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Tusla’s Programme for Prevention, Partnership and Family Support:

Commissioning Work Package
Final Report

By Dr Aileen Shaw and Dr John Canavan
UNESCO Child and Family Research Centre, NUI Galway

SEPTEMBER 2018
Development and Mainstreaming Programme for Prevention, Partnership and Family Support

The Development and Mainstreaming Programme for Prevention, Partnership and Family Support (PPFS) is a programme of action being undertaken by Tusla, the Child and Family Agency, as part of its National Service Delivery Framework. The programme seeks to embed prevention and early intervention into the culture and operation of Tusla. The UNESCO Child and Family Research Centre, NUI Galway has undertaken an evaluation study focusing on the implementation of and the outcomes from the PPFS programme. The study’s overall research question is:

Is the organisational culture and practice of Tusla and its partners changing such that services are more integrated, preventative, evidence informed and inclusive of children and parents? If so, is this contributing to improved outcomes for children and their families?

The evaluation study has adopted a Work Package approach reflecting the key components of the PPFS programme. The five work packages are: Meitheal and Child and Family Support Networks, Children’s Participation, Parenting Support and Parental Participation, Public Awareness and Commissioning. While stand-alone studies in their own right, each Work Package contributes to the overall assessment of the programme.

This is the Final Report of the Commissioning Work Package

About the UNESCO Child and Family Research Centre

The UNESCO Child and Family Research Centre (UCFRC) is part of the Institute for Lifecourse and Society at the National University of Ireland, Galway. It was founded in 2007, through support from The Atlantic Philanthropies, Ireland and the Health Service Executive, with a base in the School of Political Science and Sociology, the mission of the Centre is to help create the conditions for excellent policies, services and practices that improve the lives of children, youth and families through research, education and service development. The UCFRC has an extensive network of relationships and research collaborations internationally and is widely recognised for its core expertise in the areas of Family Support and Youth Development.

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Introduction

1.1 Background to the Overall Study

The Development and Mainstreaming Programme for Prevention, Partnership and Family Support (PPFS) is a programme of action being undertaken by Tusla, the Child and Family Agency, as part of its National Service Delivery Framework. The programme seeks to embed prevention and early intervention into the culture and operation of Tusla. The UNESCO Child and Family Research Centre, NUI Galway has undertaken an evaluation study focusing on the implementation of and the outcomes from the PPFS programme. The study’s overall research question is:

Is the organisational culture and practice of Tusla and its partners changing such that services are more integrated, preventative, evidence informed and inclusive of children and parents? If so, is this contributing to improved outcomes for children and their families?


1.2 Background to Commissioning at Tusla

In 2014, Tusla, the newly established Child and Family Agency, responsible for improving well-being and outcomes for children, proposed the introduction of a commissioning model for children and family services in the Republic of Ireland. Among the functions set out for Tusla in legislation, the creation of the agency proposed a new framework for accountability in the use of resources; for financial arrangements between the agency and external organisations, including not-for-profit providers; and for non-financial service provision arrangements with other statutory bodies. The national policy framework for children and young people in Ireland, Better Outcomes, Brighter Futures, stipulated that Tusla must introduce the commissioning of services ‘by moving away from a grants system to outcome-based contracts, and offer support to build capacity within the children and youth sector to respond to the new approach’ (DCYA, 2014: 69). Subsequently, Tusla published the first nationally developed commissioning guidance and undertook to implement a three-year commissioning plan accompanied by a commitment to training and capacity-building activities, both internally and with external service providers, to function in this new environment. The guidance defines commissioning as ‘the process of deciding how to use the total resources available for children and families in order to improve outcomes in the most efficient, equitable, proportionate and sustainable way’ (Gillen et al., 2013: 1).

---

1 The creation of the agency brought together 4,000 staff who were previously employed in Children and Family Services of the Health Service Executive, the National Educational Welfare Board, and the Family Support Agency.

2 The Child and Family Agency Bill 2013 establishing Tusla set out the functions and standards associated with performance, transparency and accountability for the new agency.
The language of commissioning signalled a proactive role for Tusla in determining the basis for allocation as well as curtailment of resources to service providers. The approach identified in the guidance marked a ‘radical change to that applied previously by the HSE Child and Family Services’ (Gillen et al., 2013: 26). It stipulates that future commissioning of services will be informed by a consideration of evidence of both need and effectiveness, and where services are being commissioned ‘solely due to a historic anomaly’, this should be reviewed (Gillen et al, 2013: 19). The 2015–17 Corporate Plan stated that Tusla would use its commissioning function as well as its service agreements to ‘incentivise service providers to adapt and change, based on evidence and information about what is most effective in improving the experience and outcomes for children and families (Tusla, 2014: 39). Following international practice, the commissioning process outlined in the guidance encompasses a continuum of activities for identifying, meeting, and monitoring area-based needs (current and future) that takes place in collaboration with stakeholders. The agency’s plans for implementing a Commissioning Strategy included the establishment of a Commissioning Unit; the provision of guidelines and technical resources; development of local, regional, and national plans; and the enhancement of individual staff capacity through training and support.

**Objectives**

Against this background, as part of the Development and Mainstreaming Programme, Prevention, Partnership and Family Support (PPFSS) Programme, Commissioning Work Package, the UNESCO Child and Family Research Centre at NUI Galway undertook a research and evaluation study of Tusla’s Commissioning activities guided by the following objectives:

1. To determine whether Tusla’s service commissioning is increasingly rigorous and evidence-informed and if it privileges prevention and early intervention.
2. To establish the value of Tusla’s activities in increasing provider capacity to undertake evidence-informed commissioning for services.
3. To determine the impact on the service provision landscape for children and families.

**1.3 Summary of Tusla Activities Undertaken**

Over the course of the study timeline, Tusla’s Commissioning Plan has been an evolving one. An early-stage road map outlined a number of priorities over a three-year period to support a Commissioning infrastructure (Tusla, 2015a). These included a programme of activities across the following levels of activity:

**Governance:** Commissioning Support Unit; Single Commissioning Framework; Commissioning Plans; Provider Management Structures.

**Business Intelligence:** Service baseline information; Outcome framework; Cost modelling.

**Processes:** Service Arrangement/Commissioning Contracts; Annual commissioning cycle; Performance management and indicators.

**Business Support systems:** Provider portal; Online management of commissioning.

**People Management:** Training Needs Analysis and Delivery; Communications and Change Management.

These functions developed to varying degrees over a two-year period. In practice, the elements resourced reflected an emphasis on governance and process. Much of the focus concentrated on setting up dedicated commissioning governance mechanisms and structures aligned to Tusla’s new operating model and its commissioning priorities. Tusla also prioritised establishing standardised processes to support commissioning across the agency. In relation to the Business Intelligence components, initial work on the development of a baseline data tool to categorise the nature of spend was deferred until the Commissioning Unit was in place. Importantly, the Commissioning Support Unit, intended to be
operational by Q4 2015, was not established until Q4 2017 with the confirmation of the appointment of a Head of Commissioning. As a result, a number of scheduled activities did not take place or were deferred pending the appointment of dedicated staff and infrastructure in Tusla.

The pace of developments within Tusla has had implications for the ability of the Research Team to address the original research objectives for the Commissioning Work Package. These are discussed in the following chapter on methodology. However, in order to contextualise the nature of the report, a brief overview on the progress of Tusla’s Commissioning activities undertaken within the timeframe of our evaluation is provided below.

From 2015, Tusla committed to the development of a Commissioning Strategy. The 2015 Business Plan stipulated that commissioning services from external providers would involve moving from a grant-giving basis to a system of contracts and Service Level Agreements, as well as the alignment of commissioned services with the strategic priorities of the agency. The implications of a Commissioning approach ‘will mean that some services may need to be reduced or decommissioned entirely’ and linked this to generating savings (Tusla, 2015b: 37). Priorities for 2016 included implementing the commissioning approach to ensure that externally funded agencies, many of whom operated on the basis of renewable contracts, had Service Level Agreements in place by year end. A National Commissioning Advisory Group made up of individual representatives from community and voluntary sector organisations and The Wheel (that sector’s support and representative umbrella network), as well as Tusla operational staff, was established to share information and consult on the developing commissioning plans and strategy.

In 2016, Tusla began the first step to train internal staff on the commissioning approach and ‘provide support to commissioners regarding market facilitation and commissioning and produce market position statements’ for a selected number of areas (Tusla, 2016a: 63). This took the form of creating five pilot sites to support the roll-out of a methodology to develop area-based commissioning plans. The process, facilitated by consultants from the Institute of Public Care, Oxford Brooks University in the UK, involved the development of Area Commissioning Plans (originally called Market Position Statements) in five geographic areas and a national thematic Commissioning Plan for Domestic Sexual and Gender Based Violence Services. These activities were extended in 2017 to a further five sites, with completion due in mid-2018. A third and final phase will commence in mid-2018, thereby extending the development of a Commissioning Plan to all of the country’s 17 Local Area Management Catchments by the end of 2018.

Tusla’s Commissioning Strategy (2017a) outlined its intentions to advance commissioning practice over the next five years to deliver on the principles and priorities established for the newly forming Commissioning Unit. It specifies that commissioning applies to internally commissioned services as well as the €300 million allocated to external agencies from a total budget of €713 million in 2017. The development of the strategy was informed by earlier documents, including the aforementioned Commissioning Guidance (Gillen et al., 2013), a Commissioning Toolkit (Tusla, 2017b), national policy and legislation, the work of IPC, learning from the pilot Area Plans/National Plans, and consultation through the National Commissioning Advisory Committee. The strategy confirmed Tusla’s definition of commissioning outlined in the Guidance as well as an understanding of commissioning founded on the cyclical approach summarised as Analyse, Plan, Do, Review; see Figure 1 below:
Elements of the 2017 Strategy, in particular the adoption of a methodology associated with the cycle of commissioning, had been anticipated since 2016.

By Q4 of 2017, a number of key infrastructural requirements were in place. The final version of the Commissioning Strategy was disseminated to the community and voluntary sector through a number of information briefings across the country co-hosted by Tusla and The Wheel. This took place in association with the introduction of a new Service Agreement and Governance Framework developed over the preceding two years. The Head of Commissioning was appointed in Q4 of 2017, and a full staffing plan for the Commissioning Unit began at that time. The stated intent in the Corporate Plan 2018 for the full implementation of commissioning marks the completion of a period of planning and development of the infrastructure required for commissioning that took place between 2015 and 2017.
1.4 Report Scope, Limitations and Structure

This report presents the key findings, conclusions and recommendations from the Commissioning Work Package in summary form. As detailed in the methodology chapter that follows, the assessment is formative in orientation and relates primarily to activities undertaken in the period 2015-17. It includes a baseline study, separate data sets collected through Q1 of 2018 in relation to early implementation and capacity-building within Tusla, and initial quantitative data on spend. Also included are observation and documentary analysis to Q3 2018. In generating data, the focus has been on activities where the Research Team could follow a process to completion. For example, the first phase of training for the Area Commissioning Plans are included; the following phases, underway or in train at the end of 2017 were not. Importantly, and in consultation with the Expert Advisory Group, a follow-up to the baseline study was not conducted due to the early implementation of the Commissioning programme.

