

## PREPARING A COMMISSIONING STRATEGY

**Part of the framework for the planning and commissioning of services  
for children and young people**

**September 2008  
Version 1.2**

<b>Version</b>	<b>Who</b>	<b>Comment</b>
1.1	Leanne	First draft
1.2	Leanne	Incorporating elements from EM Following meeting on 22 Sept.

Draft

## 1. PURPOSE OF THIS DOCUMENT

To provide concise and straightforward guidance on what a strategy should include.

This document sets out

- A proposed format that a strategy can follow
- The headings and sub-headings a strategy can follow
- Guidance to explain each heading

## 2. INTRODUCTION/BACKGROUND

This document has been produced to ensure the Children's Trust sets up and maintains a standardised approach in the format of all of its commissioning strategies.

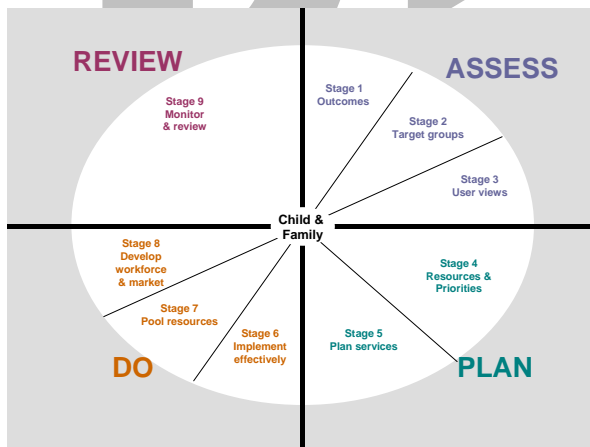
It is not anticipated that every strategy that is produced through the Children's Trust will follow this format to the letter. However, any individual or partnership that is preparing a strategy should have regard for the information provided in this document.

Any strategy that is produced should follow the Children's Trust corporate style. In short, this means a document should be produced in arial font, size 12 and should be left aligned. Further guidance is available at [xxxx](#)

This document falls into the Children's Trust's work around planning and commissioning.

### 2.1 The Commissioner's Handbook

The Commissioner's Handbook sets out the framework that Sunderland Children's Trust has adopted for the planning and commissioning of services for children and young people. The framework consists of four key activities of Assess – Plan – Do – Review.



Preparing a commissioning strategy is a task that should be completed as part of the PLANning activity, and this document is one of the key tools to support commissioners as they complete that task.

### **3. THE FORMAT OF A COMMISSIONING STRATEGY**

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**FORWARD**

**INTRODUCTION**

**The purpose**  
**The scope**  
**How we have developed the strategy**

**OUR VISION**

**OUR PRINCIPLES**

**CONTEXT**

**Nationally**

**Locally**

- **Overview of Sunderland**
- **Children and young people in Sunderland**
- **Local strategies and plans**
- **Local needs assessment**
- **Market research**

**OUTCOMES, OUTPUTS AND TARGETS**

**PRIORITIES**

**OUR OFFER**

**RESOURCES**

**MONITORING AND EVALUATION**

**Monitoring and evaluating progress made in delivering this strategy**  
**Monitoring and evaluating services and provision**

**APPENDICES**

## FRONT PAGE

This should include:

- Title
- Duration of strategy
- Date
- Version

## FORWARD

## INTRODUCTION

### The purpose

- Who is the document for
- Why has it been developed
- What does the document include (ie. contents)

### The scope

- What/who does it cover
- Timescale

### How we have developed the strategy

- Who asked for the strategy to be prepared
- Who has been involved in its preparation
- What consultation has taken place

## OUR VISION

- The strategy should cite the Children's Trust vision, which is *"Working together to improve life chances and aspirations for each child and young person in Sunderland"*
- Vision for this strategy

## OUR PRINCIPLES

A number of principles have been identified that relate to how we work with and support children, young people and families. These can be found at xxx. You are not expected to repeat these principles in your strategy.

You should include any principles that directly relate to your strategy.

You should include the principle

*"Every child and young person is entitled to a private and family life and has the right to participate in decisions that affect their lives. These fundamental human rights, provided for by the **European Convention on the Rights of the Child** and incorporated into UK law in 1991, underpin the strategy"*

## CONTEXT

### Nationally

This section should provide an overview of the population concerned and any major policy issues. It should include a brief outline of the main messages from research, national guidance and good practice, as well as highlight any key drivers for change.

