

# Governance of and Support for Integrated Commissioning in Children's Trusts

## Introduction

This briefing paper provides some background information on the governance of and support for integrated commissioning in Children's Trusts, and is intended to support participants on the Commissioning Skills Training Programme.

The paper is divided into the following sections and refers both to national guidance and emerging best practice from the field:

- Background – The Drive for Change
- Governance of Commissioning within Children's Trusts
- Support for Integrated Commissioning within Children's Trusts

## Background – the drive for change

Previously referred to as 'Children's Trust Arrangements', Children's Trusts are now more tightly defined in the most recent (November 2008) Guidance as:

- The embodiment of a local area partnership led by the local authority.
- Bringing together key agencies.
- To improve children's wellbeing through integrated services.
- Focused on delivering the 5 Every Child Matters Outcomes.

and also "*in part, a planning body which informs commissioning decisions and ensures ... that front line services work together to improve outcomes*"<sup>1</sup>.

The DCSF 'Onion Diagram' originally published as part of the 'Every Child Matters' launch is as relevant today as it was then and is explicitly referred to in the new guidance. It firmly puts outcomes for children, young people and families at the centre of all Children's Trust activity and suggests that good inter-agency governance is an essential over-arching factor for improved outcomes.

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<sup>1</sup> Children's Trusts: Statutory Guidance on inter-agency cooperation to improve well-being of children, young people and their families (November 2008)



DCSF 'onion' diagram

Source: DCSF, Every Child Matters  
website: [www.everychildmatters.gov.uk](http://www.everychildmatters.gov.uk)

The Children's Trust Board has been given specific responsibility for putting in place and promoting effective arrangements relating to all of these five essential features or layers of the onion. However, the new guidance doesn't let the key partners within Trusts off the hook. It also requires what is described as a 'step change' for Children's Trusts in a number of ways, including in particular in the ambition and impact of collaborative working between local authorities and PCTs to bring about effective integrated commissioning. In practice, this will require Children's Trusts and in particular these two key partners to ensure that both governance and support arrangements for integrated commissioning are fit for purpose.

The partnership between the local authority and the PCT is described in the 2008 guidance as "the driving relationship for The Children's Trust" and strengthening it is described as "the engine which will drive the Children's Trust Board to where it needs to be to secure world class provision in the local area".

## The governance of commissioning within children's trusts

What do we mean by governance? Effectively, governance in the context of public services means accountability for improved outcomes and value for public money. The Improvement and Development Agency (I&DeA) has recently embraced the following definition of governance for individual public care service organisations:

*"The procedures associated with the decision making, performance and control of organisations, with providing structures to give overall direction to the organisation and to satisfy expectations of accountability to those outside it."*<sup>2</sup>

The Government's expectation is that Children's Trusts will have in place fit for purpose governance arrangements to support the delivery of improved outcomes for all children and young people living locally and, in particular, against the priority outcomes identified for and by the Trust in their Children and Young People's Plan which, in turn, should be informed by and inform in turn the Local Area Agreement and other key overarching strategies for the local area.

The Commissioning Support Programme's Self Analysis and Planning materials mirror the new Children's Trust Guidance by suggesting that effective arrangements should form part of a clearly understood reporting structure extending to the Local Strategic Partnership - which sits at the head of the chain of accountability for outcomes across a local area.

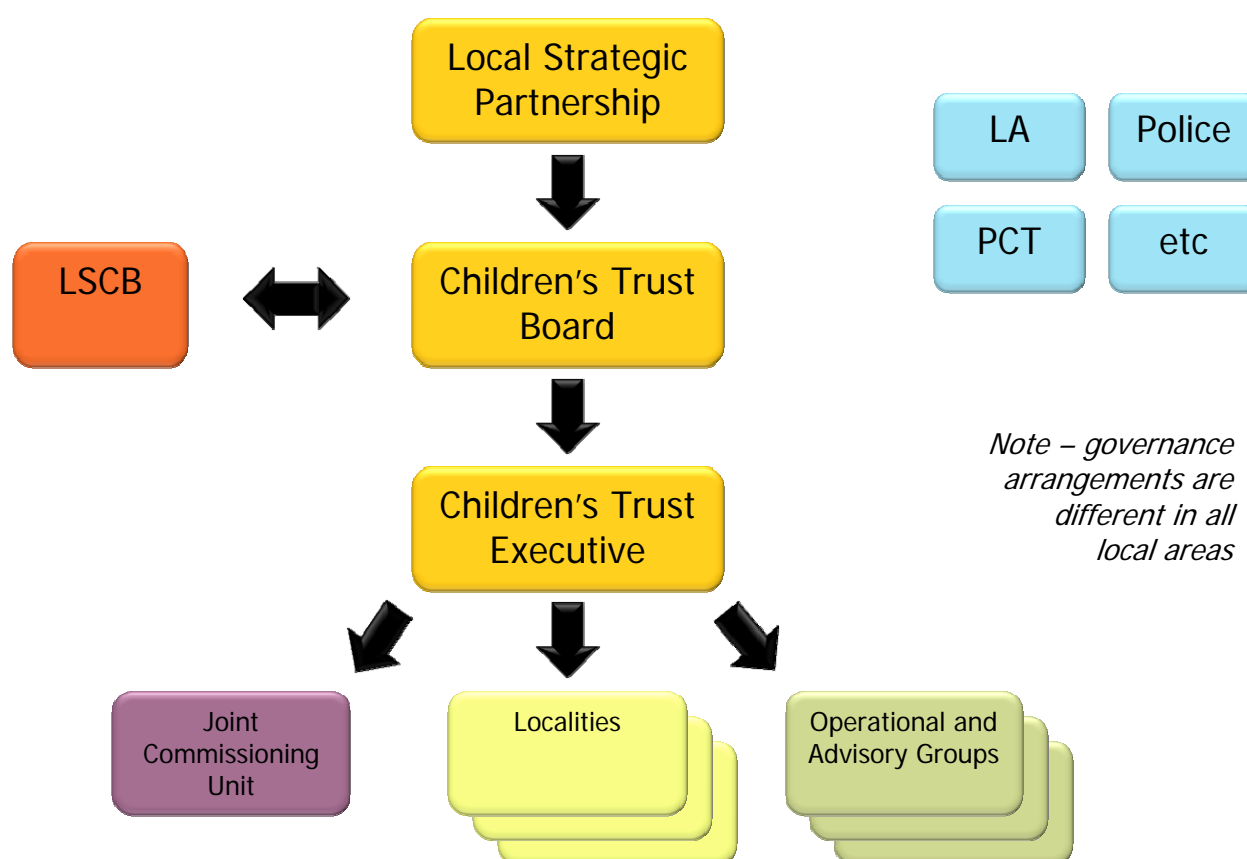
<sup>2</sup> See I&DeA website at: <http://makingendsmeet.idea.gov.uk>

