framework enables personalised responses.

On the following pages are examples of how the key elements of the joint commissioning cycle: Understand; Plan; Do; Review; can be used to promote local developments in each of these areas.

1 <http://www.sendpathfinder.co.uk/infopacks/jc/>

2 <http://www.kids.org.uk/mip2>

3 as at February 2015

4 Some young people and families are uncomfortable with the word 'independence', noting that all of us depend on others to a greater or lesser extent for different things in our lives. Some would substitute 'autonomy' or 'citizenship', or perhaps 'choice and control', to describe the way that a young person begins to make more decisions for themselves and to take up social, leisure and occupational roles and activities of their own – while still usually strongly embedded within or connected to their family and wider social circle, and with the support they need. We use 'promoting independence' here as shorthand for this process.

Using the joint commissioning cycle to promote independence

Promoting independence requires the different agencies, across children's and adult sectors, to work together to help ensure consistency of high aspirations and the achievement of good outcomes for people. The Health and Wellbeing Board can play a valuable leadership role in this.

Understand

- Use the Joint Strategic Needs Assessment as an opportunity for stakeholders and partners across social care, health, education, public health, housing and employment (and across age groups) to share their understanding of the evidence about the needs and views of young people and their families. Some of this will come from the Local Offer; the experiences of adults who have already passed through the transition years will also be valuable. Use the intelligence to co-produce a shared vision and agenda for change to raise aspirations in childhood and support young people to become adults with equal life chances, such as paid employment, housing, independent living, choice and control, community inclusion, friends and relationships.

Brighton and Hove City Council and NHS Brighton and Hove⁵ jointly commissioned a review of advice and support services for young people. The review involved commissioners with responsibility for young people's mental health, sexual health, children's social care, adult social care and housing support services, together with the youth service, community advice services and voluntary sector providers. The review also involved young people and confirmed the importance of access to early intervention and prevention responses to a wide range of inter-related needs, covering health, social welfare, personal and practical issues. An outcomes-based specification was developed and commissioning budgets pooled.

5 Summarised from 'Making integration a reality. Part 1: Joining up the commissioning of young people's services across health, social care, housing and youth services' produced by Youth Access (2014). See: <http://www.youthaccess.org.uk/publications/other-publications/>

- Collate and analyse information that sheds light on differing expectations and perspectives about 'independence'. Sometimes ways of working with children are established that cannot be sustained as young people grow up and this can lead to 'wicked issues' that cause persistent problems, complaints or disputes. See boxed example below.

Travel – to school, college, work or other activities – is often a source of conflict between families and authorities. Families get used to the arrangements (including funding) for children's travel to school and assume this will continue into adult life. Conversations about promoting greater independence in travel need to start in good time during school years to avoid this assumption becoming embedded. There may be opportunities to join up with public health initiatives on promoting exercise and community safety initiatives (safety on public transport).

Dorset: the council's services for children and young people are working with the environment department on travel for children and young people with special education needs or disabilities. One strand of this is the offer of personal budgets for travel to educational facilities.

West Sussex: work with families on travel options includes the testing and review of hand-held technologies (smartphones or tablets) and apps to assess how effective they are at supporting independence and promoting safety, confidence and wellbeing in the community. Work with partners such as the police, providers of transport and victim support services is also under way to develop improved approaches to the prevention and recording of hate crime and responses to it. This is collaborative work between children's and adult social care with the other partners listed.

Concern grew in some authorities that families saw services for children and young people as taking full responsibility for their sons and daughters. So much was organised that young people were spending very little time just with their families. Greater independence from families was being achieved only through greater dependence on paid services. Diaries and mapping of services used can display this in a way that enables a strategic discussion about desired outcomes and mutual expectations as young people grow up.

- Gather research evidence about 'what works' and examples of good joint commissioning practice from elsewhere. For example, in 2014 NDTi published the findings from a two year study into the cost effectiveness of different models of employment support for disabled people⁶.

Plan

- Map those who are in positions to inform and influence young people and families, across services and agency responsibilities, and consider the **training and** development they may need in order to promote independence and personalisation.

Class teachers, teaching assistants, SENCOs, independent reviewing officers and further education college staff are examples of important influencers. So are families themselves (see below). Well trained transition workers are in a strong position to support person centred reviews with young people and their families, with the confidence to discuss growing independence and options for the future.

