



2 March 2021

## New commissioning powers for mental health trusts

As part of the New Care Model (NCM) initiative to improve the delivery of a range of specialist mental health services, mental health trusts will soon begin to take commissioning responsibilities away from NHS England.

Beginning with adult low and medium secure mental health services, CAMHS Tier 4 and adult eating disorder inpatient services, by the end of 2023/24 provider collaboratives will cover the whole country and the scope will have extended to include all specialised mental health, learning disability and autism services.

The changes are designed to minimise inpatient admissions and keep those that are necessary as short and close to home as possible, which can only be a good thing.

But commissioning services is very different to providing them, requiring different skills and a different mindset. And it's not just commissioning that mental health trust board members need to understand. In many cases the waters will be muddied by the services being commissioned and provided by the same trust, often in alliance with other providers. To manage these potential conflicts of interest, it's essential that boards consider what this means for the way they operate.

Many mental health trust board members will have little or no commissioning experience moving into this complex and nuanced new model. As a commissioning body, trusts will need to think further ahead, they will need to consider value for money in a way they might not have before, and they will need to ensure they have a deep understanding of the needs and priorities of their local community. But how do they do all that? And what knowledge and skills should they be working to acquire now to prepare themselves for the big changes ahead?

### Improving services for local people

These changes should represent a real opportunity to improve services for citizens by ensuring that services are arranged and delivered much closer to them – in a more holistic way than ever before and tailored more to their local needs.

# illuminations



In many places around the country, the work of broadening and deepening thinking about the provision of mental health services is already underway. At the Surrey Heartlands Health and Care Partnership, for example, a new virtual wellbeing and mental health interactive hub has already been launched, offering a one-stop-shop for people to discover what local support is available to them, including the services of third sector organisations such as Age UK, The Surrey Coalition of Disabled People and Community Connections. The Hub is a partnership project between Surrey Heartlands, Surrey County Council and Surrey and Borders Partnership NHS Foundation Trust.

## Governance changes

Underpinning all of this must be the structural and cultural changes that will be required to deliver the right outcomes. NHS England says: “There will be a need for commissioners to work more closely together, aligning their objectives with providers and taking a more strategic, place-based approach to commissioning.” But to achieve that goal, a lot has to change – and change pretty quickly.

So structures, mindsets and expertise will all have to change – but so will governance. Boards will need to ensure their governance structures are optimally set up to ensure they are receiving the information they need. This will include joint governance arrangements with other local mental health trusts.

This is a fast-changing landscape and no one can yet offer complete clarity about how to navigate it. But at the heart of it all lies an opportunity. Many people working in mental health have always felt excluded from the commissioning process – it has felt a little like a Cinderella service and trusts have felt rather hard done by. That may be starting to shift now but mental health trust boards must be prepared for the change by ensuring that they understand what commissioning is and how to do it.

To help boards make the most of this opportunity, GGI is hosting a webinar on Thursday 11 March when we’ll be exploring some of these questions further. We will also be issuing a report on this subject in the weeks ahead.

## Illuminations

- The changes ahead for mental health commissioning are the most significant in a decade; mental health providers will be assuming responsibility for commissioning – in many cases for the first time – and need to be thinking now about what this means.
- Priorities for immediate consideration include ensuring mental health trust boards have the right knowledge and expertise to guide them through the process of becoming commissioning bodies.
- Boards should be considering how their governance structures might need to be changed in order to accommodate joint arrangement

If you have any questions or comments about this briefing, please call us on 07732 681120 or email [advice@good-governance.org.uk](mailto:advice@good-governance.org.uk)