Drawing on Children's Trust responses to piloting The Self Analysis and Planning materials, three development areas stand out as being particularly significant in the development of good governance arrangements for Children's Trusts and the commissioning of services within them:

- Efficient and clear structures for delivering an outcomes-focused Children and Young People's Plan.
- Outcome-focused terms of reference for the Children and Young People's Trust Board and other key bodies.
- Reporting arrangements that will enable the Trust Board and those tasked with delivering the priority outcomes to monitor the extent to which they are achieving these.

### Clear and efficient structures

For governance arrangements to be effective, Children's Trust Boards need to be clear about their role and their relationship with the key partners and structures within the local authority area. The following diagram shows a pared-down example of the emerging structures:



At the heart of this model are two key groups: The Children's Trust Board and the Children's Trust Executive.

The main role of the Children's Trust Board is to develop the overarching vision for children and young people's services and to hold key partners to account for its delivery. Outcomes for local children and young people as outlined in the Children and Young People's Plan should be consistent with other local strategies and refer explicitly to how partners intend to

reduce the gaps in outcomes between the most vulnerable and the majority of local children<sup>3</sup>. Even where there is agreement at Children's Trust Board level about the outcomes it needs to focus on, more commitment often needs to be made to ensuring these outcome priorities are translated into effective joint commissioning plans. Many Children's Trusts are still working towards the goal of ensuring that these overarching outcome priorities consistently and successfully drive commissioning and service development agendas for all partners.

The Children's Trust Executive usually comprises a group of senior commissioners from within the Trust who meet together to take responsibility for driving commissioning activity to meet the priorities of the Children and Young People's Plan as well as the Local Area Agreement (LAA) and other major national programmes. The Executive should also have responsibility for 'signing off' joint commissioning intentions or decisions as well as taking stock themselves on performance against key priorities. However, the experience from a number of Trusts is that commissioning still happens in a relatively ad hoc fashion, isn't a joint endeavour across the Local Authority and PCT, and is disconnected from the overarching priorities for the Trust. In many cases, there is a need for greater direction for the co-ordination and management of commissioning activity.

'Relevant partners' are located around and below the two key groups on the diagram. They have a statutory duty to co-operate in order to improve the wellbeing of children, young people and families as well as to share resources and pool budgets as appropriate to achieve these ends. These now include almost all key professional stakeholder groups working in children and young people's services<sup>4</sup>. Even where governance arrangements have been worked out at Children's Trust Board level, often there's still a job to be done to ensure that all stakeholders fully understand and support the local arrangements (for example, in what circumstances can commissioning decisions and budgets be delegated to school clusters, and what kinds of commissioning activity will continue to be undertaken at a local authority-wide area?).

In practice, Children's Trusts will also need to determine and establish the relationship between the Children's Trust Board and the Children's Trust Executive to 'other' groups and partnerships, for example the Local Safeguarding Children Board (LSCB), The Crime and Disorder Reduction Partnership, and various working groups such as 14-19 Partnerships for whom service re-design may be part of their remit.

The following diagram taken from *Are we there yet?*, represents not only the relationship of the Children's Trust Board to the Local Strategic Partnership, but also the Children and Young People's Plan to the Local Area Agreement (LAA) and other key strategies for the local community and the focus for each element within the structure. Whilst it doesn't overtly recognise either groups undertaking commissioning activity or commissioning strategies (the focus is mainly on service delivery bodies and plans), it does provide a clear representation of the position of the Children and Young People's Plan within the hierarchy of local strategic plans and the Children's Trust Board as a 'thematic partnership' of the LSP.

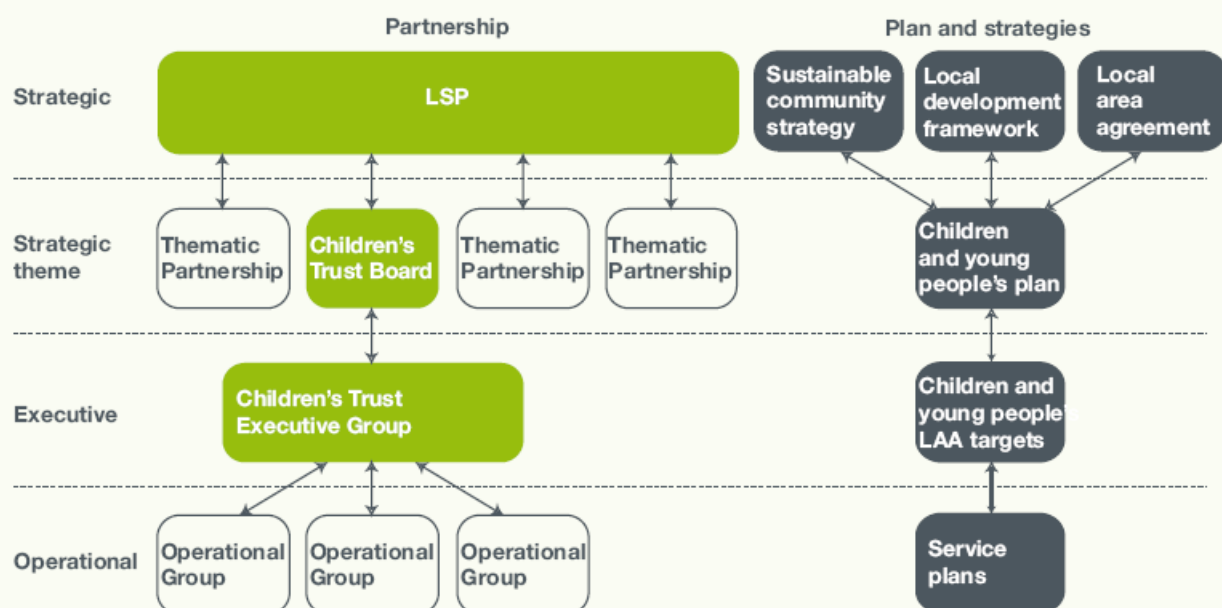
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<sup>3</sup> Standards taken from The Audit Commission 'Are We There Yet' Self Assessment Tool (2008)