Do

- Dialogue between commissioners, service providers and universal services is essential to achieve changes in response to evidence on needs and wishes.

Dorset: numbers of 16 year olds attending further education were increasing in response to the Government's policy on raising the participation age. This stimulated discussion between social care, schools and colleges about promoting independence with young people before they leave education.

In another initiative children's and adult services across education, health and social care collaborated on a scheme for young people with learning disabilities to improve information about local services and supports, improve independent living skills, and improve vocational opportunities (including paid work).

Hertfordshire: the further education curriculum group brought together partners with different sources of funding to develop a post-16 offer combining contributions from schools, colleges and social care (children and adults).

⁶ <http://www.ndti.org.uk/major-projects/current/employment-support-for-disabled-people1/>

Review

- Learning from individual plans and experiences can inform strategy and plans for change, as noted above. Learning from the experiences of others is a powerful influence on young people and families, as well as operational staff and commissioners.

Bath and North East Somerset: Project Search provides training and education for young disabled people in the workplace, leading to employment. The partnership includes the NHS, a college and the council. Local graduates of Project Search – young people who have been successful in obtaining paid work – are visiting local schools to inspire other young people and their families. Some of their stories will be included in the Local Offer.

Engage with young people and their families

- Underpinning the whole cycle is a range of ways of engaging with young people and their families. These include tools to prompt young people and families (and those who support them) to think about some important issues at the different stages of preparing for adult life. For example, Sheffield's Parent Carer Forum produced a 'Transition Timeline'⁷. The 'Better Lives' project for families (National Development Team for Inclusion and Dimensions, 2012⁸) combined information sharing, planning and engaging with statutory services to deliver real outcomes for the participants and valuable learning about the support families need to think differently about the future.

Barnsley: the council was successful in obtaining a grant to develop advocacy for teenagers/young people to help their voices be heard in the Education Health and Care Plan process, particularly when their wishes differ from those of their parents or other carers. The aim is to support them in becoming more independent and to embed their aspirational thinking in planning. Information about such aspirations will be vital to shape the responses of all the statutory partners.

⁷ <http://sheffieldparentcarerforum.org.uk/page/transition-post-16-provision>

⁸ <http://www.ndti.org.uk/who-were-concerned-with/children-and-young-people/families-young-people-and-getting-the-best-from-the-personalisation-process/>

Dorset: a strong focus on co-production⁹ included support for a group of young researchers and appreciative inquiry workshops to establish what is most important to young people with additional needs, to inform commissioning. The young researchers' work on options for young people in special schools, from Year 9, was presented to the Pan Dorset SEND strategy group, comprising representatives from health, education and social care across three local authorities (Dorset, Bournemouth and Poole).

Bath and North East Somerset: young people and families have taken part in events on housing and on employment, organised by the council (children's and adult social care). These events have given them the chance to meet and talk with housing organisations, employers and employment support organisations.

Suggestions for action

- Review the information collected in the Joint Strategic Needs Assessment about the needs and views of young people as they are becoming adults. Identify gaps in this information and agree across agencies how to fill these.
- Jointly identify the ways in which current services may be perpetuating service dependency into adulthood and instigate joint action to change these. In some cases change may be needed from early in childhood to shape expectations or alter techniques.
- Identify key staff and other influencers across different agencies; bring them together to explore how a consistent message about promoting independence can be delivered through their work.
- Gather stories from young adults who have achieved a measure of independence (e.g. in employment, housing, social life); support them to tell their stories to younger people and their families, and to contribute to staff training across agencies.

⁹ See Appendix 9 of the joint commissioning information pack at: <http://www.send-pathfinder.co.uk/infopacks/jc/>

Using the joint commissioning cycle to personalise planning and support

If planning and support are to be personalised this will, by definition, involve joint commissioning, as different elements of what young people want out of life will come from different commissioning and service partners. Exploring the full multi-agency potential of personalising Education, Health and Care Plans thus provides an opportunity to implement joint commissioning.

Understand

- analyse information collated from individual plans, experiences and outcomes; compare this with the opportunities and support available locally. 'Working Together for Change' is one tool that has been used in some authorities where social work teams have been trained in person-centred reviews, and information from reviews is used to inform wider service planning and market development¹⁰.

