

Outcomes Based Commissioning and the SEND Reforms

BACKGROUND, PROCESS AND IMPACT



Introduction

As part of the Delivering Better Outcomes Together (DBOT) contract, funded by the Department for Education, the Council for Disabled Children (CDC) has supported a number of local areas to being or progress their work on outcomes based commissioning (OBC).

This document includes:

What is Outcomes Based Commissioning?

Mark Friedman's Results Based Accountability

How does OBC relate to the SEND Reforms?

What are the anticipated benefits of an OBC approach?

What does a Strategic Outcomes framework look like?

How has CDC been supporting the development of strategic outcomes frameworks?

What impact of is CDC's work with local areas having?

Useful resources



What is Outcomes Based Commissioning?

Outcomes Based Commissioning (OBC) is an approach that is increasingly being adopted by Local Authorities and Clinical Commissioning Groups (CCGs), wherein services come together to develop a series of commissioning arrangements that are underpinned by the measurement of progress towards a set of shared outcomes.

Central to this process is the identification and co-production of a set of shared outcomes that are underpinned by robust quantitative and qualitative data, which allow commissioners and service leaders to continually evaluate the performance of their services and inform the local area's approaches to commissioning services for children and young people with SEND.

Fig.1: A typical approach to outcomes based

commissioning, in five stages

A local area's journey towards outcomes based commissioning typically progresses through the following five stages. Working in co-production with families and professionals, senior leaders from the local area:

1 Invite children, young people and parent carers to share their experiences of the SEND reforms. In co-production, the local area then updates its local SEND strategy and **agrees a new strategic vision.**

2 Bring together strategic leads, professionals, children, young people and families to agree a meaningful set of core outcomes.
3 Identify how these outcomes will be measured across the whole system using relevant indicators to identify progress

towards achieving the outcomes.

4 Consider **how the workforce** and digital technology can support the delivery of this framework.

5 Develop an **outcomes based contracting model** to promote collaborative working between multiple providers and achieving the holistic outcomes.

e.g. through Alliance based Contracting

For more detail, please see <u>CDC's Joint</u> <u>Commissioning Bulletin #3</u>.

Build trust and establish a new strategic partnership. Through co-production agree a strategic vision. Agree a set of outcomes that are meaningful for patients, carers and clinicians within a defined population group.

Agree a model of care that will achieve the outcomes and how the outcomes will be measured. Identify implications for the workforce and how digital technology can support the delivery of the model Undertake financial modelling and agree and outcome based contracting model

Mark Friedman's Results-Based Accountability

Mark Friedman's Results Based Accountability (RBA) model acts as an enabler for this work, and can support a local area's approach to outcomes based commissioning. RBA is described as follows:

"a disciplined way of thinking and taking action that communities can use to improve the lives of children, youth, families, adults and the community as a whole... a data-driven, decisionmaking process to help communities and organizations get beyond talking about problems to taking action to solve problems."

Friedman's approach shifts the focus from outputs ('*what did we do?*') to outcomes ('*what did we achieve?*'), by asking three key questions:

- How much did we do?
- How well did we do it?
- Is anybody better off?

For example:

Friedman's model already supports existing NHS England & Improvement approaches to commissioning for outcomes, focusing less on their treatment and more on how well patients feel after treatment, and helping them to stay well.

How does OBC relate to the SEND Reforms (Children and Families Act 2014)?

The SEND Code of Practice refers to shared outcomes as a legal 'should'; i.e. not mandatory in the same way as a 'must', but nevertheless highly recommended:

"Local partners should identify the outcomes that matter to children and young people with SEN or disabilities to inform the planning and delivery of services and the monitoring of how well services have secured those outcomes."

0-25 SEND Code of Practice

An OBC approach enables a local area to approach this systematically and rigorously.

However, a strategic outcomes framework does not need to be SEND specific as the outcomes resonate with all children and young people. Some local areas supported by CDC started out with a SEND focus, with the intention to expand to universal once good progress has been made with operationalising the outcomes in a SEND context. Others have begun with the intention of developing universal outcomes from the start.

What are the anticipated benefits of using an OBC approach?

There are many benefits to an OBC approach for all stakeholders:

CYP's and families' wishes are kept front and centre.

Good co-production of the outcomes gives parent carers and CYP a meaningful role in strategic processes, and their views are established at the heart of commissioning decisions.

Improves trust between families, professionals and strategic leads.

The process of developing a strategic outcomes framework is an excellent opportunity to bring partners together and focus on improving lives for children and young people.

Promotes holistic view of the child

The focus is on supporting families to live fulfilling lives rather than focusing on specific conditions or disabilities.

Clear, shared vision for professionals

Professionals across the piece see their role as part of the bigger picture in children's lives and are motivated by this. Communication and joint working is also likely to improve. Focus on lived experience rather than delivery of services

Monitoring extends from 'what did we do?' to 'is anybody better off?'.