In documenting progress overall, the report acknowledges that at the time of writing, progress will have been made in relation to earlier stages for the delivery of Tusla's plans. Nonetheless, it draws on earlier data to illustrate the nature of issues that are likely to pervade in managing what is anticipated to be a complex next phase of implementation. In this context, they are identified as potential challenges to embedding the commissioning model. Likewise, at this early implementation stage, where a perception of positive impact on practice exists, primarily to Tusla staff, this is highlighted. A future priority would be to access the views of community and voluntary sector on the full-scale implementation of the commissioning cycle.

Overall, the Work Package can be characterised as between set up and implementation phase with fundamentals in place to build sustainability. In terms of the outcomes that can be drawn, little can be concluded in terms of the effect of Commissioning on the service delivery system.

The foundations have been laid for the achievement of a rigorous and evidence-informed commissioning approach, particularly in the form of organisational infrastructure, strategy and practice materials, and capacity within Tusla at area level. Such developments are explored in the report. The findings and recommendations are conceived to suggest areas to improve the impact of elements of the programme underway. Conclusions are drawn for consideration in terms of the long term sustainability of the Commissioning model and for incorporation by the newly-created Commissioning Unit.

Following this brief introduction, the report is in nine further sections. Next is an outline of the report methodology, followed by a summary literature review section that sets the conceptual context for the report. The following five sections (4 through 8) present report findings thematically under the headings: Understanding Commissioning; Commissioning Infrastructure; Capacity Building; Management of Funding Relationships; and Evidence and Outcomes. The findings are discussed in Section 9, and the report’s conclusions and recommendations are contained in Section 10.
Methodology

2.1 Study Design and Methodology
This section provides an overview of the methodology and study design used to evaluate the commissioning programme. As discussed in the previous chapter, the extent of activities undertaken by Tusla during the timeframe of the study has been less than originally intended. This has had an impact on the scale of research and evaluation activities undertaken for the Work Package. At the time of writing, key elements associated with the implementation of the Commissioning Strategy are in the planning stages and form part of the emerging workstream of the newly established Commissioning Unit. The end of the timeframe for data collection (Q1 2018) has limited our capacity to include several elements of Tusla’s evolving commissioning work plan within the scope of assessment.

Over the course of the study, the research design has been modified to reflect the direction taken within Tusla for the roll-out of its commissioning programme. Using a partnership approach, the Research Team has engaged with representatives of the commissioning staff in Tusla, including the Interim Head of Commissioning throughout the programme. Quarterly meetings were used as a forum for agreement on research focus, for sharing knowledge to inform the research design and agreeing the nature and scope of research outputs. As a result, the Research Team revised the objectives of the Work Package to align with new timeframes and the anticipated availability of data sources. Notably, the study aims were revised to incorporate a largely qualitative focus and to reflect a formative orientation in our evaluation.

Particular activities that have had dedicated resourcing by Tusla, and where the Research Team can make a degree of meaningful assessment, include:

- National Commissioning Unit (Structures)
- Guidance, technical resources, tools
- Systems for governance and accountability
- Area Commissioning Planning (Process)
- Management of Provider Relationships

2.2 Data Collection
As stated, the initial objectives of the Commissioning Work Package research and evaluation study, from which this report emerges, were:

1. To determine whether Tusla’s service commissioning is increasingly rigorous and evidence-informed and if it privileges prevention and early intervention.
2. To establish the value of Tusla’s activities in increasing provider capacity to undertake evidence-informed commissioning for services.
3. To determine the impact on the service provision landscape for children and families.

Within the context of Tusla’s evolving Commissioning activities, this study has generated a range of individual data components and assessment methods. Table 1 below outlines the nature of data collection associated with the Commissioning Work Package and the relationship of data types with the initial objectives.
Table 1: Summary Data Sources

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<tr>
<th>Source</th>
<th>Data Type</th>
<th>Research Objective</th>
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<td>Literature Review</td>
<td>Secondary analysis/UK-focused</td>
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<tr>
<td>Baseline Study</td>
<td>Qualitative interviews/focus on community and voluntary sector</td>
<td>2</td>
</tr>
<tr>
<td>Commissioning Plans/Phase 1 Review</td>
<td>Qualitative interviews/focus on Tusla commissioning staff</td>
<td>2</td>
</tr>
<tr>
<td>Common Data Collection</td>
<td>Qualitative interviews/commissioning general approach internal and external stakeholders</td>
<td>1-2</td>
</tr>
<tr>
<td>Spend Analysis</td>
<td>Quantitative analysis: Analysis of financial data on Tusla overall expenditure; Analysis of data from survey of funded organisations</td>
<td>1</td>
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<tr>
<td>Documentary Analysis</td>
<td>Commissioning Strategy, training materials, Unit planning, commissioning plans, Service Agreement and frameworks</td>
<td>2</td>
</tr>
<tr>
<td>Observation</td>
<td>Tusla training events internal staff/ information briefings with external providers</td>
<td>2</td>
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**Literature Review**

A literature review (Shaw and Canavan, 2016) sets out the conceptual orientation for the commissioning framework adopted by Tusla. It provides an overview of the theoretical basis and context for the operation of commissioning frameworks, identifies issues in implementation, and summarises the key messages from policy and practice across a number of jurisdictions.

**Baseline Study**

Objectives: Prior to the formal introduction of commissioning, this study was undertaken in order to provide a baseline upon which to interpret the experiences of community and voluntary sector stakeholders in engaging in the commissioning process (Shaw and Canavan, 2017). The objectives included documenting the experiences of a sample of service-providing organisations with respect to the prevailing grant and contract arrangements with Tusla, establishing attitudes to and awareness of the concept of commissioning, and establishing the readiness of the sector to engage.

Sampling: Participants were randomly selected out of a population of approximately 400 organisations grant-aided by Tusla in 2014. From the 2014 Tusla Grants Register, interviewees were divided into categories of spend according to size of funding and randomly chosen within these bands (see Table 2 below). The cohort of interview participants included representation from eight CEOs and 13 directors or managers of services. Four Tusla Area Managers took part in the study. Respondents quoted are referred to by number in this report.
Table 2: External Service Providers by Band

<table>
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<tr>
<th>Band</th>
<th>No. of Providers in Band</th>
<th>Organisations featured</th>
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<tbody>
<tr>
<td>Band 1: €2m+</td>
<td>10</td>
<td>3</td>
</tr>
<tr>
<td>Band 2: €1m–€2m</td>
<td>13</td>
<td>5</td>
</tr>
<tr>
<td>Band 3: €500,000–€1m</td>
<td>15</td>
<td>2</td>
</tr>
<tr>
<td>Band 4: €250,000–€500,000</td>
<td>40</td>
<td>2</td>
</tr>
<tr>
<td>Band 5: €20,000–€250,000</td>
<td>170</td>
<td>2</td>
</tr>
<tr>
<td>Band 6: &lt; €20,000</td>
<td>400</td>
<td>2</td>
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Data analysis: A qualitative approach using semi-structured interviews was carried out through a combination of in-person and telephone interviews conducted over a six-week period in spring 2016. The interviews were subsequently managed in the qualitative software database NVivo, checked for intra-coder reliability, and organised into the three core themes below:

- Levels of knowledge and understanding among external organisations of Tusla's commissioning approach, in both strategic and implementation aspects.
- The import of commissioning in the context of the overall management of funding relationships in place between Tusla and external providers.
- Working with evidence, evaluation, and performance-based systems in order to demonstrate outcomes.

Follow-up: The baseline study was undertaken with the intention of following up with participants within the timeframe for the overall Research and Evaluation Commissioning Work Package, with a further round of data collection planned to take place by Q4 2017. However, at that time, work was not complete in introducing the new Service Agreement or in disseminating the Commissioning Strategy and Toolkit. In consultation with the Expert Advisory Group overseeing the PPFS programme, the Research Team took the decision that a detailed follow-up would potentially duplicate the baseline findings. Rather, the Common Data Collection provided an opportunity to solicit views of stakeholders (external and internal) in relation to their broad understanding of commissioning and its impact (see Common Data below).

Commissioning Plans: Phase 1

As outlined in the Introduction chapter, the primary capacity-building activity undertaken by Tusla has been the provision of training to staff in developing the commissioning process through Commissioning Plans.

Objectives: The Research Team undertook an assessment of the experience of the six pilot sites selected by Tusla to participate in the Commissioning Pilot Programme (Phase 1) undertaken in 2016 with support from the Institute for Public Care (IPC) in the UK, known at the time as the Market Position Statement (MPS) process. Between January and March 2017, sites participating in the pilot programme were invited to take part in a semi-structured interview. Five of the six sites responded to the request. Between three and four individuals, including Area and Senior Managers and key personnel directly involved in the pilot programme, were interviewed from each site, with a total of 23 individuals participating.
The purpose of the interviews was to explore the process of using the Market Position Statement (MPS) methodology, developed by IPC, to determine current and emerging need and to manage future service provision in each area. Interviews focused on the following elements:

1. The role of information in the process
2. Tusla team and skill set
3. Stakeholder consultation
4. Strengths and weaknesses of the methodology
5. Reflections on implementing and sustaining the process

Data analysis and Follow-up: The emphasis was on generating learning to inform the development of Tusla's plans for extending the training to additional sites as well as sustaining capacity-building activities across all areas. Data was entered into NVivo and coded to reflect the five areas above. The findings from the data are presented in the form of an internal summary document provided to Tusla in 2017 in order to inform the subsequent two planned phases of training.

The report generated focused on the experiences of Tusla staff in the process of developing commissioning plans. It was intended that future research would examine the participation of the community and voluntary sector in commissioning planning in Phases 2 and 3 of the IPC training. However, these activities took place outside of the timeframe for data collection. Finally, in spring 2018, two of the original five sites participated in a brief follow-up telephone interview to ascertain the status of implementation of their Commissioning Plans.

Common Data Collection - Commissioning

Objectives: As referred to in the Systems Change: Final Evaluation Report on Tusla’s Prevention, Partnership and Family Support Programme, the evaluation of Tusla’s DMP: PPFS Programme at an overall level involved the undertaking of semi-structured qualitative interviews with key stakeholders involved in child protection and welfare and family support services in Ireland. The qualitative interviews sought to explore the overall implementation, sustainability and outcomes of the PPFS Programme within the Child Protection and Welfare System. The interview schedule contained questions that related to each of the Work Package areas which include: Meitheal and the Child and Family Support Networks, Children’s Participation, Parenting Support and Parental Participation, Public Awareness, Commissioning (which relates to this report) and Systems Change. Due to the scope of this research study and the number of respondents required to be interviewed across all Work Package areas, a common data collection process was developed by the UCFRC. This ‘Common Data Collection’ process was adopted to reduce the time burden on interview participants and enhance efficiency in the data collection process.

Sample and Recruitment: In sampling participants, the research team compiled a comprehensive list of relevant Tusla and non-Tusla personnel. The inclusion/exclusion of participants in this study was determined by their:

- In-depth knowledge of Tusla in terms of structures and operations;
- Knowledge of the PPFS Programme and its components;
- Willingness to participate in an interview.

In selecting research participants for this study, both purposive and random sampling methods were used. A purposive sampling method was used for the selection of participants from Tusla who hold key roles relevant to the PPFS Programme. Participants external to Tusla were purposely selected on the basis of their senior roles and level of engagement with the PPFS Programme. An alternate process was also facilitated in the event of selected interview participants being unavailable.