For each identified document, a brief overview of it and how it relates to your strategy should be included. Quotes can be used. If there are any “must do’s” then this must be explicit.

### Locally

#### ▪ Overview of Sunderland

This section set out a picture of Sunderland, including useful information and key indicators. The text below has been used in a number of strategies to give an overview of Sunderland.

*“Sunderland is the **largest city in England’s North East region**, with a population of 280,600, of which 68,300 are children and young people. After significantly falling during the 1990s, the birth rate has levelled off and in recent years there has been a slight upturn. The **minority ethnic population** is small but growing, with the largest sub-group being Bangladeshi. The number of **asylum seeking families** is rising.*

*The city and its inhabitants face a number of challenges.*

- *A comparison of the Indices of Multiple Deprivation (IMD) between 2004 and 2007 shows that the number of people in Sunderland who are living in one of the 10% most deprived areas nationally has decreased by 14,600. However, despite these improvements, 55,000 people (22% of the local population) are still living in one of the country’s **most deprived areas**.*
- *Sunderland has the lowest proportion of **working age population** who achieve level 4/5 qualifications when compared to other authorities in Tyne and Wear.*
- ***Unemployment** levels are at 68.3%*
- *20.8% of the working age client group are **claiming key benefits**. This is higher than the North East average of 19% and the Great Britain average of 14.2%*
- *One third of adults have **low literacy and numeracy levels**, above national averages.*
- *Domestic violence has the highest levels of repeat victimisation of any crime in Sunderland (47.5 in 2006/07) and remains a largely hidden crime with approximately 4,900 incidents a year*
- *The number of **older people** is increasing, and 23.8% of older people in Sunderland experience income deprivation. Sunderland has nearly twice as many people that are **permanently sick or disabled** compared with the national average.*

*In spite of these challenges, Sunderland, as a place to live, has **improved significantly** in the past two decades – the city is cleaner, safer and more prosperous than it was twenty years ago. Young people do better at school and people live longer, healthier and more independent lives. Local facilities have improved and the environment and public realm have been transformed. Crime in the city has been falling significantly and **Sunderland is now the safest large city in the North**, with a crime rate below the national average. The **quality of housing** continues to improve and almost 98% of the social housing stock now meets the decent home standards”*

▪ **Children and young people in Sunderland**

The text below is a standard paragraph that has been used in other strategies, setting out a local context of for children and young people in Sunderland.

<i>Children and young people aged 0-19 in Sunderland: 68,300</i>
<i>Total number of pupils in primary, secondary and special schools: 41,934 (School Census, January 2008)</i>
<i>Number of school aged children and young people eligible for free school meals: 8,224 (School Census, January 2008)</i>
<i>Number of children and young people, aged 0-19, in Sunderland from a black or minority ethnic heritage: 2019 (School Census, January 2008)</i>
<i>Number of Children in Need: 2017 (Sunderland City Council (SWIFT), March 2008)</i>
<i>Number of children and young people with a special educational need: 9,525 of which 1,118 were statemented (School Census, January 2008)</i>
<i>Number of children in care: 389 (Sunderland City Council (SWIFT), March 2008)</i>
<i>Number of children and young people who are subject of a Child Protection Plan: 198 (Sunderland City Council (SWIFT), March 2008)</i>

- 23% of women in the city continue to **smoke during pregnancy**
- Of the 68,300 children and young people in Sunderland, 29.3% are **living in poverty** compared to 21.3% nationally
- 14,500 children under 16 live in **workless households**
- 12.6% of 4-5 year olds and 21.4 % of 10-11 year olds are **overweight or obese**.
- About 13,000 children and young people will need some form of **additional support** during their 0-19 journey from the educational, health or caring professions
- 1 in 4 children and young people in Sunderland have some form of **mental health problem**. 15% have mild, early stage difficulties, 7% have moderately severe difficulties, 2% have complex difficulties and less than 1% have very serious difficulties.
- 1035 children are accessing services due to a **disability**
- The gap between the percentage of **pupils achieving KS2**, English Level

4+, who were eligible and not eligible for **free school meals** has reduced from 23% in 2006, to 20% in 2007. The gap in KS2, Match Level 4+ has also reduced from 23% to 22%.

