

East Sussex County Council

Second Workshop with VCSE organisations

Service Monitoring – how do we achieve a more proportionate and co- productive approach?

Report

December 2022

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1 Objectives of the workshop

- To consider how the Council, NHS partners and the VCSE sector can best work together to improve service monitoring
- To develop a shared view of the main barriers and priorities for action
- To share ideas about a Commissioning Academy and agree possible ways forward in developing a suitable model

2 Planning

The workshop had been planned by John Hedge of the Institute of Public Care (Facilitator), John Routledge of East Sussex Voluntary Sector Alliance, Samantha Williams of East Sussex County Council and Neil Blanchard, Chief Executive of Southdown.

3 Introductory comments

John Hedge outlined the agenda.

Samantha Williams provided the context for this second joint workshop and reminded participants of the VCSE Commissioning Principles, as follows:

- VCSE is seen as full partners and experts by experience with their skills and knowledge used to shape the design and transformation of services
- VCSE Strategic Partners
- Co-production with VCSE
- Contract terms
- Contract variation flexibility / ability to develop pilots without procurement processes
- Grants versus contracts
- Funding that covers all costs, including reasonable central and risk contingency contributions
- Value for Money
- Stability of the local VCSE is supported

- Contract variation flexibility / ability to develop pilots without procurement processes
- Social Value
- Regular client and staff feedback helps shape setting and reviewing KPIs for contracts
- Maximise funding opportunities for the full range and size of East Sussex VCSE providers
- Community assets

She also reminded the workshop of the themes and messages which had come out of the first workshop in March. These were as follows:

- A shared approach to leadership within clearly agreed commissioning principles was crucial and this would need to acknowledge the complexity of partnership.
- Agreement on a suitable model should take account of examples and experience from elsewhere.
- The same approach would not necessarily suit all markets, and change would take time.
- Sharing and developing skills was crucial and there was much support for the creation of a Commissioning Academy.
- The VCSE's knowledge, reach and expertise were underused at present but there needed to be better understanding of the respective achievements and pressures faced by both commissioners and VCSE leaders.
- The workshop was a helpful initial activity but more opportunities to develop thinking and potential models were required.

Neil Blanchard spoke of the current transformation plan for community mental health in East Sussex and the key principles involved, with a greater role for the VCS sector. He shared the draft Programme Plan Objective, as follows

We will increase the proportion of spending on VCSE, codesign the integrated offer for whole system working via VCSE leads, workforce plan and develop key contracts with VCSE, including grassroots services.

This involved:

- Fully integrating the VCSE within the programme governance at a board, system and place-based level and representation at related workstreams
- Providing VCSE networks to improve communication and increase engagement regarding the Transformation Programme
- In collaboration, co-design, develop & align models & pathways for the integrated offer for whole system working
- Increase funding into the VCSE sector and develop processes and the infrastructure for VCSE funding to flow via local Lead Provider and/or Alliance partnerships

- Support workforce planning by increasing the number of VCSE roles and facilitate a one team approach to staff integration, support, supervision and wellbeing

John Routledge shared issues about monitoring raised by VCSE Alliance members

- The reduced income VCSE organisations are receiving from public services has been raised by Alliance members, including the move towards more social enterprise activity and the lack of inflationary uplifts in public sector contracts at a time of high inflation
- The information asked for by commissioners is sometimes considered disproportionate. There are concerns about what monitoring information is being asked for and it is sometimes seen to be too much, the wrong type and focused on outputs not outcomes.
- Concerns have been raised about performance related pay.
- KPIs, data and payments are areas where we could do some good co-design
- Members are not happy with:
 - "random requests" for information outside the agreed monitoring periods;
 - new information being asked for; and
 - when they don't receive any feedback about information submitted
 - Housekeeping delays
 - Late payments
- The Alliance would support evidence-based decision-making - with explanations about why particular measures are being asked for.

- 1) **Group discussions - Developing a more proportionate and shared approach to service monitoring- ideas for action and identification of three top priorities**

4 Group discussions – developing a more proportionate and shared approach to monitoring- ideas for action and identification of priorities

It had been decided in advance to create separate discussion groups for Commissioners and VCSE members, in order that similarities and differing perspectives could be compared and discussed. There were 2 groups of each. Group facilitators were asked to discuss the range of issues relevant to developing a shared and more proportionate approach to service monitoring, identifying three top priorities for action.

The main points and priorities from each group were as follows:

Commissioners 1

Main points

- Use market engagement processes earlier to discuss outcomes and how they might be measured
- Performance related payment for outcomes was seen as a significant risk
- There should be a coproduced approach to achieving proportionality relevant to contract size

- It was not always possible to control data demands- MP questions, FOI requests etc. Perhaps a minimum dataset could help with this
- Late payments - acknowledgment that this was unacceptable.
- Recognition that feedback to monthly quality reports was essential and did not always happen at present.
- Need for better dialogue and communication with VCSE
- On annual uplifts- working to achieve more flexibility within current funding.