Due to the numbers in the key positions of Principal Social Worker and Children and Young Peoples
Services Committees, and in avoiding any potential bias, we adopted a stratified random sampling approach to select participants. Additionally, this process also ensured geographical representation in the selection process. The RAND function on Microsoft Excel was used for this purpose.

Once the list of interview participants was reviewed and finalised by both the research team and Tusla personnel directly involved in the PPFS Programme, 11 researchers from the UNESCO Child and Family Research Centre were assigned a list of respondents to be interviewed. Each interview participant received a standardised invitation email to participate in the study. In the emails respondents were provided with a Participant Information Sheet, Participant Consent Form and the list of interview questions to be asked. Research participants were given a two week period to consider and consent to the interview request and select a suitable date and time for the interview to take place. This timeframe was in line with ethical research practice and allowed participants the opportunity to consider the interview and discuss their participation with their employers/colleagues.

In total, 162 interview requests were issued to personnel in Tusla, external service providers and stakeholders. A response rate of 79% was generated and a total of 124 interviews were conducted, involving 128 participants as part of this study during the period September 2017 to February 2018. Both face-to-face (n=13) and telephone interviews (n=111) were undertaken in this study. As Table 3 outlines, Tusla Participants accounted for 75% of the total sample interviewed, while 25% were non-Tusla participants.

Table 3: Tusla and Non-Tusla Participants

<table>
<thead>
<tr>
<th>Tusla Participants (75% of total sample interviewed)</th>
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</thead>
<tbody>
<tr>
<td>• National Office/ Tusla Senior Management (n=18)</td>
</tr>
<tr>
<td>• Tusla Operational Management (n=56)</td>
</tr>
<tr>
<td>• Tusla key Functionalist Specialists (n=11)</td>
</tr>
<tr>
<td>• Tusla Work Package Specific Working Group Members (n=11)</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Non-Tusla Participants (25% of total sample interviewed)</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Government Departments (n=7)</td>
</tr>
<tr>
<td>• Community and Voluntary Sector (n=10)</td>
</tr>
<tr>
<td>• Other External Stakeholder Organisations (n=15)</td>
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</tbody>
</table>

Interview recordings were distributed to transcribers with a track-record of working with the UCFRC and were subject to a standard confidentiality agreement regarding the management and disclosure of the data. Upon receipt, the transcripts were divided into sections relevant to each of the Work Packages while in Word document format. They were then distributed for analysis to each Work Package lead researcher. At this point, they were imported into the computer assisted software programme NVivo using already created individual files for each of the individual Work Packages. To ensure quality and rigour in the data analysis process, each Work Package NVivo file also contained five standardised nodes pertaining to the other Work Packages in the study. This was to ensure that information relevant to all Work Packages was captured and recorded in the data analysis process.

Data Analysis: From the 124 interviews which were undertaken as part of the Common Data Collection, 101 participants answered questions pertaining to the Commissioning Work Package. The interview questions for this work package centred on the following areas: perceptions on the extent to which

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3 See Appendix 1 for further details on the participant information sheet, consent forms and interview schedule.
4 There were slightly more interview participants than interviews; four interviews were joint interviews. So 124 interviews = 128 participants.
5 Key functional specialists are those with responsibility for key functional areas in Tusla. Functional areas pertinent to this Work Package include Finance, Human Resources, Communications, national data information and Workforce Learning and Development.
6 Key informant interviews were also undertaken to supplement the Commissioning Work Package information.
commissioning has resulted in changes to how funding decisions are made, now and potentially into the future; and perceptions surrounding the extent to which commissioning has resulted in changes to the types or mix of services provided.

The data pertinent to the Commissioning Work Package was analysed using a thematic approach. Thematic analysis represents a rigorous approach to data analysis, as the researcher systematically extracts, analyses and interprets a series of themes and subthemes from his/her interview materials, which are subsequently examined in the context of the research question and aims and objectives of the study (Braun and Clarke, 2006). Therefore, the themes that are derived can be defined as emergent concepts that frame or capture the various types of discourses or narratives that appear frequently in the transcripts. In terms of including and excluding particular themes, this process is dependent on the research question and the prevalence that interviewees attribute to particular concepts and policy practices that are evident within the transcripts.

**Spend Analysis**

A fundamental question for the overall study, of which this Commissioning is one component, relates to the place of prevention, early intervention and Family Support with Tusla’s culture and operations, and whether this is changing over the lifetime of the project. While this is a very significant question for the overall evaluation, it is addressed in part through the Commissioning Work Package, as it relates to what services the organisation funds, internally through its own provision and externally through grant-aided and contracted organisations. Specifically, our study sought to establish changes in the overall profile of expenditure of Tusla during the programme’s lifetime, insofar as this might indicate a shift towards prevention, early intervention, and Family Support. This work was undertaken collaboratively with Tusla, and its officers generated the financial data necessary for the work.

**Externally Funded Services’ Mix**

An original task of this study was to establish a baseline of service provision grant-aided by Tusla under Section 56 of the Child and Family Agency Act, 2013. In particular, the intention was to establish a body of information on the type of services provided, their fit within the Hardiker framework on levels of need, specific target groups, and the levels of evidence underpinning provision (Hardiker et al., 1991). It was hoped that gathering this type of information would become routinised, such that changes would be trackable over time; in particular, that the degree to which evidence-informed prevention and early intervention and Family Support Services would feature in the services menu. Primarily for resource reasons, this objective was not realised. With the support of an external consultant, Tusla designed and implemented a Service Arrangement Survey, operationalised through the SurveyMonkey platform. The UCFRC team inputted to the development of the survey in relation to Family Support Service categorisation. The UCFRC agreed to analyse the available data and ultimately worked with 437 complete responses.

**Documentary Analysis**

Documentary analysis was the primary method for examining the structures and procedures in place to provide a supportive framework for commissioning in Tusla. The data collection and analysis drew on documentation publicly available as well as internal information provided by relevant personnel in Tusla. Among the resources analysed were corporate and business plans, emerging commissioning guidance and materials, draft commissioning area plans, and planning and assessment reports undertaken by external consultants for Tusla. Latterly, after the Commissioning Unit was set up in late 2017, the Research Team accessed a number of materials relating to the emerging workstreams and processes in development for the Unit. The focus of the documentary analysis was primarily towards developing an account of the development of thinking and strategy on commissioning over the study period. It was also interpretative insofar as the analysis involved attention to the alignment of materials with Tusla’s own principles and what is known from the international literature on commissioning.
Observation

Over the course of the study, the Research Team engaged in observation activities across a number of areas. These included training events hosted by Tusla for internal staff in the commissioning planning process; attendance at information sessions for the community and voluntary sector; briefings provided by external consultants; and stakeholder events on commissioning processes. In addition, the Research Team attended the meetings of the National Commissioning Working Group, hosted by Tusla.

2.3 Scope of Findings

Of the three research objectives established at the outset of the Commissioning Work Package, the Research Team can report primarily on Objective 2, namely, establishing the value of Tusla's activities in increasing the capacity of its stakeholders to undertake evidence-informed commissioning both internally and externally. In relation to Objective 1, to determine whether commissioning is rigorous and evidence-informed and if it privileges prevention and early intervention, we have limited baseline financial data to report on spend and some qualitative data on perspectives on evidence and outcomes. Due to the early implementation of Tusla commissioning plans, it has not been possible, within the scope of this study, to address Objective 3 on the impact of commissioning on the service provision landscape for children and families.

As stated above, the primary focus of this report is on participants’ views of the capacity of both Tusla and the community and voluntary sector to implement the commissioning framework. Within this realm, a number of critical areas of capacity building are outside the scope of the timeline for our reporting. In relation to the community and voluntary sector, aside from engagement of representatives at the National Commissioning Working Group, the primary roll-out of guidance and technical resources to the sector took place in late 2017. It has not been possible to evaluate formal training for the sector. Also, Phases 2 and 3 of the commissioning planning training, in which our plan was to explore external stakeholder engagement, are outside of the study timeframe.

Internally in Tusla, capacity building has been concentrated on staff directly involved in the commissioning planning process through IPC. The development of curriculum and materials through Tusla’s Workforce Learning Development did not take place in the timeframe of the study. Rather, a broad Learning and Development Plan to support Tusla’s commissioning strategy is planned for 2018. Finally, while a number of the planned activities have yet to commence, some ancillary developments have taken place under the Commissioning agenda. These include a Parenting Commissioning Framework7 and the Creative Community Alternatives (CCA) initiative. In relation to the CCA,8 this initiative is undergoing a separate research and evaluation study outside of the PPFS NUI Galway, and to the extent that it is referenced in our report, it is in the context of its fit in the overall commissioning environment.

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2 Creative Community Alternatives plans support children to live in their communities and prevent them from being placed in residential care or allow for their exit from care. Tusla identified the benefits as: addressing the specific identified needs of each child, thereby targeting the specifics of the situation that have caused the child to move into crisis; providing localised responses to each child’s family and community context; thereby reducing disruption and trauma associated with that child moving to a totally new living context; delivering cost-effectiveness and efficiency in terms of budgets, as typically CCAs cost approximately €60,000 per year compared to an average cost of €260,000 annually for statutory residential care; and preventative in ensuring that “last resort” options are only used when all others have been fully exhausted.
2.4 Data Analysis and Write-up

The data in this report is organised according to five major themes, which form the basis of the findings.

Table 4: Presentation of Findings

<table>
<thead>
<tr>
<th>Findings</th>
<th>Sources</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Section 1: Understanding of commissioning.</strong> Explores how it evolved, including opportunities and challenges identified.</td>
<td>Baseline</td>
</tr>
<tr>
<td></td>
<td>Common Data</td>
</tr>
<tr>
<td><strong>Section 2: Commissioning Infrastructure</strong></td>
<td>Documentary analysis</td>
</tr>
<tr>
<td>Outlines the proposed direction of the Commissioning Unit as planned in the principles, resources, and operational functions.</td>
<td>Observation</td>
</tr>
<tr>
<td></td>
<td>Common Data</td>
</tr>
<tr>
<td><strong>Section 3: Capacity Area Planning</strong></td>
<td>Commissioning Plans</td>
</tr>
<tr>
<td>Early experience with primary tool for commissioning planning and capacity to respond.</td>
<td>Phase 1 Report</td>
</tr>
<tr>
<td></td>
<td>Documentary analysis</td>
</tr>
<tr>
<td></td>
<td>Observation</td>
</tr>
<tr>
<td><strong>Section 4: Relationship Management</strong></td>
<td>Baseline</td>
</tr>
<tr>
<td>Reviews the frameworks proposed for defining relationships with external agencies.</td>
<td>Documentary analysis</td>
</tr>
<tr>
<td></td>
<td></td>
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<tr>
<td><strong>Section 5: Evidence and Outcomes</strong></td>
<td>Baseline</td>
</tr>
<tr>
<td>Outlines overall Tusla expenditure profile and services funded under Section 56; use of evidence in Tusla decision-making; outcome-oriented reporting; challenges and approaches.</td>
<td>Documentary</td>
</tr>
<tr>
<td></td>
<td>Financial</td>
</tr>
</tbody>
</table>

2.5 Summary

This section set out the methodological strategy and methods used for the study. In effect, it reflects a multi-method, primarily qualitative study involving three discrete interview-based qualitative sub-studies, significant documentary analysis, and ongoing observation of Tusla’s developmental activities and implementation towards commissioning. Alongside the qualitative data is a more limited set of quantitative financial data, one part of which is generated through Tusla’s financial systems and one reflective of an early attempt to capture the mix of services provided by funded organisations through a survey. A literature review provides a conceptual backing to the study. Critically, the methodology evolved over the period of the study to reflect the nature of implementation, with modifications agreed with Tusla staff leading on Commissioning.
Literature Review

As part of the Commissioning Work Package, the research team undertook a literature review to develop learning, drawn from international experience, to inform the direction and implementation of Tusla’s emerging Commissioning strategy (Shaw and Canavan, 2016). Based primarily on the experience of the United Kingdom, where a distinct discourse is associated with commissioning, in particular its impact on the voluntary sector, the review highlights the opportunities and challenges posed as well as the capacities required to undertake a commissioning process. Key elements are summarised below.