<sup>4</sup> The new members include: schools, colleges and Job Centre Plus

## Aligning LSP and children's trust arrangements

Bringing a consistent and integrated approach



### Outcome-focused terms of reference.

Well thought through terms of reference for all the key groups within Children's Trusts will establish firm foundations and avoid misunderstanding, duplication of effort and confusion. Terms of reference are the documents that describe the purpose and powers of each group and guide its members to a shared understanding and agreement about how it will work. Research<sup>5</sup> shows that effective inter-agency partnerships work best when everyone is clear about the role and purpose of the group. Ineffective groups spend too much time talking about process, strategy and uncertain futures and too little time focusing on implementation and grass-roots innovation. Clear terms of reference for groups can help with continuous improvement and prevent groups slipping into bad habits<sup>6</sup>. They can also improve efficiency and reduce the cost and burden of partnership work.

These used to be lengthy legal documents that few people could understand. More recently groups have agreed one-page terms of reference including the level of detail perhaps described in the section above, which often mean very little and are useless in a crisis. Recent ombudsman reports have highlighted the need for better terms of reference for inter-agency work so that there is more clarity about accountability and responsibility in the event of public, staff or other grievance. Sample terms of reference for a Children's Trust Board and a local area group (locality team) can be found at annexes 1 and 2.

### Effective reporting and performance management arrangements

The Children's Trust Guidance (2008) gives the Children's Trust Board responsibility for ensuring that individual members are held to account for delivering improved outcomes outlined in the CYP Plan. The Audit Commission Report *'Are We There Yet'* self assessment standards also include a very basic challenge for Children's Trusts to understand the extent

<sup>5</sup> See the OPM website for information regarding evaluations of LAAs [www.opm.co.uk](http://www.opm.co.uk) and the Department for Communities and Local Government website for evaluation of LSPs [www.communities.gov.uk/index.asp?id=1163002](http://www.communities.gov.uk/index.asp?id=1163002)

<sup>6</sup> Bad habits can develop because of poor chairing, variable attendance etc.

to which outcomes for children are improving. They also suggest that key partners within the Trust should use shared performance management frameworks to oversee and deliver better outcomes. At a basic level, these systems will need to be capable of systematically and regularly monitoring and evaluating the following across services and care pathways for individual 'client' groups:

- Commissioning and operational activity (outputs) against outcome priorities.
- Performance against outcome priorities over time (including a combination of 'hard' and 'soft' information about the impact of services).
- The views of children, young people and families as well as those delivering services.
- Budgets and spend on children's services.

Whilst the nature and style of performance information required for each forum within the system (for example: the Children's Trust Board, the Executive, individual agencies or teams) is likely to be different, there should be a golden thread running through that refers explicitly to the relevant overarching strategic priorities for children's services, and systems should be sensitive enough to enable all parts of the Trust to respond to issues, risks and challenges in a timely and effective way. Even where progress has been made with integrated commissioning in some areas, many Children's Trusts often continue to be challenged by the development of integrated performance management systems that:

- translate outcomes into performance measures and monitoring / reporting arrangements;
- are founded on a good understanding of how projects, programmes and teams contribute to overall improvement<sup>7</sup>;
- pay attention to processes and people; and
- make links with required performance measurement systems (the key new one being The Comprehensive Area Assessment<sup>8</sup>), and other clinical governance and quality assurance systems already in use within individual organisations.

## Support for integrated commissioning within Children's Trusts

The 2008 Children's Trust Guidance requires more robust arrangements to be put in place to support integrated commissioning across the Local Authority and PCT in particular, including two specifics:

- agreed approaches to joint commissioning (a framework); and
- a joint commissioning body 'of some sort'.

### Agreed Approaches to Joint Commissioning

The vehicle for developing and agreeing local approaches to or policy on integrated commissioning is described in a number of different ways across the country and in national guidance, including 'Commissioning Framework', 'Commissioning Agreement' and, unhelpfully perhaps, 'Commissioning Strategy'.

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<sup>7</sup> Many Trusts have used Mark Friedman's 'Turning the Curve' Results Based Accountability approach described originally in 'Trying Hard is Not Good Enough – How to Produce Measurable Improvements for Customers and Communities'.

<sup>8</sup> This new integrated performance monitoring regime is in place since April 2009 (information about it can be found on the Audit Commission website: <http://www.audit-commission.gov.uk>) and will focus on outcomes and how well local public bodies work with each other to achieve them.



The Commissioning Support Programme Self Analysis and Planning materials describe this kind of vehicle (herein described as a Commissioning Framework) as a tool for “describing how outcome priorities in the CYPP are translated into commissioning plans”. In practice, we have seen the development of Commissioning Frameworks across the country that incorporate some or all the following:

- A shared understanding – definition and scope of (joint) commissioning including multi-level commissioning (at the individual and operational level - how this should feed into strategic whole area commissioning and how this in turn links to strategy planning).
- Clarity about the extent to which and how commissioning decisions can be delegated (for example to locality teams, to schools and to children's centres).
- Clarity about the manner in which commissioning will be undertaken locally (e.g. using The DfES Framework for Joint Planning and Commissioning and DH World Class Commissioning model), and how strategic decisions are to be signed off. In some areas, Children's Trusts have combined the DfES/DCSF and DH models to create their own bespoke model.
- A 'rule book' for commissioning, including key commissioning principles or standards such as transparency of decision making, level playing field, evidence based, focus on better outcomes for children and young people, opportunities for children and young people and families to influence services, the expected style of partnership working with providers. In some more recent cases, these have made explicit links to World Class Commissioning competencies for commissioners across a range of organisations.
- Priorities for joint commissioning activity or 'joint commissioning intentions' over a period of time.
- Clarity about how elements of commissioning activity should be undertaken (toolkits) to ensure greater quality and consistency of approaches across the Trust, for example: how to develop a commissioning strategy; needs analysis tool; tendering toolkit. Again, some frameworks have linked these activity-based tools with the World Class Commissioning Competencies.

