

REPORT FOR DECISION



DECISION OF:	HUMAN RESOURCES AND APPEALS PANEL	
DATE:		
SUBJECT:	Transfer of Children's Commissioning to Secondary Care Pillar within the OCO Structure	
REPORT FROM:	Will Blandamer, Executive Director	
CONTACT OFFICER:	Will Blandamer, Executive Director	
TYPE OF DECISION:	HUMAN RESOURCES AND APPEALS PANEL	
FREEDOM OF INFORMATION/STATUS:	[This paper is within the public domain or This paper is exempt]	
SUMMARY:	This paper proposes entering formal consultation with Trade Unions and employees with a view to strengthening organisational and commissioning arrangements within the OCO through the transfer of the Children's Commissioning Pillar to form a component part of the Secondary Care Pillar.	
OPTIONS & RECOMMENDED OPTION	It is recommended to enter into formal consultation with Trade Unions and employees with a view to implementing the transfer of the Children's Commissioning Pillar to form a component part of the Secondary Care Pillar.	
IMPLICATIONS:		
Corporate Aims/Policy Framework:	Do the proposals accord with the Policy Framework? Yes	
Statement by the S151 Officer: Financial Implications and Risk Considerations:	No financial implications	
Equality/Diversity implications:	N/A	

LK

Considered by Monitoring Officer:	Yes	Comments	JW
		Subject to full consultation taking into account the impact on and any issues arising from any changes in the grading/reporting lines and any equality issues.	
Wards Affected:			
Scrutiny Interest:			

TRACKING/PROCESS

DIRECTOR:

Joint Executive Team/CCMT	Cabinet Member/Chair Briefed	Ward Members (if necessary)	Partners
Scrutiny Committee	Other Committee	Council	Comms

1.0 BACKGROUND

The One Commissioning Organisation has recently been established and the Executive Director is now in post. Now the OCO is operational, it has become clear there are opportunities to strengthen and improve elements of the structure to ensure it operates effectively and delivers the integrated approach required.

2.0 ISSUES

Following the recent formation of the OCO and appointment of the new Executive Director it has become apparent that Children's Pillar of the OCO is relatively underpowered compared to the other pillars and is also separate to both wider children's commissioning arrangements in the Secondary Care Pillar, and also separate to the Children & Young People Directorate. The rationale for this stand alone team was to demonstrate a specific team focused on SEND and high cost placement and it has proved important in both areas. Although the current team performs excellent work, they do not have the capacity to provide the necessary cross boundary leadership, and the team is relatively isolated from key colleagues.

There is also lack of clarity on the role of the Secondary Care Pillar more broadly part of which relates to the existence of relatively small children's health commissioning function which cannot easily be disaggregated from the wider capacity of the pillar. In addition, and by definition, the children's health commissioning functioning in the OCO is in a separate Directorate to the Children & Young People Directorate. As a result, there is a risk that children's

health commissioning doesn't have the necessary profile within the wider commissioning conversations. Despite some good individual examples of joint commissioning (St Monica's, and short stay provision) within current arrangements the OCO will struggle to demonstrate significant and substantial progress in integrated children's commissioning arrangements in relation to SEND; our core priority amongst our SEND recommendations. This is a significant risk for the OCO.

Under current arrangements, the OCO is missing an opportunity to create integrated commissioning arrangements for children's services that would have the following properties:

- preventing fragmentation of services and increase efficiency
- preventing duplication of work and provide best use of resources
- integrate approaches and embed best practice across all partners
- enable children, young people and families to have a voice in the services they need – heard once and collaboratively actioned as appropriate
- a single point of accountability for children and young people's health and wellbeing related commissioning
- opportunities to explore alignment and pooling commissioning resources on behalf of CCG, Public Health and NHS England
- whole system approach to planning and commissioning

To address this, it is proposed to transfer the Children's pillar of the OCO to form a part of the Secondary Care Pillar. This will involve a change of reporting line for Children's Commissioning Lead from the Executive Director of Strategic Commissioning to the Deputy Director of Commissioning within the Secondary Care pillar.

Within this pillar, the Children's Commissioning Lead can work more effectively with the key Programme Lead roles already located with Secondary Care to build robust integrated commissioning arrangements for SEND and wider health and care services.

3.0 CONCLUSION & RECOMMENDATION

In order to ensure organisational and commissioning functions are most effectively aligned, it is recommended to enter formal consultation with Trade Unions and employees regarding the proposal to transfer of the Children's Commissioning Pillar to within the Secondary Care Pillar of the OCO

List of Background Papers:-

- Appendix A: Proposed Trade Union and Employee Consultation Document
- Appendix B: Current & Proposed Structure Charts

Contact Details:-

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