3.1 Commissioning Literature: Definitions and Key Elements

Commissioning is broadly undertaken as part of a strategic approach to the delivery of public services (Centre for Effective Services, 2015; Kimantas and Dawson, 2008). In focusing attention on the arrangements for the use of public funds, in particular through emphasising planning and performance management, commissioning forms a major part of the public-service reform agenda to ensure better value for services and to create a more competitive and accountable environment (Dickinson, 2014). As such, it is valued as part of a wider operationalising context geared towards more efficient services and a culture of ‘outcomes over outputs’ (Cairns et al., 2005). Glasby (2012: 8) suggests that commissioning be viewed not so much as a stand-alone policy but rather as a response to a broader set of changes in the way public services are conceived, managed, and delivered. It represents a shift from ‘traditional’ public administration to the adoption of more commercial concepts and approaches. These changes include setting and measuring clear objectives and outcomes and using market mechanisms to drive down costs and improve quality. At the same time, particularly given the emphasis on financial elements, questions arise as to the extent to which commissioning frameworks represent a genuinely new way of working, or whether they form part of a broader context geared towards more conscious adoption of the need for changes in the way public services are planned, managed, and delivered (Rees, 2013).

It is broadly acknowledged that definitions of ‘commissioning’ vary considerably. Often, the term is used interchangeably with ‘procurement’ or ‘contracting’, with which it is associated, leading to confusion in both theory and practice (Macmillan, 2010; Murray, 2009; Bichard and de Groot, 2007). A common element in all understandings of commissioning is that it represents a conscious approach to decision-making and resourcing. Kimantas and Dawson (2008: 1) provide a general definition of commissioning as ‘the whole process of deciding what public services are needed, what priorities they are accorded, and choosing what, why, how and where to allocate resources to provide services’. Often represented as a cyclical process, commissioning is a broad exercise that typically includes ‘the cycle of assessing the needs of people in an area, designing and then securing an appropriate service’ (Cabinet Office, 2006: 4). These stages of commissioning can be summarised as Understand, Plan, Do, Review (CSP, 2009: 5).

In its implementation, the commissioning cycle involves a continuum of activities focused on planning, purchasing, and monitoring the quality of services. The terminology associated with the commissioning process, in particular the ‘market’ of supply and demand, incorporates a distinctive commercial ethos. The commissioning cycle encompasses a full set of actions from needs assessment, scoping the market of providers, designing a service, deciding how to resource that service, and choosing a supplier, through to delivering services and evaluating outcomes (Dickinson, 2014; Kimantas and Dawson, 2008). A key stage involved in commissioning frameworks relates to developing an understanding of needs, also referred to as ‘market mapping’ (Audit Commission, 2007). The process centres on identifying needs and
ascertaining how providers are best placed to meet them (Cozens, 2007). The first step in a meaningful understanding of needs requires gathering relevant, accurate, and timely information on composition, needs, and aspirations of the target population (Audit Commission, 2007). The provision of accurate information is also required for defending the basis on which resources are allocated, including the decommissioning of ineffective services. The importance of understanding the market is highlighted in order to ensure a diverse and sustainable provider base to meet the needs of the community and enable a wide breadth of outcomes to be achieved (Bovaird, Dickinson and Allen, 2012; Audit Commission, 2007). Digings (2007: 17) identified critical elements of ‘market shaping’, as it is called, as the stimulation of new markets to secure alternative provision and user choice, as well as increasing the capacity and competitiveness in existing supply markets, including streamlining procurement processes.

At a macro level, commissioning involves identifying population needs and priorities as well as the resources available. Ultimately, as Digings points out, it is about matching supply to demand, with commissioning encompassing the sourcing of solutions that meet population needs within the ‘affordability envelope’ (2007: 6). The exercise, according to Packwood (2007: 6), is ‘not a once-off activity of buying a service, but a continual process of monitoring, evaluation and improvement’. In practice, while the commissioning cycle of needs assessment and user involvement is represented as a sequential process founded on a series of deliberate steps and engagement mechanisms, it is widely acknowledged that the cycle rarely occurs in full (Bagwell, 2015; Bichard and de Groot, 2007). Rather, the realities of resource-constrained environments often result in ‘payment by results’–type contracting arrangements on which perceived value for money is the prime consideration (Rees, 2013). Others (Dickinson, 2014; Bichard and de Groot, 2007) suggest that in practice commissioning is less a rational than a highly relational exercise, and refer to the ‘art’ rather than the ‘science’ of commissioning.

As an approach, the distinctive nature of commissioning calls for a number of competencies and for investment in the capacities required to undertake a commissioning process. In essence, commissioning is a data-driven exercise. Commissioners need good-quality performance information and analysis to justify changes in internal and external services (CSP, 2009). In this regard, the literature highlights a number of technical skills required to undertake the core components involved in commissioning roles. These include population needs assessment, demand forecasting, market mapping, market forecasting, option appraisal, and managing through networks (Digings, 2007: 17). At the same time, in order for commissioners to undertake the range of tasks effectively, these activities come with requirements for effective information systems, timely analysis, and protocols for sharing data between partner agencies. Good commissioning practice requires using evidence to understand need and to assess the effectiveness of existing services. However, there is a dearth of literature providing guidance for commissioners on how to work effectively with evidence. One of the few sources, a review undertaken for the UK Department for Education to identify what is known about the role of evidence in commissioning children’s services, found that despite the range of advice and encouragement to use evidence, the lack of research on how commissioning is carried out means that there is little knowledge on how they do so (McNeish, Scott, and Maynard, 2012). Using evidence to understand need, as set out in the review, involves the collection and analysis of data, which further requires:

- effective information systems for data management
- the ability to analyse data in a timely fashion to inform decision-making, or ‘turning data into intelligence’
- flexible databases to allow for drilling down of data across populations and levels
- protocols for sharing data and cross-departmental working among partner agencies.

In the UK in particular, a number of studies have examined the capacity and capability of third-sector organisations to engage in the ensuing ‘contract culture’ and on the preparedness of the voluntary sector to tender for contracts (Martikke and Moxham, 2010; Chapman, Brown, and Crow, 2008; Packwood, 2007). Indications are that in the beginning at least, organisations were ill-prepared for the shift in a funding environment that favours contracts for the delivery of public services over more conventional grant aid.
It is important to acknowledge that the core principles on which commissioning is founded, primarily the need for performance monitoring and cost efficiencies, form a part of a funding environment where greater adherence to accountability practices had been required for some time (Martikke and Moxham, 2010). Rees’s (2013) assessment of the impact of commissioning on the relationship between statutory and voluntary sectors suggests that, rather than representing a new or ‘transformative’ approach, it should be viewed as part of a well-established trend towards an increased emphasis on the market mechanism, competition, and externalisation of services by the state. Similarly, and outside of the discourse on commissioning, the challenges that develop alongside monitoring requirements associated with statutory funding streams, including complexity of accountability and reporting mechanisms, are a major issue for nonprofits delivering services. A study in the US found that among the most problems encountered on a practical level are: not receiving full cost of services; restrictions on overhead; and time-consuming reporting and application requirements (Pettijohn et al., 2013).

3.2 External Context for Commissioning

Changing regulatory environment

From the perspective of community and voluntary organisations, the transition from a grants-based system to an-outcome based, contractual mode of engagement required by commissioning marks a significant shift in the expectations and governance arrangements with the state. The introduction of commissioning took place in the context of a number of changes in the relationship between the state and the community and voluntary sector. Historically, the Irish State has relied on a high degree of involvement from voluntary and community bodies in the development and delivery of services (NESC, 2005). The most recent figures estimate state funding as representing 47.5% of total income at nonprofits in 2015 (2into3,2017). In practice, resources were provided under Section 65 funding, to community and voluntary organisations for programmes consistent with government policies and objectives. Specifically, services for children and families are provided by both statutory and voluntary organisations, with a considerable amount of subcontracting of specialised services and projects to community and voluntary organisations.

The drive for an effective resource-allocation model underpinning the Commissioning approach took place in the context of a national policy orientation towards greater management of constrained resources. In the area of children and family services, the Department of Children and Youth Affairs’ Statement of Strategy 2011–2014, acknowledging severe resource constraints, specified the need for research evidence on effectiveness to inform the review, redesign, or curtailment of such programmes and services (DCYA, 2012). The Health Information and Quality Authority (HIQA) National Standards for the Protection and Welfare of Children (2012) requires that resources be effectively planned, deployed, and managed (Standard 1.4); Tusla is required to provide documentary evidence of its compliance with this standard. Outside of the children and youth sector, a key theme of the Department of Public Expenditure and Reform’s strategy is the need for greater emphasis on outcomes for service users, and a commitment to change how services are designed and delivered. In particular, a 2014 Circular specifying the management requirements for Service Level Agreements (SLAs) established a set of principles and standards to ensure accountability and performance by providers (DPER, 2014b).

Until the late 1990s, the non-profit sector’s relationship with the state could be described as informal, ill-defined, and contradictory (Keenan, 2008). However, the end of that decade saw the introduction of more formalised structures and processes. Included were greater compliance requirements such as setting of standards for service delivery, the increased practice of tendering, the use of contracts and service-level agreements, and a focus on quantifying effectiveness of outcomes. The trend towards greater formalisation continued with the Charities Act 2009, which provided a regulatory framework for charities, completing a period in which ‘in the space of a decade, the Irish non-profit sector had assumed a formal and regulated space in Irish society’ (Donnelly-Cox and Cannon, 2010: 338). To some

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9 These Section 65–funded organisations relate to agencies or groups undertaking services which are similar or ancillary to those of the HSE and to whom the HSE is providing grant aid to do so.
extent, increased emphasis on transparency in organisational operations has been necessary for Irish non-profits in order to ensure public perceptions of legitimacy, and hence protection of their funding streams (Donnelly-Cox et al., 2012). At the same time, questions have been raised as to how non-profit organisations, operating under increased scrutiny and funding conditionality, can balance their state funding relationships while ‘retaining an authentic advocacy voice and commitment’ (Donnelly-Cox et al., 2012: 3; Harvey, 2009).