Priorities

- Review outcome payments
- Earlier market engagement to work jointly on outcomes and measures
- Look at how monitoring feedback is communicated and consider a more standard approach to this

Commissioners 2

Main points

- In developing KPIs take more account of service provider knowledge and insight
- Recognise the need to develop a more shared culture - shared activities like training are important to this.
- Need to be clear what we mean by proportionality – being clear about the core issues but recognise that there are a number of additional demands- FOI, and complaints for example.
- Need to develop a system of reporting which is more standard- perhaps at different levels depending on size of contract and risk.
- Case studies – what do we do with these? Can we make better. Use of them in quality development, training etc.

Priorities

- Development of knowledge exchange – a community of practice
- Always ask ‘Is it possible?’ and be aware that there is more than one audience involved
- Avoid Payment by Results

VCSE 1

Main points

- Develop joint learning opportunities working on practical issues
- Codesign solutions before contracts are set
- Create a generic proportionate monitoring approach depending on the size of the award
- Think about how to engage small providers
- Revisit existing contracts to see if they can be ‘retro-fitted’
- Help VCS understand the commissioner’s perspective - how contracts are created and the monitoring requirements on expenditure etc.

Priorities

- Develop joint learning opportunities
- Revisit existing contracts
- Share with VCS the contract processes to develop better mutual understanding.

VCSE 2

Main points

- Engagement pre-procurement – sense checking with the market before requirements are added to specifications
- Work for more trust and transparency so that providers don't over commit.
- Be clear about the rationale for KPIs
- Be aware of the reality of capacity to respond to data requirements
- Consistency will depend on service providers and commissioners working closely together.
- Practical ideas for developing a more effective approach to monitoring included providers sharing their costing processes and business experience with commissioners; sampling /case study approach
- Agree a maximum number of priority measures
- Ensure that contract terms are linked to VCSE Alliance commissioning principles.
- Scalability for small providers
- An annual 2-way feedback/review of the whole process

Priorities

- A co-produced approach to pre-procurement work
- Annual joint review of the overall process
- Scalability for small providers

Commentary

There was a considerable overlap between the four groups and between VCSE and Commissioner groups. Better shared understanding from more sustained working together was a key element- Commissioners sharing the contracting process and the VCSE sharing its business and costing expertise were examples.

The need for working towards a shared culture was acknowledged and many of the points raised were relevant to the following discussion on development of a structure for shared training and good practice.

A consistent theme was the need to develop more consistency of approach, and that this should be based on different levels of requirement depending on risk and size of contract. Related to this was the need for capacity to be realistically assessed. Some data needs, however, were beyond the control of the council, not only FOI and official questions but central government's tendency to impose very heavy reporting requirements when specific funding was made available.

The overriding consensus was the need for more joint work on these issues, making use of the agreed VCSE Alliance Commissioning Principles.

5 A Commissioning Academy for East Sussex- what might it look like and how do we begin to develop it? Open discussion

The idea of a Commissioning Academy had been raised at the previous joint workshop, and future work to develop the idea had been seen as one of the priorities for follow up work. The open discussion was to share thinking and then agree how to take things forward.

What do we mean by 'Academy'

There was a general view that we were not talking about a building, or institution, nor a government funded activity. There was limited reference to Commissioning Academies online, apart from those joint initiatives with the centre, so there was no clear alternative model to draw from.

The needs and concerns which a local academy might meet could be summarised as follows:

- The need to improve communication between commissioners and providers
- A way of sharing good practice and how to sustain and spread it.
- A way of sharing skills
- A regular forum for professional dialogue
- A vehicle to support capacity building
- A means of addressing the 'culture shift' necessary to achieve change
- A way of developing an agreed baseline for improvement.

What might it look like?

After discussion the general view was that the name 'Commissioning Academy' suggested something more elite than was envisaged. The idea instead of a 'Community of Practice' seemed more attractive and flexible. This could start in a small way and might mean just a programme of quarterly workshops at the outset, but it could be developed as resources and commitment developed.

Some issues to be considered

- How to involve providers who weren't in the VCSE Alliance including small and emerging organisations
- How should this initiative fit with the work around inclusive commissioning to address diversity and inequalities.
- How to involve the whole 'commissioning family' - the broader group of stakeholders including operational staff.
- The inclusion of Children's Services

The issue of a Sussex wide 'Community of Practice' was considered on the basis of economy of scale and wider links, but this seemed too complex and large to be realistic.

Instead, it was felt that there should be 'dotted lines' to similar initiatives and groups in the 3 authorities and NHS Sussex, but that we should concentrate on East Sussex and aim high so that it could be regarded as a 'centre of excellence'.

Samantha Williams would consider funding options, but that the idea of a community of practice suggested people with expertise coming together and giving their time generously.

Taking things forward

It was agreed that a joint approach was required and that in due course a regular steering group or committee would need to be established to manage the work. At this stage, though, Samantha, Neil and John (then Jennifer) would lead on developing the idea and Jennifer will draft something for discussion at the next VCSE Alliance meeting on 31st January.

**Institute of Public Care
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