Recent national guidance now requires Children's Trust Boards to agree the framework<sup>9</sup>. Whilst a number of Trusts have undertaken considerable work to produce and agree a Framework, the challenge remains to ensure that all partners implement it in practice.

### A Joint Commissioning Body of Some Sort

The previous DfES guidance on this, 'The Framework for Joint Planning and Commissioning of Children and Young People's Services' (2005) suggested that Children's Trusts should have 'a single joint commissioning unit, possibly spread across locations, but working coherently together'. The more recent guidance is less specific but does make the requirement statutory.

Many Children's Trusts around the country have already begun or completed the process of determining what is required locally and re-distributing resources from within the PCT and local authority in particular to form such a 'body' or 'unit'. Even in the context of the new guidance, joint commissioning bodies or units continue to be very varied in size, composition and function across the country and even across comparator authorities. For example:

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<sup>9</sup> Children's Trusts: Statutory Guidance on inter-agency cooperation to improve well-being of children, young people and their families (November 2008) and Healthy Lives, Brighter Futures: The strategy for children and young people's health (2009)

- Some are tasked not only with commissioning but also with supporting strategic planning (including specifically the development of The CYPP), or supporting joint commissioning adults and children's services.
- Some are led by a co-funded 'joint commissioning manager' who has access to a range of resources within a centralised team, whilst other units consist only of one or two commissioners working with a range of 'other' commissioning or contracting officers dispersed widely across the Trust.
- Some PCTs and Local Authorities have entered into a Section 75 Agreement to fund the appointment of joint posts within commissioning units, whilst others rely on the secondment of staff or 'virtual' team working. Where teams are dispersed or organised on a virtual basis, considerable attention will need to be given to leading and assuring the quality and coherence of commissioning activity.
- Many commissioning support units are tasked not only with improving outcomes for children and young people, but also explicitly with making efficiencies on an 'invest to save' agenda where the investment is in commissioning activity. Being able to demonstrate some level of efficiency savings in the short, medium and longer term is likely to be a key feature of joint commissioning units in the future.

Other future challenges for these bodies are likely to be:

- The drive towards commissioners working in actually or virtually integrated functions being able to hold 'in-house' providers to account and to commission across all kinds of service areas including those traditionally provided exclusively by in-house services<sup>10</sup>.
- Commissioners being asked to move away from some of the 'traditional' areas of commissioning activity into new and challenging areas such as the commissioning of school places; commissioning for 14-19 agenda provision; collaborative working with clinicians; promoting contestability and sustainability; and supporting commissioning at operational (school clusters, localities) or individual (lead professional) levels to meet the growing personalisation agenda. These will require a range of skills hitherto under-developed.

Potential functions for, and therefore roles within Joint Commissioning Units include:

- Supporting the development and performance management of The CYPP (needs analysis, consultation activities, developing an outcome-focused plan, developing and implementing effective arrangements for monitoring local performance against the Plan over time).
- Leading the development and implementation of commissioning strategies or plans based on priorities identified within The CYPP across the 5 ECM outcomes and as directed by the Executive. Key activities / roles within this include:
  - Scoping and planning the development of commissioning strategies or plans and bringing together key stakeholders to form Commissioning Strategy Steering Groups / wider Reference Groups or similar.
  - Developing the commissioning strategies or plans (through detailed needs and service analysis, analysis of national drivers and local priorities, analysis of

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<sup>10</sup> These challenges are outlined as expectations within the Children's Trust Guidance (2008)



performance, service and market mapping, engagement of existing and potential providers, engagement and involvement of relevant stakeholders including children and families in building consensus for change, and agreeing directions for change).

- Implementing commissioning strategies or plans, including: market shaping; pooling or aligning budgets; developing outcome-based specifications and/or contracts; applying disinvestment decisions; tendering; supporting the development of new processes or arrangements to support service re-design including in particular multi-disciplinary working or co-location of services; supporting the provider sector to respond to the commissioning agenda(s).
- Reviewing overall strategies and individual contracts or care pathways against priority outcomes and feeding this information into overall CYPP / LAA performance management channels; taking action to address poor performance; working with providers to respond to change and improve; and sustaining momentum for the delivery of change and engagement of key stakeholders; reviewing and adjusting strategic objectives as required.
- Supporting 'delegated' commissioning activity often undertaken at a sub-local authority / PCT basis for example supporting practice based or locality based commissioning or commissioning by schools / school clusters.
- Supporting commissioning activity undertaken by 'other' groups mandated to re-design services, such as the 14-19 Partnership or CYP Substance Misuse Group.
- Leading on or participating in regional commissioning activity.

In some areas, prior to re-organising, seconding or recruiting commissioning support staff into an integrated commissioning unit, has been helpful to undertake an audit of existing roles and skills across relevant agencies against a clear idea of or specification for the overall intended function of the unit. Auditing has enabled those leading these change projects to be clear what elements of commissioning activity are likely to be met easily by the existing workforce and where there might be gaps or development needs. In some local areas, there has been a very clear agenda around the need to strengthen commissioning activity which has led to considerable investment in numbers and skills for integrated commissioning units. A balance may need to be struck: a high level of investment in commissioning support resources may attract proportionately high levels of demand for efficiency savings; low levels of investment may result in insufficient or poor quality commissioning activity. Whatever the core size and experience levels within a joint commissioning unit, it is likely that some skills will still be in short supply and that investment will need to be made in the ongoing development of individuals and the team as a whole.

12 key skills for commissioners working within integrated commissioning units are<sup>11</sup>:

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<sup>11</sup> These skills form part of the Commissioning Support Programme's individual skills assessment framework that is available to all children's services commissioners at [www.commissioningsupport.org.uk](http://www.commissioningsupport.org.uk).