The planned onset of commissioning has a number of implications that have raised concern within Ireland’s community and voluntary sector (O’Connor, 2016). At one level, these relate to the prevailing funding environment, where the nature of resources available to the sector had already been shifting. The introduction of commissioning coincided with the closure of two philanthropic foundations, whereby the children and youth sector had benefited from a decade of foundation investment from the Atlantic Philanthropies and the One Foundation. These resources compensated for historical under-development and under-resourcing that had characterised Ireland’s non-profit sector, particularly in relation to funding of organisational core capacity and research and evaluation activities. However, from 2008, Irish non-profits began to be seriously affected by national and global economic downturns, as a consequence of which operating in a ‘resource-constrained’ environment became the norm (Keenan and Montague, 2010). Responses to these altered conditions of support, reflected in both reduced state funding and a downturn in the private fundraising landscape, included an ‘economising response mode’ in which organisations reported doing more with less, and, as a result, became increasingly introverted and focused on their own survival (Donnelly-Cox and Cannon, 2010). Consequently, the environment for the introduction of commissioning represented one where, from the early 2010s, the impact of economic circumstances had severely constrained the sector’s capacity to operate.

In a relatively recent development in Ireland, the opening up of the social care market to private providers and the ensuing outsourcing of services introduced a new element of competition into what had previously been seen as the domain of the state and the non-profit sector. Especially in children’s care, older persons’ care, and intellectual disability services, the recent entry of for-profit providers has introduced an element of marketisation into Ireland’s social care sector (Mulkeen, 2016). Mulkeen cites children’s residential care, an area once dominated by non-profit providers, as one where the growth of for-profit provision is particularly evident. Internationally, the prevalence of outsourcing has generated a number of concerns among non-profit service providers engaging in new or increased competition with private operators (Dickinson, 2014; Rees, 2013). In particular, debates about the difference in values and ethos between the for-profit and non-profit sectors, the overriding propensity of cost-effectiveness to factor highly in decisions to award contracts, and fears about reductions in staff quality feature among the developments that non-profit providers believe are exacerbated by the introduction of commissioning (Moulton and Eckerd, 2012; Martikke and Moxham, 2010; Chapman et al., 2008). The addition of a move from a grant-based to a contractual system had led to concerns within the sector that commissioning would fail to take into account the full range of functions, including societal value exercised by nonprofits (O’Connor, 2016).

**Organisational capacity**

In order to respond to demands for increased accountability, and to demonstrate effectiveness, investing in the capacity of organisations to undertake their work is critical. Changing expectations for performance data, evaluation, and outcome-oriented delivery require organisations to have the requisite structures and processes in place (Ebrahim, 2005). However, organisational attributes that facilitate performance are often overlooked. Traditionally, non-profit culture has reflected an environment in which both funders and recipients prioritised programme-related grants at the expense of core infrastructure (Anheier and Leat, 2002). Ebrahim and Rangan (2014) found that among human service organisations in the United States, funders typically do not direct resources to organisational capacity building; rather, the trend is towards reducing support for core infrastructure and overhead costs in favour of directing funding to programmes. Among the problems facing the voluntary and community sector in Ireland, Daly (2008) highlights the lack of human or financial resources as well as inadequate structures of internal governance
that make it impossible for organisations to meet the conditions attached to funding, including resource management and efficiency.

Capacity development is instrumental in strengthening organisational effectiveness. Yet understanding of the full meaning and import of the term can be limited. For Brown et al. (2016), ‘Capacity is conceptualized broadly in terms of the assets and processes that are employed to improve effectiveness and sustainability.’ McKinsey and Co. (2001: 34) developed a Capacity Framework to provide a common vision and vocabulary for non-profit capacity. In this framework, non-profit capacity is defined as having seven essential elements aligned within a pyramid. These comprise higher-level elements: aspirations, strategy, and organisational skills; foundational elements: systems and infrastructure, human resources, and organisational structure; and a cultural element which serves to connect all the others (Figure 2 below). In this regard, capacity-building goes beyond the limited understanding associated with technical aspects to include a fundamental reappraisal of the ways in which organisations can be supported in the long term. All seven essential elements are needed to facilitate social impact.

![Figure 2: Capacity Framework](source: McKinsey and Co.)

Among the greatest challenges to human services organisations’ building capacity, Jones (2003) found that essential core capacities required to be effective are often neglected. Areas of investment critical to effective organisations include quality systems, training, board development, human resources, and management. Brown et al. (2016) cited underlying dimensions of organisational capacity to include human and social capital as critical resource attributes and management functions likely to facilitate fulfilment of performance objectives. Factors such as good leadership and quality of external relationships, while a critical part of the resource environment of non-profits, are typically underfunded. Moreover, philanthropic funders better understand that investment in human and systems capacities are essential to achieve long-term results (Carnochan et al., 2014).
Despard (2016a) singled out evaluation capacity deficits as an area that hinders non-profits’ efforts to meet accountability demands and improve programmes. This includes capacity to define client outcomes, assess programme performance, and manage data and knowledge, as well as specific difficulty in distinguishing between outcomes and outputs as critical issues for human service organisations. Similarly, Carnochan et al. (2014), examining the experiences of non-profit human service organisations in responding to performance measurement pressures, highlight complexity of human change processes and variation among individual clients as complicating factors in capturing ‘people-changing data’ against standardised benchmarks or measures. In the UK, among commissioned services for children, lack of funding for evaluation, insufficiently clear expectations of commissioners, and a dearth of capacity and expertise of service providers constrained the ability to meet evaluation demands (McNeish et al., 2012). Despard’s (2016b) study of US non-profit service organisations engaged in evidence-based practice found that capacity limitations, including access to research evidence and funding difficulties, made adopting and sustaining this approach challenging, especially at smaller organisations.

3.3 Summary

Despite a wealth of information on the rationale, the processes involved, and the operation of commissioning practices, the dearth of research on its impact on delivering better outcomes or service improvement is noteworthy. Nonetheless, it appears that reform is inevitable, and a commissioning agenda forms part of an environment where in Ireland, as in other jurisdictions, the call for greater accountability in terms of evidence of effectiveness and outcomes for services provided is part of the contemporary culture. The literature review highlighted a number of key messages to inform the implementation of a commissioning strategy:

- While broadly welcome, the transition to outcome-based, more formalised agreements marks a shift in the nature of the relationship between the state and the community and voluntary sector. It requires significant investment not only in the technical skills and capacity building required to execute the commissioning process in all its stages, but also in ensuring the opportunity for ongoing dialogue on the challenges and risks associated with the model.

- The potential for collaboration afforded by the commissioning process exists, and in principle forms the basis of a positive engagement in which the community and voluntary sector is involved in the design and direction of public services. It is critical that commissioning be understood not as a paper-driven, isolated exercise, but rather as a continual process of monitoring, evaluation, and improvement involving interaction between all stakeholders.

- At the same time, the role of information should not be underestimated. In several respects, commissioning is a data-driven exercise; it calls for investment by both commissioners and funded organisations in their internal capacity to produce, analyse, and utilise information.

- The adherence to generalised notions of efficiency and outcomes upon which commissioning models are often founded, while eminently valuable at a high level, become extremely challenging to implement in practice. Moving beyond this requires that greater attention be given to providing meaningful guidance to stakeholders at the outset of the commissioning process.

- Related to this, implicit in many commissioning models are mixed messages such as the need to ensure value for money alongside that of producing the best outcomes for service users. Commissioners need to be aware of the potential difficulties posed by such contradictory goals in assessing funding requests.

- The use of outcomes as the basis for assessment and decision-making, while valued as a means of moving organisations from activity- to results-oriented thinking, requires commissioners to devote greater attention to defining and setting standards for the measurement of outcomes that can be applied across the spectrum.
• In a performance-driven environment, there is a need to ensure that the dynamics of a client-contractor relationship and the formalities of contractual arrangements do not diminish the principle of partnership working between the statutory and voluntary sector.
4

Findings One – Understanding Commissioning

4.1 Introduction

This section provides an overview of stakeholder perceptions on the key challenges and opportunities afforded by Tusla’s commissioning framework. These views reflect the level of understanding of commissioning operating internally and in the external environment over the course of 2015–2017. At the time of the final data collection (Common Data), consensus existed that commissioning had yet to be embedded in the system. Notably, the concerns raised during the baseline remained highly resonant in late 2017. Representative views from both the Baseline Study and the Common Data Study are presented below. Overall, the experience of commissioning upon which reflections are based relates to the theory or processes associated with commissioning rather than its implementation. Largely, they refer to the potential for the model, the opportunities afforded for Tusla to ‘get it right’, and the challenges posed by the new arrangements.

The first section outlines perceptions of commissioning as an opportunity for reform and understanding of its underlying rationale. This is followed by a discussion of the perceived threats and negative connotations that continue to pervade the community and voluntary sector.

4.2 Opportunities for Reform

By the end of 2017, the case for engaging in commissioning had permeated the system. Data collected over the course of the study indicates a positive response from Tusla staff and external organisations to the core principles that underscore the commissioning of services. Respondents acknowledged the value of evidence-informed decision-making, needs-based assessment of services, transparency, and greater accountability. Participants highlighted the development of a methodology (commissioning cycle) for the achievement of these principles in a transparent manner as a significant step. Moreover, many of the changes introduced through commissioning had been anticipated. In the years before Tusla was set up, the growth of philanthropic investment and the skilling up of organisations serving children and families in areas such as performance management and evaluation had created a culture of performance-oriented operation that pervaded the children and youth sector, albeit it among the large providers.

Across the board, there was agreement that elements of historical funding practice, such as automatic renewal of grants, were overdue for reform. Among service providers, several referred to an element of complacency where the ‘automatic assumption that because you are in the space you are going to get funding’ prevailed. Tusla staff highlighted the difficulties of bringing about change in view of the historical practice of automatic funding renewal and politically, whereby organisations tended to invoke intervention of elected representatives at the local level if their funding was curtailed. For providers in the study, at the time of interview, decommissioning had not happened; however, expectations prevailed that it would take place in the near future.
Within Tusla, staff across all levels viewed the opportunity to address the culture of ‘legacy’ grants as the primary benefit of commissioning. The decision-making process associated with the commissioning model represented a clear break with the Service Level Agreements in the past, which were ‘rolled on from one year to the next’ without due consideration to the effectiveness of services. As expressed by the respondent below, a strong sense prevailed among Tusla operational staff that a shift towards greater accountability was overdue:

It changes the game, because up until now organisations have been funded year on year. And generally, they’re supposed to be doing A, but they could end up doing B, C, and D, and nobody challenges them, and nobody calls them to task and says, ‘Actually you’re supposed to be delivering A.’ (Common Data: R88)

Aligned to this, responses perceived the overriding value of commissioning as the potential offered to enable greater focus on removing duplication and resourcing gaps in service delivery. The process of conducting a needs assessment, the first step in the commissioning approach, provided a timely opportunity to examine the nature of services available as well as requirements for the introduction of new services within areas. For the participant below, the focus on the identification of need highlighted the high number of children coming into care at a young age, and how, through a process of ‘drilling down’ that information:

We were able to identify actually there’s quite a significant cohort coming from one postcode. We have a good idea about why ... We need to be looking as well about what is our model of service ideally that should be there to get in as early as possible when the need is identified. (Common Data: R94)

Among Area Managers, the generation of knowledge referred to above, namely greater awareness of demographics operating at local level, information and data to understand the source of problems and, critically, to use in targeting specific needs, were viewed as highly beneficial. In general, the collection of data and information around needs and resource allocation at the local rather than national level was seen to provide an enhanced knowledge base (Common Data, 7). Representatives from CYPSCs in particular highlighted increased capacity within local areas of the processes associated with needs assessment; greater awareness of service gaps for different population groups, and the potential for sharing information and datasets across teams. For Area Managers, the availability of enhanced local knowledge translated into a greater confidence and ‘sense of empowerment’ in speaking authoritatively about the nature of local needs and the desired outcome for services to address them. Both Tusla respondents and external stakeholders remarked that having a process for evidencing need within areas had the benefit of removing the ‘subjectivity’ or ‘arbitrariness’ previously associated with the service delivery landscape. In this way, Area Managers interviewed as part of the Common Data spoke of justifying their decision-making as support for services meeting need. In the past, respondents noted, personal or established relationships appeared to preference some providers.