- The number of schools with **persistent absence (PA)** reduced from 6 in 2007 to 5 in 2008, and the number of persistent absentees reduced from 575 to 364
- Pupils at KS4 recorded the city's **highest results ever GCSE results**, with 59% achieving five or more **A\*-C** grades, compared to 62% nationally.
- 13.3% of 16 to 18 year olds are **not in education, employment and training**. This is considerably higher than the national average of 7.7% There has seen a significant reduction since the baseline period 1998-2000, from 63.1 per 1,000 females to 55.4 per 1,000 population in 2005
- There has seen a significant reduction in **teenage pregnancy** since the baseline period 1998-2000 when it was 63.1 per 1,000 females, but at 56.5% it is above national average of 42.1%
- **Cannabis and alcohol use** amongst young people has increased since 2004, with more young people receiving drug treatment. Residents who feel that people using or dealing drugs is a serious problem has reduced from 43% in 2004 to 32% in 2008."

#### ▪ **Local strategies and plans**

You should identify existing local strategies and plans that link with your strategy. It is useful if you include a quote taken from each strategy and plan to make clear the link with your strategy.

#### ▪ **Local needs assessment**

The local context should outline what your needs assessment has told you. This may include some statements about

- What the data tells us
- What children/parents/practitioners tell us
- Common themes

It is anticipated that Partnership's will complete a thorough needs assessment. This section aims to provide a summary of that needs assessment.

**It is anticipated that your needs assessment should forecast demand.**

[Guidance on completing a needs assessment is given in the Commissioner's Handbook, as part of the activity ASSESS.]

#### ▪ **Market research**

This section should give a brief summary of the your comprehensive market analysis.

[Guidance on completing market research is given in the Commissioner's Handbook, as part of the activity PLAN.]

## **OUTCOMES, OUTPUTS AND TARGETS**

This should set out the

- Outcomes the strategy aims to work towards and improve
- Key outputs the strategy aims to deliver ie. the number of children supported
- Targets the strategy has set. This may be linked to outputs.

The strategy should also make reference to key performance indicators (KPIs) that the strategy must work towards eg. Govt required PIs.

You should also identify any cross cutting issues or outcomes that another Partnership may be working towards. You should consider how you can incorporate this within your governance arrangements.

## **PRIORITIES**

This should set out

- CYPP priorities that the strategy is working towards
- Specific priorities for the strategy

This should lead into the offer that is being made through the strategy.

## **OUR OFFER**

This should set out the types of services/provision you aim to have in place, to deliver on the strategy. This may include

- Services/provision that already exist and will continue to deliver – in which case, you should also indicate who the provider is
- Services/provision that will be specifically commissioned by you

The strategy should be clear about the distinction between the above. Any existing services/provision that is being cited as delivering on the strategy should be included involved in your governance arrangements ie. they attend partnership or provider meetings.

You must ensure that a service specification is written for each of the services/provision that you are going to procure.

## **RESOURCES**

This should set out the resources available to support the delivery of the strategy. This should include

- Budget
- Named individuals or posts – it should be clear whether these will be funded through the budget or as part of existing posts

This section should make clear what the investment has been in previous year(s). It should set out what investment is to be made, and what, if any disinvestment is to be made.

## MONITORING AND EVALUATION

### Monitoring and evaluating progress made in delivering this strategy

This section should relate to governance arrangements for the strategy. You may want to make reference to your performance framework, your action plan and other general monitoring arrangements. You may want to include this information in the appendices.

### Monitoring and evaluating services and provision

This section should relate to your offer. You should set out

- How you are going to monitor and evaluate services that you procure
- How you are going to monitor, evaluate and involve other services that you have identified are involved in delivering the strategy

## APPENDICES

Suggested appendices include:

- Governance arrangements - diagram
- Outcomes and Performance framework – outcomes, outputs and targets – this can include historical and baseline information
- List of existing services in place – including some basic details eg. name and type of service / provider / description of service / governance link ie. attend provider meetings
- List of procured services – including basic details
- Action plan - An action plan should include the following

Priority no.	Action	Responsible officer	Timescale

- Risk management – you should consider what risks are attached to your being able to progress your actions. **Need to add suggested table here**