Promotes evidence-based commissioning Montoring takes into account which services/ interventions are most effective and make the greatest difference in families' lives, which promotes learning and sharing. Less effective services can also be identified and re- or de-commissioned. This promotes efficacy and efficiency.

What does a Strategic Outcomes framework look like?

There is no 'correct' model for an outcomes framework and different local areas frameworks look very different. Local ownership is one of their key strengths, encouraging buy in across the area. That said, they do have similarities, and overall paint a picture of what a fulfilling, meaningful life looks like for a child or young person.

Here are some examples:

- Hertfordshire's Outcomes Bees
- Leeds' Obsessions
- Essex's Childen and Young People's Plan



How has CDC been supporting the development of Strategic Outcomes frameworks?

CDC has developed a programme of support for OBC based on these principles, emphasising that successful joint commissioning is defined by a local area putting the improvement of outcomes for children and young people at the centre of its commissioning approach. We deliver workshops which bring together strategic leaders, parent carer representatives, multi-agency professionals and (on occasion) children and young people to develop and implement strategic outcomes frameworks.

In summary, the approch is as follows:

- 1. Work with local leaders to identify any existing frameworks in the local area which may act as a springboard.
- 2. Deliver a full day workshop with multiagency attendees (including parent carer representatives) to:
 - a. Provide an overview of OBC.
 - b. Share examples of existing good practice from other areas.
 - c. Develop draft outcomes statements for the local area OR adapt existing frameworks as necessary.
 - d. Identify opportunities and action plan for further consultation on the draft statements, including with children and young people.
 - e. Begin thinking about indicators and impact data measurement by identifying existing data sources and known data gaps.
 - f. Action planning for next steps.

- 3. (Optional) Deliver a half day follow-up workshop to:
 - a. Confirm the draft outcomes statements.
 - b. Progress the data and impact measurement work.
 - c. Identify actions for operationalising the outcomes statements, for example in contracting/ tendering and the EHC process.

Areas that we have supported or are continuing to support with this approach include:

- Stockport
- Southend
- East Sussex
- Oldham
- Kent
- London Borough of Sutton
- London Boroughs of Kingston and Richmond

A more in-depth explanation of this journey, along with a case study from Stockport, can be found in our <u>DBOT Webinar #2: Overview</u> and learning, with a focus on Outcomes Based <u>Commissioning</u>.

There is also a write up of the Stockport case study available <u>here</u>.

Impact of our work with local areas

Leaders value the holistic nature of the outcomes frameworks:

"These are commitments that everyone in Southend can sign up to; it needs to be a campaign and not a policy. We need to see it in schools, GPs and services so that wherever people go, we know what we want to achieve for children."

Southend

Some parent carers involved in workshops now view their own child's future more positively, and have increased trust in senior leaders:

"I am never normally allowed to think of my son as being able to be happy and have friends, because I am so bogged down in the fight for the basics. If we can all work towards this I think things will really change."

East Sussex

Relationships and communication is improved between different partners:

"The journey is in itself impactful, it has brought us together as partners across education, health and care and with our families to gain this joint shared understanding of what is really important to our families."

Stockport



Useful Resources

Case studies:

<u>Hertfordshire's Outcome Bees</u> <u>Camden's Alliance Agreement</u> <u>Stockport's Outcomes Based Commissioning Journey</u>

Council for Disabled Children, (2017) Joint commissioning bulletin: applying an outcome based approach to commissioning

Council for Disabled Children webinars:

DBOT #1: Focus on JSNAs DBOT #2: Focus on Outcomes Based Commissioning DBOT #3: Overview of EHC & Outcomes training

Department for Education and Department of Health and Social Care (2015), Special Educational Needs and Disability Code of Practice: 0 – 25 Years

Friedman, M. (2005) <u>Trying Hard is Not Good Enough: How to Produce Measurable Improvements</u> for Customers and Communities

What is Results-Based Accountability™?

NHS England (2014) Commissioning for Effective Service Transformation: What we have learned



About the Council for Disabled Children

The Council for Disabled Children (CDC) is the umbrella body for the disabled children's sector with a membership of over 200 voluntary and community organisations and an active network of practitioners and policy-makers that spans education, health and social care. Their aim is to see a fully-inclusive society where disabled children and young people and those with special educational needs can lead full and happy childhoods and rewarding adult lives. They do this by working with the sector to find out what is and isn't working on the ground and use what they learn to influence policy and improve practice.

CDC hosts the following networks and projects:

Early Years SEND Partnership IASS Network Making Ourselves Heard Special Educational Consortium The Information, Advice and Support Programme Transition Information Network

CDC is proud to be part of the National Children's Bureau (NCB), a leading children's charity working to build a better childhood for every child.

CDC is also part of the consortium that delivers the Every Disabled Child Matters campaign.