In the words of one Tusla participant, the extension of the needs assessment process to include service providers meant that ‘We’re having open dialogue and resolving and raising issues at a strategic level around “what are the needs”:’ This exercise, the respondent believed, resulted in a confidence between the agency and the voluntary sector in that, for the first time, they could engage as partners in raising issues within their areas and how they might be jointly addressed.
As another Tusla participant characterised it, early indications of commissioning as partnership model had permeated the sector:

> I think the voluntary and community sector is beginning to see that, so it’s not a commissioning ‘at’ but it’s a commissioning ‘with’ framework. (Common Data: R80)

Most participants, however, while acknowledging the benefit of needs assessment in raising information about key areas of need and identifying gaps in provision, did not see impact on the ground. Rather, they characterised its influence as beginning to change assumptions:

> I think it has started to affect the environment, so the community and voluntary sector are thinking differently. Rather than saying, ‘This is what we have for you; do you want it?’, they are saying, ‘What do you need’ and adapting to it. (Common Data: R90)

One community sector participant, while describing the needs assessment process as ‘interesting and useful’, expressed a degree of frustration that no follow-up had occurred: ‘Nothing has happened since. We’re still waiting to see what the new system will look like.’ Commenting on the fact that no real change was evident in the manner in which funding decisions were made in 2017, one senior Tusla manager reflected that the legacy issues were negatively impacting the roll-out of the commissioning and cautioned that the prevalence of such issues would require time and space before becoming embedded.

4.3 Perceived Threats

Over the course of the period, commissioning continued to have a number of negative connotations. At the time of the baseline data collection, understanding of commissioning among respondents appeared limited to the elements related to procurement, contracting, and value for money. The predominant perception focused on the financial and contracting elements and viewed commissioning as a mechanism to reduce costs. As outlined in the Literature Review, while a shift towards rationalisation and value forms an integral part of the rationale for commissioning, the model also includes service providers in meaningful engagement across the cycle of planning and delivery. The opportunities afforded by Tusla’s commissioning strategy, incorporating collaboration with stakeholders, had not permeated the external field. Instead, most respondents equated commissioning with procurement practices.

For the majority of participants in the baseline study, commissioning implied competitive tendering. In this regard, a number spoke of their knowledge or direct experience of commissioning in the United Kingdom:

> The way the UK went about commissioning has been absolutely devastating to the community and voluntary sector. It put an awful lot of community organisations out of the mix and brought in a lot of for-profit organisations, and it became a race to the bottom to provide a number of services. (Baseline: R3)

Interestingly, this theme was also apparent in the responses of community and voluntary organisations late in 2017. The use of the word ‘tender’, though not part of the Tusla commissioning lexicon, continued to be used. In raising the cost issue in 2017, participants expressed concern that, despite assurances from Tusla to the contrary, providers offering services at the lowest price would be preferred. One key informant in the Common Data study described the environment in the voluntary sector as follows:

> We’ve all read through the documentation and are looking at the commissioning model. But underneath it I’m getting a kind of unspoken fear from organisations that commissioning, even though it clearly states it’s not the case of a race to the bottom, they’re very wary and afraid that it is going to be a competitive tendering process. (Common Data: R41)
In principle, the rationale of looking at value for money made sense. However, as one participant warned, minimum standards need to be in place: ‘They need to keep an eye on that, so commissioned services aren’t the yellow pack of state-run services’ (Common Data: 99). Service providers referred to the high standards of professional knowledge and expertise among their staff and questioned how that could be accounted for in submitting funding requests. Recommendations included incorporation of quality assurance as a critical factor in the assessment of process, with the need for clarity on the ranking of cost raised:

We would like to know and understand, what is the weighting, what is the priority of things when it comes to commissioning a piece of work? Is cost going to be the determining overriding factor? (Baseline: R3)

Referencing their experience in other statutory funding schemes, where cost is weighted in assessing competing proposals, one recipient in the Common Data reflected that it ‘ultimately becomes the bottom-line decider’. This perception, shared by a number of organisations, is based on an association of commissioning and formal tendering processes.

The anticipation that services would be put ‘out to tender’ heightened concerns about increased competition from and outsourcing to private providers. Implicitly or explicitly, the responses of participants referred to different values and interests operating in the areas of non-profit and for-profit care. They revealed a sense of unease as to whether private providers functioned with the same ethos of care for vulnerable groups. In residential care in particular, the growth in private services was noted, with participants experiencing pressure to compete with market-based providers. Several respondents queried their ability to compete with for-profit providers hiring staff on ‘zero contract hours’ who could undercut their services. The potential impact on quality of care, a majority of respondents underscored, would ultimately be felt by the service user.

4.4 Summary Messages

- By 2017, the case for commissioning had been clearly communicated. The core underpinning rationale, emphasising needs-based assessment, transparency, and evidence-informed decision-making, resonated with Tusla’s internal and external stakeholders.
- The opportunity to address ‘legacy’ funding was viewed as the primary benefit of a commissioning approach. Consensus existed among stakeholders that elements of historical funding practice were due for reform.
- Related to this, Tusla staff valued the potential offered by commissioning to remove duplication and resource gaps in provision.
- In the community and voluntary sector, the predominant perception of commissioning focused on the rationalisation and value-for-money elements aligned to reducing costs.
- This view equated commissioning with procurement practices associated with competitive tendering, and heightened concerns about impact on the quality of services.
- Such negative connotations prevailed despite assurances from Tusla in its communication and commissioning guidance.
- In practice, the focus on identification of needs, the first step in the commissioning cycle, demonstrated the potential for reform in systems for allocating resources.
- At local levels, the process of examining the nature of services available and future needs enhanced knowledge and capacity among Tusla staff and provided an opportunity to engage with external providers as partners.
- Participants highlighted the value of transparency associated with the process.
5

Findings Two – Commissioning Infrastructure

5.1 Introduction

As set out in the Corporate Plan 2018–2020, Tusla’s intention is for full implementation of the Commissioning Strategy to take place in 2018. This section outlines the direction of the Commissioning Unit as indicated in Tusla’s 2018 corporate planning and strategic documentation. The material is drawn largely from documentary sources, in particular through analysis of the evolving and draft versions of key resources as well as observation on the processes for review and consultation.

First, the key underlying principles of the Strategy are discussed. This is followed by an overview of the planned scope and structures underpinning the new Commissioning Unit.

5.2 Key Principles

Tusla’s approach to commissioning is encapsulated in the Commissioning Strategy (Tusla, 2017a) and Commissioning Toolkit (Tusla, 2017b). The overall aim is to have ‘a national standardised approach to commissioning practice embedded organisationally from the national, to regional, to local area level using the Agency defined principles to endure quality, fidelity and value for money, such that there is no duplication or gaps in service provision’ (Tusla, 2017a: 10). Tusla’s strategy is underpinned by six key principles:

- Early intervention/prevention will be prejudiced at all levels of service delivery – low, medium and high.
- Priority will be given to programmes and services that are evidence-based or evidence-informed.
- Tusla will carry out its commissioning approach using a partnership approach, with the full participation of all partners, including providers, other commissioners, children, young people, and parents/carers.
- Commissioning will take account of and actively address the specifics of the local context, e.g. rural and urban.
- Commissioning will support both small, highly targeted services and large-scale local, regional and national services.
- Commissioning should incorporate key capacity-building measures for the local community and voluntary sector, so that it can respond to the local context and the service requirements of Tusla.

The addition of the principle of partnership as one of the core elements of Tusla’s approach marked a shift from earlier versions of the strategy and established the nature of the agency’s commitment to the ethos of collaboration.

As outlined in the previous section, the association of commissioning with procurement models has dominated perceptions among external stakeholders and, to some degree, internally in Tusla. At a
series of national consultations with community and voluntary sector organisations undertaken by Tusla in association with The Wheel in autumn 2017, commissioning was presented as specifically not (a) procurement or contracting, or (b) cost-cutting (Tusla, 2017c). Certainly, by late 2017, elements of the positive intent inherent in Tusla’s commissioning framework had resonated within the community and voluntary sector:

Early indications are that Tusla as an agency does have a sophisticated understanding of commissioning and what it does and doesn’t mean and is now grappling with the complicated element of moving from the theory to the practice and trying to live up to its own values in the doing of that. (Common Data: R158)

Representations from senior staff, both in public consultations and supported by documentation, emphasised Tusla’s commitment to a capacity-building approach to the implementation of commissioning. As set out in its Corporate Plan 2018–2020, the purpose of commissioning is ‘To assist Tusla in identifying potential gaps or overlaps in service provision across the country’ (Tusla, 2018a: 15). The Commissioning Toolkit (Tusla, 2017b: 9) identifies a proactive shift whereby Tusla commissioners ‘ensure there is sufficient, appropriate and value for money provision available to meet needs and deliver effective outcomes both now and in the future’. In practice, this process of ‘shaping need and provision’ occurs where identified needs cannot be met by current services and will involve capacity building and related work to support providers to meet these needs. It will involve supporting organisations to re-orient current services, encouraging organisations to work together in consortia, or identifying new organisations operating elsewhere who can deliver in the future (Tusla, 2017b: 8).

Early indications through data collected in late 2017 reflect a commitment on the part of Tusla operational staff to working with existing organisations to fill newly identified needs, and a recognition that training and support will be required to upskill or partner with other organisations to do so. A Tusla respondent outlined the constructive process underway with plans submitted in their area from potential providers as follows:

We’ve really brought a level of rigour to the plans that are coming in, and working with people to enable them to address gaps in their plans. I think commissioning will have to have that level of intensity if it’s going to work; it’s not just a case of saying, ‘That’s it, you don’t qualify, you’re out.’ That we actually get down and work with people to enable them to get to where we want them to be. (Common Data: R88)

As outlined previously, a major concern expressed by both Tusla staff and external providers related to the practice of decommissioning. However, Tusla’s approach clarifies that organisations should not expect to have their funding terminated at short notice. Rather, the Commissioning Toolkit (Tusla, 2017b: 22) clarifies the agency’s position as follows:

Effective decommissioning will involve a series of steps, but must be predicated on transparency: it should be fully clear why a decision has been taken to decommission a service, and this needs to be understood and shared by all stakeholders.

The Commissioning Unit will support and train commissioners in decommissioning services, including consideration of legal and contractual issues, management of expectations, and potential impact on clients. In decommissioning, Tusla emphasises that managing legacy services that do not fit with the needs-led, evidence-based approach may take more than one cycle, and commissioners need to be prepared for negative media coverage or lobbying of local politicians by organisations affected (Tusla, 2017b: 24).