Skill	Detail
Negotiation and influencing skills	Particularly for the development and 'sign off' of commissioning strategies or plans and for working with providers (including the full range of in-house providers) or other stakeholders / partnerships across the local area or region / sub-region.
Analytical skills	Not only to undertake individual activities for example to build a commissioning strategy or CYPP (such as reviews of local needs, services, or research / best practice) but including complex overall analysis leading to recommendations for change and risk analysis, or specialist approaches such as health impact assessment or clinical audit.
Project management and leadership skills	In particular for individuals leading on complex change projects / commissioning strategies that involve a number of budgets and work streams (for example 14-19 commissioning) and a degree of partnership or Steering Group control.
Ability to understand and work with the political aspects of change	Commissioning activity and decision making is rarely undertaken in a political vacuum. Commissioners need to understand and manage the external and internal operating environment including the influence of organisational culture.
Skills in understanding and managing budgets / service costs	in the context of a wide range of public care services. Specialist skills are required for the development and management of pooled or aligned budgets.
Market management skills and conflict resolution	Including skills relating to stimulating the market and negotiation. Local authorities and PCTs are increasingly seen as being 'place shapers' rather than providers of local services.
Innovation skills	Often, there are a number of 'solutions' for service re-design through commissioning. A good commissioner will work with others to develop innovative solutions where appropriate and / or to encourage providers to innovate to meet agreed outcomes.
Consultation / stakeholder involvement skills	Including specialist skills for involving children and young people and families, or involving children with disabilities or vulnerable groups, and skills for consultation and collaboration with professional groups including clinicians or with the third sector.
Understanding of contracts and specifications and how to develop, review, and manage them.	A thorough understanding of the nature and strengths and weaknesses of particular types of tendering approaches, contracts and specifications, including outcome-based approaches (when and how to apply outcome-based contracting and the value of these approaches). Skills in applying these in practice.
Understanding of 'the field' - children's services.	Children's services include all those involved in delivering good outcomes across the 5 ECM outcome areas.
Advisory and support skills	For example to support delegated commissioning by schools or locality-based partnerships or (budget-holding) lead professionals, and to ensure that commissioning at this level is likely to support overarching strategic priorities for the community. Support for individuals commissioning at this 'operational' or 'individual' level may include attention to integrated processes such as common assessment or team around the child arrangements as well as more recognisable commissioning activities.
Ability to work in partnership and in teams	to deliver on commissioning projects, for example with members of procurement functions, or colleagues from across The Trust. Commissioners will need to have a good understanding of the role they need to play and how best to undertake it in all of these teams.

Lastly, in order to achieve some degree of coherence and quality assurance of team activity (whether or not the unit is virtually or actually integrated), unit managers will need to pay continued attention to the development of tools and approaches that build on best practice and promote good quality practice with particular attention to the areas that can prove to be more challenging. Managers of integrated commissioning units are also increasingly likely to be required to understand and publicly demonstrate cost savings and improvements in outcomes linked to commissioning activity and to be able to draw in or re-direct resources for the team to deliver on key service re-design agendas. Example leadership or quality assurance activities for unit managers include:

- Being clear about and promoting 'standards' for key commissioning activities and guidance relating to undertaking specific roles, for example standards and guidance for leading the development of strategy; for the involvement of children and families; for anticipating and managing decommissioning / disinvestment; for managing or stimulating the market; or for supporting commissioning by localities or by individual GP practices / practice clusters.
- Being clear about the way in which the team or unit will draw upon expertise from 'outside', for example from central procurement or legal teams – and the extent to which these inputs will be advisory only or have the potential to override team decisions.
- Developing generic and service-area specific tools, for example: commissioning strategy planning tool or development pathway; commissioning strategy template; needs analysis templates; guidance on tendering; guidance on pooling of budgets.
- Developing quality assurance and staff support systems, including for the sign off of draft strategies and other materials; induction, supervision, or mentoring arrangements.
- Promoting and providing development opportunities to meet gaps in skill sets for individuals or the team as a whole, for example to embed outcome-based commissioning.

**Commissioning Support Programme and Oxford Brookes University**  
September 2009

## Appendix 1

### Sample Children's Trust Board Terms of reference<sup>12</sup>

#### 1. Purpose

1.1 To improve the well-being of all the children and young people who are born, raised, educated or find work within *Anyplace*<sup>13</sup>, by working together to achieve the five outcomes which matter most to children, young people and their families:

- being healthy
- staying safe
- enjoying and achieving
- making a positive contribution
- economic well-being.

1.2 *Anyplace* Children's Trust Board exists to improve outcomes for children in the borough of *Anyplace* by commissioning services from within the children's service authority, NHS, voluntary and community sector and other service providers in order to meet needs, maintain high standards and value for money and keep children safe from harm.

#### 2. Function

2.1. The Children's Trust Board is a commissioning partnership and will improve outcomes for children and young people by working with and through those who provide services including schools, hospitals, community health services, educational support teams, CAMHS, school improvement services, social services teams, YOTs, Connexions, Sure Start children's centres, ambulance services, police, housing associations, voluntary agencies and business and more.

2.2. Commissioning involves measuring and agreeing need, understanding expectations, agreeing priorities and plans, measuring and reviewing performance and holding providers to account in order to improve outcomes.

2.3. Commissioning includes influence and negotiation, agreement of service plans and service-level agreements, contracting, grant making and procurement of service.

2.4. It is 'developing an overall picture of children's needs within an area and developing provision through public, private, voluntary and community providers to respond to those needs'.

#### 3. The Children's Trust Board will:

3.1. Develop the children and young people's plan (CYPP) and review it, amending it regularly to take into account changing needs, progress with priority schemes, new priorities and opportunities.

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<sup>12</sup> This sample terms of reference comply with the Good Governance Standard for Public Services – note that each CT Board will need to take their own legal advice about their terms of reference because local corporate requirements vary.

<sup>13</sup> pseudonym

3.2. Ensure that successive draft CYPPs are subject to consultation and that the annual calendar of meetings is designed to allow time for consultation through partners and other stakeholder groups.

3.3. Base decisions on systematic, objective research into needs and the evidence of performance rather than on the status quo, competitive bidding or short-term opportunism.