Bath and North East Somerset had some previous experience of collating intelligence from individuals at one college. Work is now starting across children's and adult services to see how information from Education Health and Care Plans could be collected and analysed to inform commissioning, using tools such as 'Working Together for Change'.

Plan

- Plan the workforce development required to make a reality of personalised support (including the workforce needed by personal budget holders). Interpretation of 'personalisation' and approaches to risk management can vary across sectors and between children's and adult services, so it is important to improve shared understanding and consistent practice. This will help to ensure that young people and their families get consistent information and encouragement to think about personalised support and the options for making this happen.

Bath and North East Somerset: training on person centred planning and personalising support is offered across the children's and adult services workforce so that there is shared understanding and consistent practice in giving voice to young people's aspirations through Education Health and Care Plans that focus on the Preparing for Adulthood pathways. This has involved all teams involved with planning with young people: for example, looked after children's team, youth offending and college staff.

¹⁰ 'Working Together for Change' available at: www.thinklocalactpersonal.org.uk/_library/WTFC_Final.pdf

- Agree processes to support personalised planning and budgeting, to work towards the Preparing for Adulthood outcomes. There is a range of tools showing how person-centred thinking can inform Education Health and Care Plans¹¹, such as 'one page profiles' and support plans that show the informal and universal supports available in addition to the contributions from statutory services. Such tools can be carried forward to link into adult assessment and care planning (health and social care)¹².
- Support to take up and use the range of personal budget options is an important element, so consistent approaches are also required across agencies and age groups to the development and funding of such support (e.g. brokerage). Young people with continuing care funding or personal health budgets (including those who may become eligible for NHS Continuing Healthcare funding) are likely to need support planners who have specific skills around health care, delegation of clinical tasks and clinical governance¹³.

Nottingham City: jointly commissioned support for personal budget/personal health budget holders and an integrated budget across health, social care and education enabled Pete and his family to employ people who knew Pete, shared his interests and would be able to continue supporting him as he moved into adult life. They were trained to monitor Pete's diabetes and support his dietary needs so that they could accompany and support him in a range of settings such as college and the gym. Pete became eligible as an adult for NHS Continuing Healthcare funding; the budget and the support arrangements continued smoothly: <http://www.personalhealthbudgets.england.nhs.uk/Topics/latest/Resource/?cid=8574>

Organisations involved (across young people's and adult services): clinical commissioning group, NHS trust, local authority, personal budget support organisation.

¹¹ <http://www.preparingforadulthood.org.uk/resources/pfa-resources/ehc-plans-and-assessment-process>

¹² Guide on person-centred care and support planning, linked to the Care Act, available from Think Local Act Personal: http://www.thinklocalactpersonal.org.uk/_library/Resources/SDS/TLAPCareSupportPlanning.pdf

¹³ Advice on these issues is available for children from the Royal College of Nursing (see http://www.rcn.org.uk/development/nursing_communities/rcn_forums/children_and_young_people_field_of_practice/cyp_continuing_care/resources and follow the link to download 'Managing children with health care needs: delegation of clinical procedures, training, accountability and governance issues') and for adults from Mencap (see <https://www.mencap.org.uk/RoS-guide-clinical-procedures>) and the Personal Health Budgets website (see <http://www.personalhealthbudgets.england.nhs.uk/Topics/Toolkit/MakingPHBshappen/PersonalAssistants/>)

Do

- Developing the market (including for supports for personal budget holders) poses some particular challenges:
 - First, in many areas there has been a shorter history of active market development in services for children and young people than in services for adults, so this approach needs to be built up and to link up with market development for adults. Providers and potential providers need to have a clear idea of the types of services that will be wanted in future, both from individuals (through the range of personal budget options) and from statutory service commissioners. Risk-sharing agreements may be needed to encourage some developments. This joined-up market development needs to be based on consistent messages about the aspirations of and for young people and their families as young people become adults.
 - Second, there is a wide range of markets to consider: housing, employment support, education and training, health, social care, advocacy, and supports for personalisation (such as support planning and brokerage).
 - Third, different registration arrangements can raise a barrier to continuity of support for young people. It is confusing and distressing for young people and their families to be told that they can no longer get support from a particular individual or personalised service just because they have passed a significant birthday.