Having identified the need and gaps in services, expectations prevailed that Tusla would use an open competition process associated with EU public procurement rules to secure a provider. As acknowledged
by senior Tusla management, this appears to be the pathway expected by the community and voluntary sector (Common Data). However, under procurement rules, human and social services can be engaged using a commissioning approach whereby the agency can negotiate with community providers to develop and deliver an identified quantum of services. The Toolkit outlines the options available in contracting with providers. These include (Tusla, 2017b: 6):

- contracting with an organisation to provide a distinct service or range of services within specific geographical area(s)
- contracting with a consortium of organisations for a specific service or range of services within geographic area(s), including, if required, supporting consortia in advance of contracting
- contracting with an organisation(s) to provide a regional or national services or range thereof
- contracting an organisation to provide a specific franchised programme
- contracting of a part of Tusla to provide a service to another part of Tusla (using the commissioning methodology).

This route, rather than a procurement approach, is the intended tool that Area Managers are expected to use for ‘commissioning contracts’. The principles of agreeing on the particular type of service needed in an area, and discussing and offering a contract and a service schedule to that organisation to recruit staff and deliver the service, marks a key difference with procurement-based contracting. The qualifications above may, to some extent, appease the fears of service providers that commissioning will be used as blunt tool. Clearly, they indicate that working with established providers will be the first option in addressing new demands within areas.

5.3 Commissioning Unit Structures

In autumn 2017, Tusla appointed the Head of Commissioning, a role occupied on an interim basis during the preceding year. In early 2018, plans for fully staffing the Commissioning Unit commenced, with recruitment expected to be completed by Q3 2018. Though supported by a national unit, the commissioning functions are primarily based locally. The Commissioning Strategy underscores the importance of the local context in the core underpinning principles of the commissioning model (Tusla, 2017a). ‘Commissioners’, as defined by Tusla, are Area Managers and other area staff; National Service Leads with delegated responsibility for components of the commissioning approach; and Regional Directors with delegated responsibility (Tusla, 2017b: 8). National Service Leads have been appointed to oversee the following areas: Counselling Services, Family Resource Centres, and Domestic and Gender-based Violence. National Account Managers will be appointed for the 22 organisations in receipt of funding of over €1m annually (Tusla, 2017c). Operationally, the Unit is split into two functions: (1) Governance and Compliance, and (2) Commissioning. The governance and compliance function remains under the Director of Finance and works closely with the Commissioning staff. The structure represents a segregation of duties between the commissioning of services function (undertaken by commissioners primarily at the local level) and a governance and oversight role at the level of organisational operation undertaken by Tusla national office staff.

Among the priorities for the Unit is to oversee training and fidelity to the model of commissioning and to offer guidance and support to areas and commissioners. The Commissioning Strategy confirms that Tusla will adopt the methodology of Local (and National) Commissioning Plans used by IPC of Brooks University, UK, as the basis of its approach to commissioning. Building on the technical support provided by IPC to Tusla through ten area-based practice sites and two national thematic areas, and through masterclasses to managers, plans will be developed by all 17 Tusla areas by 2018. In addition to the first national commissioning plan developed by the Domestic Sexual and Gender-Based Violence Services in 2016, two further plans are being developed nationally for Parenting Support and a Creative Community Alternatives Commissioning plan.
At the time of data collection, priorities emerging for the Commissioning Unit reflected the evolution of a number of workstreams that, by early 2018, formed the genesis of a developing work plan. These elements included:

**Family Resource Centres:** The formation of Tusla involved assuming responsibility for a range of services provided by the former Family Support Agency (FSA) and the incorporation of the Family Resource Centre (FRC) programme into the agency. In 2017, the governance and management of the FRC programme transferred to the Commissioning Unit. This required Tusla to subsume the structures by which the FRCs operated, and to apply the principles and mechanisms of standardised operation that apply to all funded agencies under the commissioning model to the FRC programme. Previously FRCs, organised as limited companies, had been managed nationally through the FSA. Funding was allocated from the national office based on submission of a three-year plan. Each FRC operated as an autonomous unit, working inclusively with families, communities, and statutory and voluntary agencies. As a result, considerable variances existed in the governance and management of individual FRCs.

Under the Corporate Plan 2018–2020, the sustainability and resourcing of new and existing FRCs were established as priorities for the Commissioning Unit. In 2018, Service Level Agreements were introduced for the FRCs. These new arrangements require FRCs to adopt the agency’s accountability standards and for all FRCs to be compliant with Tusla’s governance framework by the end of 2018. In addition, the Corporate Plan requires the alignment of FRCs with the Commissioning Strategy and local area plans.

Under the Commissioning workstream, a national FRC plan is in development incorporating a management model and agreement with the Programme for Prevention, Partnership and Family Support (PPFS) for the management of FRC programme delivery. Discussion with the PPFS Management and the Commissioning Unit has indicated that an increased emphasis will be on targeted service provision, particularly in regard to early intervention. Priorities include agreement between Senior PPFS Managers and FRCs on specific elements of service requirements and overall alignment with Area Commissioning Plans and Children and Young People’s Services Plans. While the involvement of local communities in identifying and developing needs-led responses had been a central principle in their way of working, FRCs had not been funded through Tusla local offices. In line with principles of local management, under the new systems, SLAs are to be negotiated between FRCs and Local Area PPFS/Area Management. Hence, the new arrangements are expected to place greater importance on the development of relationships between FRCs and Area Managers and Regional Directors (Common Data). Within the overall structure, the Commissioning Unit will maintain the governance of the FRC programme and provide core funding. A model for funding is under consideration, with allocation of resources from the national office expected to cover core costs; for other income, the FRC must link in with the local authority, HSE, or area office in Tusla.

**CYPSCs:** The integration of the work of the Children and Young People’s Services Committees (CYPSCs) is a critical element of planning for the operational work of the Unit. Using a county-level foundation to bring together the main statutory, community and voluntary providers of services to children and young people, CYPSCs’ role is to enhance interagency cooperation and to realise the national outcomes set out in Better Outcomes, Brighter Futures. There are 27 CYPSCs across Ireland. Policy and strategic direction is set by a multi-agency group under the aegis of the DCYA. Following the transfer of staff to Tusla, the management of the CYPSCs is aligned with the operational stream of the Commissioning Unit. As the structural framework for interagency discussion and collective thinking about how to respond to the local needs of children and young people, CYPSCs provide a broad coordinating forum. Each of the 27 CYPSC committees have up to 70 members – Tusla Area Managers occupy the role of chairperson, and the vice chair for the majority is a senior manager from the local authority.

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11 The FRC programme was designed to combat disadvantage and improve the functioning of the family unit. The programme emphasises involving local communities in tackling the problems they face, and creating successful partnerships between voluntary and statutory agencies at community level.
Harnessing this structure is important and the formalisation of the role of CYPSCs in the Commissioning Unit work plan is expected to enable a number of efficiencies. In particular, Tusla’s Corporate Plan 2018–2020 highlights the role of CYPSCs as the mechanism for developing a joint commissioning approach, and calls for the establishment of a Working Group to develop interagency commissioning processes (Tusla, 2018a). As set out in the Commissioning Strategy, opportunities for exploring integrated strategic commissioning will be prioritised in 2018 using the CYPSC structure. Under such an approach, it is envisaged that the design and commissioning of local services are to be undertaken by selected CYPSC members, draw on the CYPSC evidence-informed planning process, and promote a partnership approach that cultivates collective responsibility for results (Tusla, 2018c).

**Creative Community Alternatives:** Creative Community Alternatives (CCA) was implemented as a pilot project in seven Tusla areas in 2017 and is being rolled out to the remaining ten areas in 2018. The development and implementation of Commissioning Plans for CCAs in 2018 is a priority of the Corporate Plan. Targeted at an age cohort of 14–17 years, CCAs comprise a set of services from a range of providers that meet the child or young person’s identified needs in their family and community context that will prevent them from having to be placed into residential care or will allow for their planned exit from such care. The options for delivery of these wraparound service options include: (1) investing in Tusla’s own capacity through identifying FRCs to deliver CCAs; (2) building and extending relationships with community partners through detailed care packages; and (3) commissioning specialist, individually focused, community-based service alternatives to residential care and private foster care services (Tusla, 2016b). In regions where the CCA had been rolled out, a positive development to emerge from the CCA commissioning plans was that they allowed for greater identification of intensive therapeutic supports and gaps in services at the higher end of prevention and which are not in place in certain areas (Common Data). The location of the CCA within the Commissioning Unit reflects the common process as well as principles upon which CCA and other commissioning plans are based. These include interagency integrated working practice, investment in the capacity of local services, flexibility (within Tusla structures or in partnership with external providers), and commitment to evidence-based, outcome-focused approaches.

5.4 **Summary Messages**

- Critical underlying principles and practices of Tusla’s commissioning approach include an ethos of partnership working and an understanding of commissioning beyond procurement.
- It embodies a fundamental commitment to supporting the local function of commissioning.
- In its key guidance and tools, Tusla has made an explicit commitment to putting in place a capacity-building approach to implementing commissioning.
- Clarification about how the principles and practices are intended to be interpreted is communicated in the guidance documentation. This includes an indication of what is to be commissioned, at what level, and by whom.
- The commissioning infrastructure is in place, including the planned scope and structures underpinning the Commissioning Unit.
- Operationally, the management mechanism includes separation of the functions of compliance and commissioning.
- A number of commissioning mechanisms are in place under the aegis of the new Unit, including a joint commissioning approach.
- Early indications are that the principle of working with organisations to support addressing gaps in provision as an alternative to termination or decommissioning is part of the intended approach.
6

Findings Three – Capacity Building: Commissioning Plans

6.1 Introduction and Context

Tusla’s capacity-building approach to commissioning has been largely facilitated through the provision of technical support from the Institute of Public Care (IPC) in the UK. In particular, IPC has worked with the agency to deliver training on the application of a standard process for the development of commissioning plans. As outlined in the Methodology, within the timeframe for the Commissioning Work Package, our study has generated data from the experience of Tusla staff directly involved in this Phase 1 training. This is summarised in the section below. Through the Common Data Collection we have a number of perspectives of individuals (internal and external to Tusla) who are aware of, though not directly involved, in the formal pilot programme, and these are represented in other sections of this report. Finally, while the development of Commissioning Plan is a partnership model, involving external stakeholder engagement, our core data has focused on the experiences of Tusla staff.

Support for the process of developing a standardised Commissioning Plan has been the key capacity-building measure provided by Tusla to internal staff. As such, it represents the first formal engagement with commissioning within the agency. As set out in Tusla’s Commissioning Toolkit (Tusla, 2017b: 11):

A Commissioning Plan (CP) is a published document produced by commissioners, following a co-productive process of development with partners, which summarises need and provision, and defined commissioners’ future intentions. The Commissioning Plan should be the basis for commissioning decisions and be published, reviewed and updated regularly.

Commissioning plans are an integral part of the process of shaping service provision, a mechanism for conducting robust needs assessment and resource mapping. As such, they represent a relatively new concept for Tusla and Ireland (IPC, 2016). Tusla’s Commissioning Toolkit (2017b: 12) sets out the following substantive characteristics of a Commissioning Plan:

- Contains a picture of current needs and provision, what that might look like in the future, and how commissioners will support and intervene in a sector.
- Supports its analysis by bringing together material from a range of sources, such as needs assessments, asset mapping, surveys, service monitoring or reviews, and statistics into a single document.
- Presents the data that all stakeholders need to know and use, and helps providers develop effective plans.
- Is the start, not the end point, of a cycle of shaping need and service provision.
- Is provided in a format that is straightforward and easy to use, in a brief document that analyses as well as describes.