3.4. Take into account the requirements of central government and respond to external review and inspection.

3.5. Ensure that joint commissioning agreements between the PCT and the CSA are in place and regularly reviewed.

3.6. Ensure that mainstream and mandatory funds and additional funds such as LAA are used to improve outcomes for children, families and young people.

3.7. Maintain excellent relationships with providers including schools, community health services, the criminal justice system, youth services and the voluntary and community sector.

3.8. Ensure that all services for children and young people in *Anyplace* comply with the *Anyplace* commissioning standards and:

- i. promote social inclusion
- ii. aim for high standards and continuous improvement
- iii. involve children, young people, their families and carers in their development and delivery
- iv. are planned in partnership
- v. are equitable and non-discriminatory
- vi. are based on evidence and best practice
- vii. allow scope for innovation
- viii. promote family life through appropriate support and early intervention
- ix. demonstrate best value and effectiveness in improving the well-being of children and young people
- x. work closely with the Local Safeguarding Children Board, accepting their advice to ensure that all agencies working with children are applying effective processes and the highest possible standards to keep children safe from harm
- xi. ensure that children, families and young people are involved in making decisions about their lives and the support they need – through all those who work with children, families and young people in *Anyplace*
- xii. ensure that services work appropriately with the diversity of families in *Anyplace* so that there is equality of access and opportunity
- xiii. work in accordance with the *Anyplace* Plan, CYPP and Community Strategy and report to the *Anyplace* Partnership (LSP) as required
- xiv. meet at least four times a year.

#### 4. Membership

4.1. The following people will be members of the Children's Trust Board as representatives of commissioning partners:

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4.2. The following people will be members of the Children's Trust as representatives of provider agencies:

- Manager of children's community health services,
- representatives of CAMHS,
- GPs representative
- children's social care,
- secondary schools,
- primary schools,
- special schools,
- children's centres,
- early years,
- voluntary and community sector (via the Children and Young People's Forum of CVS),
- police,
- YOTs,
- youth services/Connexions,
- housing,
- sports and leisure.

4.3. Members will represent their agencies and will also bring experience and knowledge about other sectors and organisations. However their primary duty is to act in the interest of children and young people in *Anyplace*.

## **5. Quorum**

5.1. At least 75% of the members of the Children's Trust Board including at least 75% of the commissioning members, unless the Chair has spoken with members and takes into account their opinions about matters on the agenda.

## **6. Chair**

6.1. The chair of the Children's Trust Board will be [name/position] until [date] when the CHILDREN'S TRUST Board will appoint another chair. The deputy chair will be [name/position].

## **7. Budget**

7.1. Because financial management is a key part of good governance, decisions should not be made in the absence of budget information. Most of the resources under the control of the DCS and children's partnerships are earmarked and proscribed.

7.2. The Children's Trust Board will influence the way in which mainstream funding is used in order to improve outcomes for children, families and young people. This will include making plans for the integration and alignment of budgets including, where appropriate, preparation for Sections 10 or 75 budget pooling agreements.

7.3. The Children's Trust Board will influence the way in which mandatory pooled funds such as CAMHS, DAT, YOT and children's fund are allocated in order to improve outcomes for children, families and young people.

7.4. The Children's Trust Board will allocate pooled and other funds as they become available in order to improve outcomes for children, families and young people.



7.5. The Children's Trust Board may advise the realignment of resources where there is evidence that services are not contributing to the improvement of outcomes for children, families and young people, so that they can be discontinued and the resources reallocated.

7.6. The DCS will sustain a small budget for supporting the Children's Trust Board including funds for training and other costs.

7.7. If required, expenses for travel, child and elder care will be paid to ensure that partnership members are not discouraged from participating fully through lack of funding for out-of-pocket expenses. Disabled access to meetings is guaranteed. Assistance with communication will be provided if members have a sensory impairment. From time to time the chair may require participation at a training day or ask members to represent the partnership at meetings with stakeholders or make visits outside the area. The costs, including expenses, will be paid from the DCS budget for the partnership.

## **8. Children's Trust board support**

8.1. The DCS will provide support for the Children's Trust Board including administration, secretarial, agenda and reports.

8.2. The DCS will ensure support for the Children's Trust through the Children and Young People's Trust Board (CYPTB).

8.3. The DCS commissioning and partnerships team will be responsible for the development of the CYPP including liaison with LSPs, local authority and other sub-regional and local bodies to obtain information about local needs and priorities for inclusion in the plan.

8.4. The DCS commissioning and partnerships team will monitor the performance of service providers in improving outcomes for children, families and young people and report to the Children's Trust as required. They will disseminate information in order to ensure that partner agencies are kept informed and that they in turn communicate effectively about progress.

8.5. Agenda, minutes and papers will be circulated to Children's Trust members in advance and will be public documents for widespread circulation and discussion. Copies of agenda, minutes and papers will also be sent to others on an agreed mailing list to keep them informed. In the unlikely event that confidentiality is required – by virtue of individual rights and confidentiality, or in the public interest – then papers will be so marked and destroyed at the end of the meeting.

## **9. Expectations of chair and board members**

9.1. Read papers, respond to emails and other communications and keep up with what is going on.

9.2. Attend meetings; if unable to be there contribute in writing or over the phone when apologizing. Be on time and do not leave early.

9.3. Participate in meetings in two ways – primarily as a member of the partnership in the interest of children, families and young people in the borough but also representing the views of providers, children, families and young people themselves and other stakeholders and networks.

9.4. Representing and promoting the CTB to the LSP, DCSF, inspectors and other networks.

9.5. Participating in partnership events and training

9.6. Contribute to the development of the Board as an effective, efficient and inclusive team including raising concerns with the chair if necessary.

## **10. Probity and declaration of interest**

10.1. The Nolan principles of public life will apply. The Children's Trust will hold a public record of members' interests which members can amend at any time and which will be reviewed annually.

10.2. High standards of behaviour are expected of all members who will be expected to declare any interest they may have in anything under discussion and leave the room if asked by the chair. This would not normally include interests of a strategic or general professional nature that would contribute to and enrich partnership work. However it would include, for example, a discussion of business or employment opportunities affecting the individual or her/his close family, or any other matters where there is any potential for personal gain. In these situations people will be expected to leave the room.