A range of market development examples feature in the 'Making it Personal: 2' commissioning guide¹⁴.

Bath and North East Somerset: the Preparing for Adulthood pathways are used to focus the Local Offer and work is being done across children's and adult services on market development. This involves health, social care, employment, housing and community organisations. Besides ensuring that the language used is consistent across agencies, there are challenges to resolve in differing eligibility criteria and approaches to regulation.

¹⁴ <http://www.kids.org.uk/mip2>

Barnsley: have been working to develop the market for individual support both for children and young people and for adults through a programme called 'Support in Confidence'. A personal assistant (PA) network was established to consult on the local market for PA support for adults; this is now an online forum that includes a facility for people who are looking for support to find and book a session with a PA. The range of short breaks provision has been increased by arranging specialist training. For example, one approach has been to match families with registered childminders by offering them training, including specialist health training, so that the young person can have highly personalised, competent support at a local level. This has involved co-operation across health and social care.

- Developing community capacity to welcome and include disabled people is a vital component of personalisation and underpins approaches that promote independence. Joint commissioning can play important roles by influencing universal services (for example, through the Health and Wellbeing Board) and investing in a range of community-centred approaches that mobilise, connect and sustain local assets¹⁵ (e.g. community hubs, which can grow from a variety of settings including places of education). Another way of developing community capacity is by building these ways of working into the roles of practitioners and directly commissioned services.

Grapevine (Coventry and Warwickshire) is a voluntary organisation with a significant track record of supporting local disabled people to build connections and valued roles in their communities. In Coventry Grapevine is providing part of the 'independent supporter' service to young people and their families. This includes providing information about personal budgets. Grapevine heard some young people and families saying they wanted something different from what they saw as conventional personal assistants, so Grapevine has worked with them to explore the 'future guide' role – someone who could "*help us make a plan for the future and get there*". (Young people created the 'future guide' term.) This could include, for example, making a recipe book together as part of a plan for leaving home, and thinking about how to make the most of community connections. Health and social care agreed to pool some funding to enable young people to maintain social activities without having to rely on staff from their supported living service providers. This work is being done across children's and adult services, involving young people, parents' forums, education, health and social care.

¹⁵ <https://www.gov.uk/government/publications/health-and-wellbeing-a-guide-to-community-centred-approaches>

Review

- Check quality and outcomes using tools such as POET (Personal Outcomes and Evaluation Tool) and the Council for Disabled Children's outcomes pyramid (see p.20 and p.19 respectively). 'Quality checkers' have been established in many areas¹⁶ to involve people with learning disabilities in checking services; some quality checkers involve families too. Feedback from individuals and from service reviews will inform the next iteration of the joint commissioning cycle.

Barnsley: aware that looked after young people could miss out on the active challenge that families can bring to checking quality and outcomes, attention has been paid to the roles of the independent reviewing officers and the corporate parenting board (cross-agency representation) to ensure they can promote and support aspirations. Staff are encouraged to take on the role of a 'pushy parent'.

Suggestions for action

- Explore ways of collating information from person centred plans to inform future joint commissioning, including market and workforce development.
- Set up joint training across agencies and age groups to ensure consistent understanding and application of key principles. Include finance and procurement staff so that they understand what is needed from them.
- Join up market development across services for children and young people and services for adults. One option is to start by focusing on a distinct group, such as young people with complex health needs, or looked after young people.

¹⁶ See Dorset People First's example: <http://peoplefirstdorset.org.uk/our-services/quality-checkers/>

Using the joint commissioning cycle to develop commissioning processes and practice

Each commissioning agency involved in supporting young people into adult life has its own established processes and practices and within agencies there are often different approaches for children's and for adult services. While respecting the different law, policy frameworks and perspectives, it is important to bring these differing processes together in order to improve services and outcomes for young people and their families.

Understand

- Mapping current processes and comparing these with strategic aims can highlight improvements required to ensure that systems support young people and their families smoothly in the transition to adult life.

