Routes to Commissioning

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Aim of presentation

- Overview of commissioning
- Understand the opportunities
- Ideas for approach commissioners
Commissioning Terms

• **Commissioning**
  - the process of assessing the needs of a local population and putting in place services to meet those needs.’ (DH, 2010b)

• **Procurement**
  - the stage of the commissioning cycle that involves buying the service and leads to the award of a contract

• **Tendering**
  - the route that an organisation will take when responding to a requirement for a service which has been identified through the commissioning process.

• **Commissioners:** NHS, Local Authority

• **Providers:** NHS, LA, Voluntary & Community, Business
Health and Social Care Act (2012)

New health social care & public health system

Department of Health

NHS

- NHS Commissioning Board
- Monitor (economic regulator)
- Providers

Social care

- CQC (quality)
- HealthWatch

Public Health England

(part of DH)
(local health improvement moving to LAs)

Local authorities - leading Health & Wellbeing Boards

Local HealthWatch

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What’s new?

- Clinical commissioning groups (CCGs) - replace the primary care trusts (PCTs) and control around two-thirds of the NHS budget.
  - The CCG boards (made up of GPs, other health professionals and lay members) are responsible for making decisions on priorities for commissioning local health services.

- Local Authorities - Commissioning For Public Health and responsible for providing some public health services

- Health and wellbeing boards – bring together NHS and local authority decision making and responsible for
  - Joint Health & Wellbeing Strategy - forms the basis of the commissioning plans of the Clinical Commissioning Groups CCGS and local authority. Underpinned by...
  - Joint Strategic Needs Assessment (JSNA) - an ongoing process by which local authorities, clinical commissioning groups and other public sector partners set out needs of population and priorities
Drivers for change

- Value for money
- Targets and efficiency
- Quality assurances
- Good solutions to complex problems
- Shift decision making close to patients

The reality

- To early to say – varied picture
- Personal relationships
- Off the shelf models
- Prove before they buy – not always good for VCS
Success Stories

• Strong Partnerships with voluntary sector in areas
• Prevalence in some disciplines
  • O.T., Social & Therapeutic Horticulture
  • Public Health – food environments, healthy eating, mental health
• Commissioning and/or referral relationships
  • Healthy Weight, mental health
  • Substance misuse, dementia
Why does the NHS work with voluntary and community sector?

• Already doing it!
• VSC receives £3.4 billion from NHS (Kings Fund)
• We are effective because:
  • we understand local need
  • have trust within local communities
  • extend beyond traditional, clinical health interventions
  • work holistically across multiple services
Building relationships with CCGs & commissioners
Plan your approach:

Who do you want to contact?

• Commissioners
• Voluntary Sector umbrella group

Are you ready?

• Do you need to think about partnering up
• Are you ready to be commissioned, receive referrals

Do your homework

• find out CCG priorities
• develop a pitch
• summarise your points on 1 side of A4
Build relationships:

• Assume GPs they know very little
• Commissioners:
  www.navca.org.uk/localvs/lcp/briefings/
• Be clear about your clients’ needs and how your organisation meets those needs.
• Use existing contacts in the health sector
• Partnerships can be effective
  • smaller organisations becoming sub-contractors to large ones
  • consortium that can deliver larger contracts.
Demonstrate what you can do?

Satisfy commissioners
• invite them to events, send them newsletters, links to reports, etc.),

Construct your evidence around their outcomes

Demonstrate beneficial outcomes and value for money
• how many people receive the service
• what difference it makes to them
• how much it will cost.
Good Practice - what your CCG could be doing?

- Co production & Innovation
- Building Health Partnerships, Social Prescribing
- Grant/developmental/pilot funding
  - by commissioners in order to allow innovative solutions to develop
- Support organisations (such as Councils for Voluntary Service)
  - acting as a broker between commissioners and voluntary sector providers
Requirements: What your CCGs should be doing?

Required to demonstrate that they have mechanisms in place to work with voluntary-sector groups.

- The Public Services (Social Value) Act January 2013.
- Requirement on commissioners to consider the economic, environmental and social benefits
- Healthy people, healthy places briefing.
  - Obesity and the environment: increasing physical activity and active travel
  - Public Health England Nov 2013
- Sustainable, Resilient, Healthy People & Places
- A Sustainable Development Strategy for the NHS, Public Health and Social Care system