10.3. Members will also be expected to declare any other board or committee membership, apart from the LSP or local authority.

10.4. The rule is, as always, is 'if in doubt declare openly and immediately'.

## **11. Decision-making**

11.1. Consultation will be built into the development of the CYPP and other work of the Children's Trust through discussion with stakeholders, use of their statistics, information and research and submissions. Before going to the partnership, initial drafts will have been widely circulated for comment by stakeholders.

11.2. Plans and decisions will then be discussed, and normally be agreed, and then stakeholders will be informed.

11.3. If after full debate the chair feels that the partnership/board cannot come to an acceptable decision at that meeting then s/he would normally postpone a decision while further information is obtained and to allow further consideration by stakeholders and partners.

11.4. The Board will then try to reach agreement through compromise, consensus and if necessary voting as the chair thinks fit. In the event of a tied vote the chair may use his/her casting vote.

11.5. In exceptional circumstances a matter may be referred for decision to the lead member or LSP, whichever is the more appropriate.

## **12. Key relationships and accountabilities**

12.1. The Children's Trust Board will work within the strategic framework agreed by the *Anyplace* partnership and cabinet.

12.2. Both the PCT board and the cabinet/executive of the local authority have agreed to delegate to the Children's Trust Board responsibility for the governance of commissioning for children's services, including shifts in investment, service improvement and standards. Both will set the overall budgets for children's services annually and monitor budget expenditure accordingly during the year. The PCT board and the cabinet will expect to approve the CYPP and to receive an annual report of progress. They will also expect to receive reports on, and approve, major changes to the plan or significant service reviews.

12.3 Local government has multiple roles in partnerships. The Children's Trust acknowledges these roles including the statutory duty to lead the Change for Children agenda and keep children safe from harm, and the duty to coordinate commissioning and the provision of a range of essential services.

12.4. The Children's Trust Board will delegate some commissioning responsibilities to subsidiary partnerships and teams, as follows:

- to the PCT. Unless and until a Section 75 agreement has been signed, the PCT has responsibility for commissioning healthcare for children, families and young children provided by acute hospital trusts, through GPs (practice-based commissioning) and community healthcare services.
- In some places, some community healthcare services such as health visitors, school nurses, speech and language therapists will be commissioned directly by the PCT on behalf of the Children's Trust or directly by the Children's Trust and will not go via fund-holding practices.
- to children's social care teams or specialist teams for services for children in care and children's workforce development
- to locality partnerships for additional and targeted services
- to schools, school clusters and children's centres for universal services
- to the teen pregnancy, DAT, YOT, CAMHS, Connexions commissioning partnerships
- commissioning services which will improve specific outcomes in these areas

12.5. The Children's Trust Board will oversee the relationships between commissioners and those providing children's services, ensuring that they all contribute to implementing the CYPP, maintain standards and improve children's lives. All service providers (local authority, NHS, housing associations, third sector, self-employed individuals) will be sent a letter each year, confirming the agreement with the Children's Trust, and will be expected to report on performance accordingly.

12.6. In order to ensure the implementation of the CYPP the Children's Trust Board will measure and manage the performance of providers (within the authority, NHS, schools and other external providers) in order to ensure that outcomes for children, families and young people improve.

12.7 Voluntary and community agencies provide a range of services for children, families and young people. Contracts comply with the voluntary sector compact.

### **13. Delegation**

13.1. The Children's Trust Board will devolve responsibility for ensuring the delivery of improved outcomes for children, families and young people to X subsidiary partnerships and the Local Safeguarding Children Board. The Children's Trust Board will agree the terms of reference for these groups, which will include agreed commissioning standards, and receive reports at least once a year.

13.2. The Children's Trust Board will also establish and oversee area or locality networks as and when these are established.

### **14. Review**

14.1 The work of the Children's Trust Board will be subject to regular review, taking into account stakeholder experience. The Children's Trust will be successful if it contributes to

improving outcomes and to developing and implementing the CYPP. It will succeed by achieving credibility with its members and partners (within children's services and beyond in housing and the criminal justice system, etc.) and is able to attract additional funding for work with children and young people in *Anyplace*, ensuring that children's services are popular and well understood by service users and receive high scores after inspection.

## 15. Signatures

## Appendix 2

### B Local Area Group

#### Terms of Reference for B Local Area Group

##### 1. Accountable Body: X Borough County Council

##### 2. Priorities

- 2.1 The B Local Area Group will ensure that the Children and Young People's Partnership is informed of area and locality based priorities in the planning and commissioning of services. These priorities will be based on a comprehensive local needs analysis
- 2.2 The B Local Area Group will take on devolved responsibility for the commissioning of services at a local level when commissioning, governance and accountability arrangements are finalised.
- 2.3 The B Local Area Group must ensure that it has effective mechanisms for consultation involving children, young people and families in the design and delivery of services.
- 2.4 The B Local Area Group will work with local partners to ensure improved service people consistent with the local sustainable community strategy.
- 2.5 The B Local Area Group will set a programme of work based on the identification and prioritisation of local issues within a strategic framework established by Children and Young People Partnership.
- 2.6 The B Local Area Group will have a dual reporting role to the Children and Young People's Partnership and to the Local Strategic Partnership (B Communities Strategic Partnership). In that regard the Chair or representative of the B Local Area Group will be invited to attend the CYPP as an observer.

##### 3. Membership

- 3.1 To ensure effective representation agency representatives will have decision making authority or delegated decision making authority. They must also have the ability to directly commit resources or to influence their deployment within reason.
- 3.2 Membership should include:

##### Children's Services Authority

Assistant Director	-	Voting Member
Member of X Borough County Council	-	Voting Member

##### District Council

Children's Lead	- }	
Or	- }	
Children's Champion	- }	Voting Member
Or	- }	
District Councillor	- }	

##### Schools

Representative from X Town extended	- }
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Schools Network	- }	Voting Member
Representative from Y Town extended	- }	
Schools Network	- }	Voting Member
Area Manager – Youth Offending Team	- }	Voting Member
Area Manager - Family Services	- }	Voting Member
Area Manager - Social Care	- }	Voting Member
Area Manager - Youth Services	- }	Voting Member
Area Manager – Health	- }	Voting Member
Area Manager - Connexions	- }	Voting Member
Area Manager – Police	- }	Voting Member
Representative – Voluntary Sector	- }	Voting Member
Representative B LSP	- }	Voting Member
(The chair or his nominee)		

Other representatives, after obtaining the permission of the Chairman and Voce Chairman, can attend the meetings as non-voting members.