One **shire county** mapped the processes for young people and their families and used the information to develop a transition 'customer journey' (social care, health and education). This was supported by workforce development (for example, ensuring that staff working with young people understand the Mental Capacity Act 2005 and are able to inform young people and their families about it) and system development (for example, setting up a database 'tracker' for young people likely to need support from adult social care). The system has been designed to allow young people to transfer to support from adult services at the right time for them, rather than at a specific age.

Essex: the transfer protocol in place between the Children and Young People with Disabilities Service and the Adult Operations' Community Teams supports young people (including looked after young people) to move to adult services at the right time for them, without having to be re-assessed. The Children and Young People with Disabilities Service sits within Family Operations and is established to respond appropriately to the policies and strategies of both Family and Adult Operations (i.e. across services for young people and adults). The focus of the service has evolved from 'pulling' young people through to 'leading them through' to adult life. Health, social care and education are working together on policy and guidance for personal budgets.

Plan

- Agree processes to support personalised planning and budgeting focused on Preparing for Adulthood outcomes. As noted earlier, there is a range of tools showing how person-centred thinking can inform Education Health and Care Plans and be carried forward to link into adult assessment and care planning (health and social care). Consistent approaches are required, across agencies and age groups, to the development and funding of support to take up and use the range of personal budget options. Consistency is also needed in dealing with issues such as proportional systems for monitoring personal budgets. These processes and practices need to reach across with young people as they become adults so that there is continuity in planning and supports, at whatever age they transfer to support from adult services. This includes agreements about how personal budgets for young people will migrate to adult personal budgets/personal health budgets and how continuing care for young people links with NHS Continuing Healthcare for eligible adults.

Advice and tools for 'lean' systems are available on the Think Local Act Personal website: <http://www.thinklocalactpersonal.org.uk/Browse/SDSAndpersonalbudgets/>. An up-to-date factsheet on issues to consider for people who wish to pool personal budgets is available from Disability Rights UK: <http://www.disabilityrightsuk.org/pooling-personal-budgets>

Hackney: young people and families have been introduced to the idea of having personal budgets by using them for short breaks. This has built confidence (both in the recipients and in the authority) in how personal budgets can be used and monitored. The learning from this is helping to shape a much wider roll-out of personal budgets across health and education, as well as embedding them more firmly in children's social care. In conjunction with adult social care the plan is to start the preparation for adulthood pathway early so that families can be involved in developing the services they want for the future.

Bath and North East Somerset: the Preparing for Adulthood pathways are embedded in the approach to Education Health and Care Plans; health support plans are being developed to link in as a detailed component. The initial focus for the health support plans is on a group of young people with complex needs, to get the approach started in collaboration between the NHS and the council.

- Workforce development planning needs to support the introduction of new processes and new ways of working. For example, in Essex there has been a lot of focus on building relationships between practitioners, through multi-disciplinary training and development, and supporting them to re-frame "what is my job?". A new Preparing for Adulthood guide on workforce development is available at: www.preparingforadulthood.org.uk/resources.
- The Council for Disabled Children developed an 'outcomes pyramid' that encourages young people, their families and staff working with them (across agencies) to think about outcomes in the long term as well as shorter term steps towards them (intermediate outcomes). This can help everyone to keep their sights on outcomes in adult life.

Do

- Procurement approaches and contracts can reinforce or hinder strategic aims, so staff with those responsibilities need to be involved in and understand local planning for change – particularly around market development. A clear focus on the outcomes to be achieved helps finance and contracts staff to understand how their work can contribute to improvements in support for young people and their families.

Walsall: People with learning disabilities can find it difficult to transfer learning from educational settings (school or college) to ordinary life. This can mean that learning practical skills (e.g. cooking, making a bed) is better done in the places where they are going to be used. Understanding this and finding ways to record learning helped to attract funding for educational achievement.

West Sussex: the Preparing for Adulthood pathways are being used as a framework for post-16 Education Health and Care Plans and for the education provision resulting from these. Education outcomes on the individual student contracts are based on and linked into the Preparing for Adulthood pathways. This involves children's and adult services across the council, together with partners relevant to the individual plans; for adults with learning disabilities there is a pooled budget across health and social care.

London: the pan-London Winterbourne View Concordat Position Statement 2014¹⁷ reported progress in developing joint agreements between services for adults, children, learning disability and mental health to support smooth and efficient transition arrangements for young people with learning disabilities or autism, including joint funding to enable development of specialist services and investment in early support and training for families (e.g. positive behaviour interventions and communication strategies).

