

**A FRAMEWORK FOR MENTAL HEALTH SERVICES IN SCOTLAND
SECTION 1. PROCESS ELEMENTS**

JOINT COMMISSIONING^{1, 2}

Service Element	Description of Needs	Ways in Which Services May Respond
<p>Joint Commissioning</p>	<p>There is a need for:</p> <ul style="list-style-type: none"> health (including primary care), social work, housing, education and other local agencies to co-ordinate their commissioning, and to take joint responsibility for translating strategy into action; a mechanism to achieve changes/improvements in services and accommodation that agencies cannot achieve on their own; the development of coherence at all levels of commissioning; all agencies to commit their resources to a “shared pot” for allocation by joint decision. <p>Joint commissioning is an important mechanism for ensuring that inter-agency plans are translated into effective action, so ensuring improved and better integrated services and accommodation for the people who receive services and their carers.</p> <p>Establishing a joint commissioning team may require addressing:</p> <ul style="list-style-type: none"> the impact on the individual commissioning capacity of each organisation in the joint commissioning team; the extent to which NHS and social work staff operate as a joint team; the role and relationship with GPs; the opinions and aspirations held by locally elected members; accountability may be complex, particularly in financial terms; the linkage between the operational and strategic aspects of commissioning. <p>Joint commissioning:</p> <ul style="list-style-type: none"> delivers a “seamless” service from the perspective of people who receive services and those who care for them; ensures service responses are based on the needs of individuals and not the service of the agency first contacted; secures a better picture of need, unhindered by organisational boundaries; 	<p>Effective joint commissioning requires the establishment of a joint body drawn from and accountable to the local agencies:</p> <div data-bbox="1254 367 2016 662" data-label="Diagram"> </div> <p>A service led by a joint commissioning team will be characterised by:</p> <ul style="list-style-type: none"> agencies sharing responsibility for overall strategy and its full implementation; joint agreement on which elements of expenditure to transfer to social work; joint agreement on responsibilities for provision of accommodation and associated support services, including funding; the health board retaining a commissioning capacity and skills, with a focus on ‘healthcare’; the development of complex inter-agency line management and financial accountabilities.

¹ “Commissioning Mental Health Services” (1996) Thornicroft and Strathdee, London HMSO

² “Population Needs Assessment in Community Care” (1996) Social work Inspectorate for Scotland HMSO

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JOINT COMMISSIONING (continued)

Service Element	Description of Needs	Ways in Which Services May Respond
Joint Commissioning (continued)	<ul style="list-style-type: none"> • avoids arguments about agency responsibilities; • ensures that services and accommodation reinforce each other's effect; • maximises value for money by co-ordinating purchasing power and securing a complementary pattern of services; • improves the efficiency of the commissioning process across agencies by reducing duplication of effort; • increases the ability to secure change in service patterns by co-ordinating purchasing power, together with expertise and innovative ideas; • enables authorities to jointly plan for future needs; and • reduces the opportunity for authorities to "cost shunt" service responsibilities. 	