At some time in the future, procedures should be put into place for parents and young people to be voting members of B Local Area Group.

### 3.3 Chair

Responsibilities:

- 3.3.1 Liaison with LAG coordinator re:
  - Agenda setting
  - Administration of meeting/minutes etc
  - Organisation of venues
- 3.3.2 Agree draft minutes
- 3.3.3 Ensure own impartiality
- 3.3.4 Time management of the meeting
- 3.3.5 Ensure objective fair debate
- 3.3.6 Ensure aims of the agenda are met
- 3.3.7 Summarise the agenda points
- 3.3.8 Conflict resolution

NB: It is recommended for consideration that due to lines of accountability for the Local Area Groups and to ensure impartiality the County Council Member is nominated for election as chair or vice-chair.

### 3.4 Election of Chair and Vice-chair

Prior to the election the Local Area Group shall determine the date on which the term of office of the Chair and Vice-chair shall end which shall be either –

- 3.4.1 The first meeting of the Local Area Group from September of each year or;
- 3.4.2 Not less than one year from the date of his/her election.

In the event of more than one nomination there will be a secret ballot.

- 3.4.3 Election of Chair will take place annually
- 3.4.4 The chair should be democratically elected
- 3.4.5 Election of Vice-chair will take place annually
- 3.4.6 The vice-chair should be democratically elected



- 3.5 In the event of non-attendance of either the chair or vice-chair at any meeting, the meeting will, as a matter of urgency and as first item on the agenda, elect a chair for that meeting only.

All members are expected to contribute their agency/sector's experience and expertise to the Local Area Groups.

All members must register relevant interests in the register of interests.

### 3.6 Attendance at Meetings

- 3.6.1 Members will be expected to attend every meeting
- 3.6.2 Members will be expected to sign the 'Meeting Attendance Sheet'

### 3.7 Non-attendance at Meetings

If a member of the group cannot attend a meeting, they ought to

- 3.7.1 Inform the Partnership Support Team
- 3.7.2 If possible, Nominate a colleague who will have decision making authority or delegated decision making authority to do so. They also ought to have the ability to directly commit resources or to influence their deployment within reason.
- 3.7.3 If a member of the group misses a meeting or sends no apologies or a replacement officer, the Partnership Support Team will request an explanation.
- 3.7.4 If a member of the group misses two meetings the Partnership Support Team will consider writing to that member's Chief Officer requesting a replacement.

### 3.8 Membership and representation will be supported by the following mechanisms;

- 3.8.1 Register of attendance and procedure for non attendance
- 3.8.2 Democratic process for the election/selection of members
- 3.8.3 Induction Briefings for new members
- 3.8.4 Induction information pack for members
- 3.8.5 Buddy Scheme
- 3.8.6 Communications Strategy
- 3.8.7 Review of the Partnership Agreement

## 4. Resignation of a Member of the Local Area Group

Resignation by a member of the group should be by letter to the Chairman of the B Local Area Group with a copy to the Head of the Partnership Support Team.

## 5. Quorum

For a meeting to be quorate the meeting must contain 50% of the voting members.

## 6. Frequency of Meetings

B Local Area Group will hold meetings every 2 months and may hold other meetings as necessary or convenient.

## 7. Decision Making Procedures

The B Local Area Group will operate wherever possible on a consensus basis

- 7.1. Each voting member will have one vote

- 7.2. Voting by a show of hands will be needed on decisions that commit finance and in exceptional circumstances, where a consensus cannot be reached. When voting takes place there will be equality of votes permitted amongst those present with voting rights. In the case of a tied vote on any question, the chair of the meeting will have a second or casting vote.

## **8. Conflict Resolution**

If any dispute or difference arises between B Local Area Group Members about the decisions of the meeting or on any matters arising from these decisions the group will collectively take all reasonable steps within the powers available to its members to resolve it. If the dispute or difference cannot be resolved within the group it will be referred to the CYPP to be resolved.

## **9. Agenda Items**

- 9.1 Agenda items will be submitted in writing to the Partnership Support Team no later than 14 days prior to the meeting.
- 9.2 Agenda items must reflect the workplan for the B area group and the chair will ultimately decide on items to be included on the agenda following a briefing from the Head of the Partnership Support Team and relevant officers as appropriate.
- 9.3 An item can only be put on the agenda if a decision needs to be taken.
- 9.4. Any item submitted for information for the members of the Group must be submitted on the appropriate template to the Partnership Support Team no later than 14 days prior to the meeting in order that it can be circulated to the members of the group with the agenda and relevant papers.
- 9.5 Any reports submitted for discussion/decision must be on the appropriate report template.
- 9.6 At the discretion of the Chair, items of urgency or important items for information may be included on the agenda.
- 9.7 There will be a standing item on the agenda to allow members to raise matters of concern. Due notice should be given to the Chair whose decision on whether to allow the member to raise the matter is final. Normally considerable flexibility will be allowed but the Chair retains the authority to limit or avoid discussion if he/she feels it is appropriate for good conduct of the meeting and is in the best interests of all other members so to do.

## **10. Local Area Group Partnership Support Team Role**

### **Partnership Support:**

Head of Partnership Support  
Partnership Officer (Local Area Group Co-ordinator)  
Local Area Group Administrator  
Communications Officer (as required)

- 10.1 Group Members will receive copies of the agendas and supporting papers 7 days prior to the meeting
- 10.2 The minutes of the previous meeting will be circulated 7 days after the meeting
- 10.3 Meetings will be arranged with any new members for induction purposes
- 10.4 Induction Packs will be given to all members
- 10.5 The attendance register of meetings will be kept by the Partnership Support Team
- 10.6 Non-attendance of members of the group at meetings will be inquired into by the Partnership Support Team.

## **11. Review of Terms of Reference**

Terms of Reference will be reviewed on an annual basis.