17 London Social Care Partnership. See: <http://lscp.uk/winterbourne-view-programme/>

Review

- Establish systems to collate and analyse information from individual plans, experiences and outcomes, and from the experiences of practitioners and services; use this to feed into the 'understand' phase of the cycle to check what system changes are needed to support better joined up commissioning across agencies and into adult life.

The commissioning guide from the 'Making it Personal: 2' programme⁴¹⁸ described progress with developing a version of the Personal Outcomes and Evaluation Tool (POET) to capture the views of parents/carers, children and young people and practitioners of the process as well as the outcomes of having an Education, Health and Care plan. Evidence from the first trial of the new tool was already informing commissioners about system-wide changes required, such as the vital importance of putting appropriate support mechanisms in place and not over-bureaucratising new systems. One of the next steps is to ensure explicit joining up between the version of POET for children and young people and that for adults.

Governance and Engagement

- The whole cycle is underpinned by joint governance and engagement with the range of stakeholders and partner organisations that have roles to play.

Essex: the new and evolving Preparing for Adulthood Forum will bring together young people, families and representatives from education, health and social care (children's and adult services). Young people and families on the Forum will be drawn from the young people's and families' engagement groups; in the true spirit of co-production, representatives will be involved at the start of new ideas and encouraged to contribute their own ideas. The intention is to develop an open and confident forum in which members are empowered and able to challenge effectively. The board is supported by a joint commissioning group formed by the statutory partners listed above.

18 <http://www.kids.org.uk/mip2>

Hertfordshire: the Special Educational Needs and Disability Implementation Group and Further Education SEND Reforms Implementation Group bring together the statutory sector partners (health, education and social care), with close involvement from young people and families. The work plan includes:

- understanding the gaps in the Local Offer and how these might be jointly funded
- a strategic approach to ensuring the voices of children and young people are included
- understanding each agency's budgets and how these can support the joint strategy
- developing principles between children's and adult services so that processes can be properly aligned.

Suggestions for action

- Bring children's and adult services together to agree how Education Health and Care Plans and adult health and social care planning will connect as part of a shared agenda to develop personalised planning and support.
- Compare processes for personal budgets/personal health budgets across agencies and age groups and develop an agreed common approach, to include support planning and monitoring arrangements.
- Adopt a common approach to agreeing, recording and reviewing outcomes.

Linking the individual and strategic/operational joint commissioning cycles

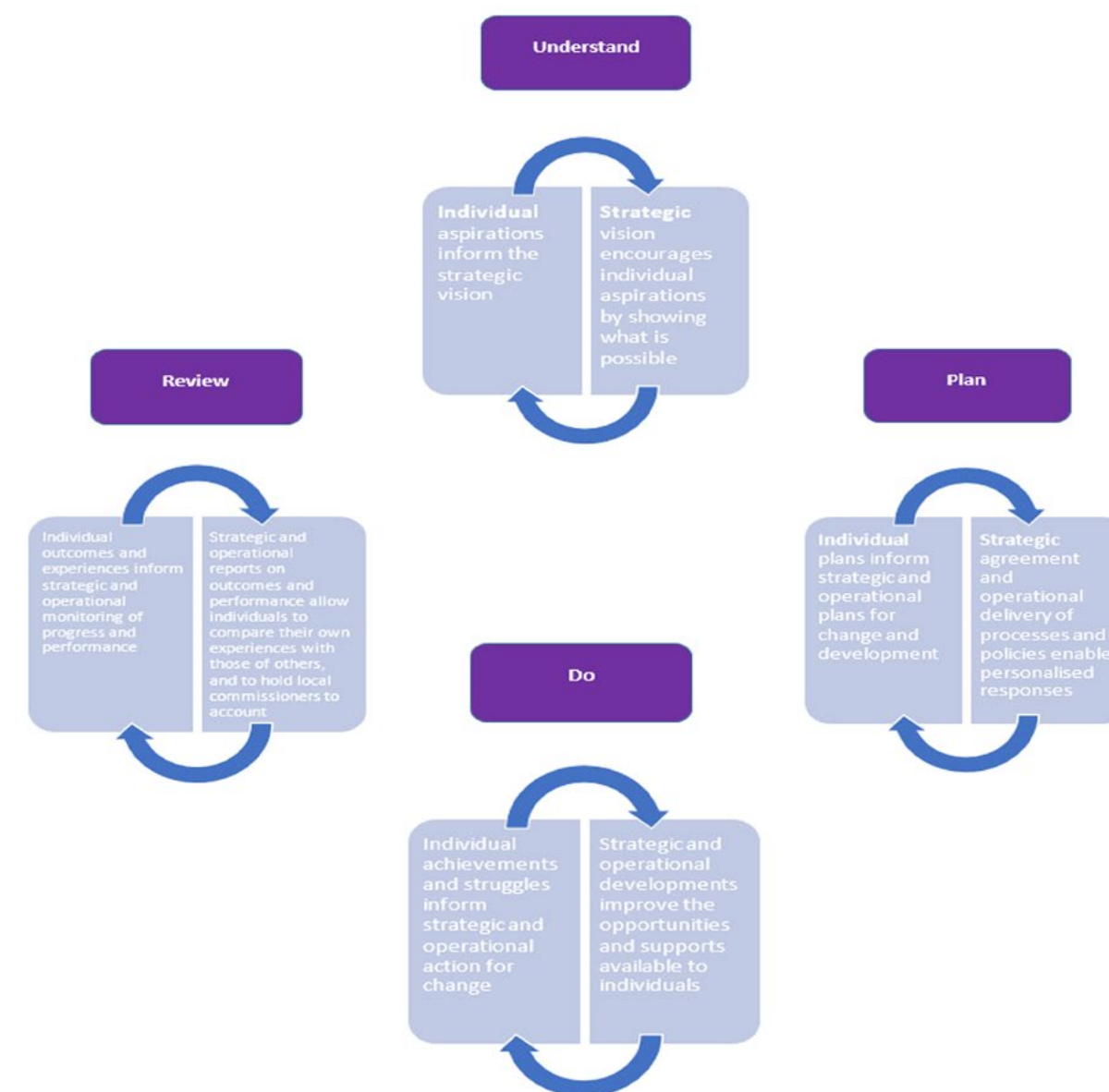
It is important to consider the links between the individual joint commissioning cycle and the strategic/operational cycle, so that individual plans and outcomes inform strategy and the strategic framework enables personalised, joined-up responses. Efforts by individuals, their families and the practitioners supporting them to achieve co-ordinated and person-centred support have driven many of the innovations in public policy, such as joint commissioning, personalisation, the range of personal budget options and pooled budgets. Within local areas progress has often been made by individual champions who have led change (officially or unofficially) for specific groups of people. However, system-wide support for change is required to embed and sustain both joint commissioning and personalisation 'at scale' rather than just for a few pioneers. As noted in the 'Making it Personal: 2' guide for commissioners¹⁹:

Experience shows that unless there is widespread understanding of personalisation and what it can achieve and people across the system are committed to it – including providing leadership for it - then change will be impeded, slow and difficult.

Strategic joint commissioning needs to create the 'conditions for success' for individual commissioning, for example through market and workforce development, community capacity building, delegation of budgets, joining up of processes for young people and for adults, and modification of traditional procurement processes. Learning about what needs to change will come from listening to individuals' experiences as well as good practice from elsewhere.

¹⁹ <http://www.kids.org.uk/mip2>

The following graphic demonstrates the links needed between the strategic and individual levels at each stage of the joint commissioning cycle:



Suggestions for action

Bring practitioners together with strategic commissioners and operations managers to:

- check there is shared understanding of aims
- review what needs to change at strategic/operational levels to facilitate and support individual practice
- review what changes may be needed in individual practice to deliver strategic aims.

Conclusion

Joint commissioning - across agencies *and* across the transition from services for children and young people into adult life – is at an early stage of development in most places. However, there are examples of good and promising practice that show how progress is being made across the country. We have learned from experience of developing joint commissioning in adult services that 'starting small' can be a good tactic, giving all concerned a chance to learn by doing and so to grow confidence – between young people, their families and the statutory bodies, and between the agencies. We have therefore included a number of practical examples that we hope will inform and inspire others to develop joint commissioning that has preparation for adult life at its heart.

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