12 The Institute of Public Care (IPC) commissioning model has been developed across public care services such as health, education, social care, and housing in the UK. See: http://ipc.brookes.ac.uk/.
In late 2015, IPC commenced the first of a three-phase programme to support five Tusla areas and one national workstream (Domestic and Gender-based Violence) in developing commissioning plans: the Phase 1, Pilot sites.\textsuperscript{13}

\subsection*{6.2 Commissioning Plans: Phase 1}

Developing a Commissioning Plan involves a series of steps through data collection and analysis, alignment with national strategic direction, and consultation with stakeholders, including providers, other commissioners, children and young people, families, and communities. This section provides a snapshot of the experiences of Tusla participants in Phase 1 in producing Commissioning Plans (CPs) using a framework developed by IPC. In particular, it explored:

- the readiness of participants to construct a CP
- perceived benefits and challenges of engaging in the CP process
- capacity to engage in the process (current and future)
- consequences of undertaking this approach as a way of working.

As indicated earlier in this report, the delivery of training is an evolving process, and the training delivered in Phases 2 and 3 (outside the scope of this study) is building on the experiences of earlier learning. Nonetheless, to the extent that these first experiences are resonant for further development and training, they are summarised below.

\subsection*{Role of Information & Data}

Overall, a number of issues emerged related to accessing and interpreting data. The need to source and analyse data (national and area) as well as financial information required specific skill sets in research and data analysis that, for the most part, went beyond the capacities of the teams charged with producing the Commissioning Plan. For some sites, the exercise of conducting a needs analysis required assistance from external providers. Respondents commented on the complexities of accessing data in Ireland as well as issues of data validity and verification. Access to area data was particularly problematic for sites that crossed borders (partial counties), especially in Dublin, where HSE boundaries and County Council boundaries were different from area ones. Such sites struggled to map the national data onto their boundary. In addition, census data needed to be de-aggregated to fit in their borders.

Skills lacking included administrative support for collating data as well as higher-end expertise in data analysis and interpretation. While some sites benefited from having a team member with an aptitude for data or access to contacts that could provide this, resourcing of this nature happened by chance rather than planning. Most reported spending considerable time and effort in research-related tasks such as figuring out patterns and trends. A strong sense prevailed that such functions could have been assigned to research personnel. For the future, respondents believed that efficiencies could be achieved if in-house resources at Tusla could extract material from national data sets for the participating areas at the outset, as well as providing support with analysis. CYPSC plans and data, when they existed before the collection of information for the Commissioning Plans, greatly assisted the process, with respondents recommending that data existing in CYPSCs should be made available via Tusla.

In relation to aspects of gathering financial data, aside from difficulties in financial systems that did not allow for a breakdown of spend into patterns or cohorts (e.g. extracting spend by age group), the findings highlighted a number of benefits associated with transparency on spend. Among participant sites, conducting a review of expenditure highlighted the high spend on private residential care. While this was not surprising, the act of producing the figures and, more importantly, sharing the information

\textsuperscript{13} The areas were Donegal, Dublin North City, Sligo/Leitrim/West Cavan, Waterford/Wexford, Dublin South West/Kildare/West Wicklow.
internally and externally prompted a shift in thinking about residential care and willingness to do things differently. The introduction of the Creative Community Alternative (CCA) initiative, in 2016, aligned with this awareness.

Internally, respondents spoke of a different dynamic emerging in settings where diverse staff came together to examine needs and gaps in their service provisions. Previously, one staff cohort (clinical) would have focused only on needs and another (financial) on costs. The exercise of coming together initiated dialogue about looking at community alternatives, including wraparound services. Transparency about spending was perceived as a major culture shift. The sharing of information beyond Area Manager or financial personnel was new and welcomed. A number of interviewees commented on their previous experience as part of HSE culture, where budgetary information was typically not accessible across staff teams.

**Tusla team and skill set**

The primary staff undertaking the Commissioning Plan were Area Managers and PPFS staff. Regional Implementation Managers were involved in a support role. The involvement of additional staff varied according to the composition in individual areas and included: staff in alternative care and child protection, including team leaders and some PSWs; Business Support Manager; Data and Information Officers; Child and Family Network coordinator; and CYPSC coordinators. Above all, participants highlighted the need for the process to extend to Principal Social Workers in Alternative Care and Child Protection. Respondents indicated that their involvement in the development and their endorsement would be critical for the Plan to be used going forward as a basis of senior management meetings.

**Stakeholder Consultation**

The process called for active engagement with stakeholders through specially convened events that took place alongside the development the Commissioning Plan. Most external engagement events included a mix of funded and not-funded agencies. Depending on the number of funded agencies, some sites held different events targeted to larger and smaller organisations. For the most part, they extended beyond community and voluntary sector organisations to include a broad range of Tusla and statutory providers. Most sites engaged at two phases of the process, the first to outline the intent of the Commission Plan exercise and the second to present draft findings from the needs analysis.

Previously, no such forum existed for meeting providers outside of one-to-one interaction. Engaging in a broad-based consultative forum represented a fundamentally new way of working. Presenting a draft Plan was seen as communicating a strong message that Tusla was no longer open to the community sector ‘selling’ a particular approach or service. Consultation events provided a forum for transparency: staff could be clear with agencies on why changes were being made, that they were based on a rationale and not personal to the Area Manager. Participants who were interviewed commented on the openness of the process, whereby stakeholders could observe a robust process in which Tusla set priorities based on drawing conclusions from data and research.

Events provided a valuable opportunity to communicate that commissioning is not all about reducing funding but represents the start of a more inclusive process of working with agencies and partners in areas. Nonetheless, it was acknowledged that they are in their infancy, with the need for learning generated to be shared.

**Using the Methodology**

Overall, respondents were positive about the methodology used by IPC to structure and guide the
production of a Commissioning Plan. The format offered guidance in following a clear process, imposed a structure with timeframes and deliverables, and provided facilitation in managing stakeholder consultation.

With commissioning being new in Ireland, some elements of the model presented challenges. Firstly, the language of Market Position Statements proved problematic in a number of ways. Throughout the consultation with the Commissioning Advisory Group, and at initial events hosted by IPC to introduce the process, use of the term ‘market’ encountered some resistance. Several said that once they clarified that the process encompassed elements of a community needs analysis, they could confidently engage with it. In communicating with external stakeholders, the terminology of the ‘market’ was seen as distracting and in some cases divisive.

Secondly, certain elements of the timeframe could have been shortened. Also, during the year-long process, several key individuals changed roles or moved jobs. A more concentrated timescale could have averted this. The exercise of producing the Plan proved challenging in an environment where many individuals were new in their roles and people had not previously worked together.

Nonetheless, participants viewed the process as valuable. By virtue of being part of a pilot, respondents expressed a commitment to ‘getting it right’. Without the pressure to adhere to deadlines, respondents acknowledged, the process would not have been completed due to the demands of the work environment. Rather than undertake an annual commissioning plan, respondents suggested that a cycle of every two to three years would be more efficient. Participation in the pilot provided ‘time out’ to comprehend and ‘grapple’ with the whole commissioning process. The opportunity for the pilot sites to gather together in facilitated learning events to share their experiences in developing plans was perceived as highly valuable.

Noting the variation in the nature of plans that emerged as end products, respondents requested more feedback from Tusla and IPC on the material content of individual documents.

**Implementation issues arising**

For the most part, asked about the new learning generated through the data collection and analysis, respondents indicated that the exercise confirmed what individuals already knew.

Nonetheless, they highlighted the value of having one coherent document that summed up the resources, needs, gaps, and pressure points, thereby providing the evidence for decision-making. The Plan served to provide a framework for making decisions. In practice, respondents highlighted the value of the Plan in providing a rationale for discontinuing certain services no longer compatible with identified needs and gaps. In preparing for the implementation of the Plans, respondents raised a number of critical issues:

- Some queried whether the target areas identified in their area plans could be superseded by Tusla corporate priorities.
- The cost of staff time in producing a plan can only be justified if it is going to make a difference to how funding is allocated within areas.
- In order to have an impact, the plan needs to be high on the agenda of Regional Directors.
- It should be seen as a ‘live’ document, with an action plan attached to it and used as the basis for performance.
- There is a need to track whether any new direction is having an impact, and to use that to further inform the future.
- A critical issue is how to free up the funding for the focus areas identified.
6.3 Summary Messages

- The Area Planning process was perceived positively overall.
- Gathering data proved highly valuable in providing a framework for making decisions based on evidence.
- The high spend on residential care was highlighted across sites and served as a focus for discussion.
- The process needs to extend beyond PPFS staff to include Principal Social Workers in Child Protection and Alternative Care.
- Deficiencies in skill sets required for accessing and interpreting data existed in designated teams.
- The language of commissioning incorporating the terminology of Market Position Statements proved a distraction in engaging external and some internal stakeholders.
- Participants were unclear of plans for implementation of Area Plans.
Findings Four – Management of Funding Relationships

7.1 Introduction

Alongside the introduction of commissioning, the mechanisms and processes for conducting business between Tusla and the agencies in receipt of funding under Sections 56 and 59 of the Child and Family Act 2013 underwent a significant overhaul. Following a lengthy review, in autumn 2017 Tusla introduced a new Service Agreement (Tusla, 2017d) and an accompanying Good Governance Framework (GGF) (Tusla, 2017e) to define the agency’s relationship with external organisations. To some extent, the changes introduced were intended to redress the difficulties encountered during a period of transition from the HSE systems into the new agency, as well as the interim arrangements for managing relationships with external providers operationalised in a 2016 Service Agreement.

The first section below draws on the Baseline Study in identifying the context into which Tusla sought to introduce reform. The following two sections explore the intent and process underlying the fiduciary and governance arrangement proposed by Tusla as presented in the Common Data responses and documentary analysis. The concluding section identifies a number of implications for the capacity of community and voluntary sector organisations.

7.2 Systems in Transition

The baseline study examined perspectives on the overall systems in operation between Tusla and external agencies in relation to the oversight and regulation of funding prior to commissioning. Historically, under the HSE, structures and standards for reporting and renewal of funding varied widely across the country’s 17 Local Area Management catchments. Reflecting on past practice, some respondents noted extensive reporting requirements, while several (including large organisations) had experienced ‘light touch’ in terms of documentation. For the most part, reporting requirements focused on legal and compliance issues, with requests for data on the performance of services not viewed as onerous. From 2015, the importance of targets and performance indicators for services began to assume a central place in contractual arrangements with Tusla. However, respondents characterised the change within a broad context of greater statutory monitoring and evaluation requirements that had commenced at the HSE and intensified under the aegis of Tusla. These included inspection and audit requests from the Health Information and Quality Authority (HIQA) and increased monitoring of the quality of service, especially in residential care and high-risk areas. To a large extent, the requirement introduced in 2016 on the part of Tusla’s Service Agreement for providers to ‘evaluate the effectiveness, efficiency and value for money of the provision of its services on a regular basis’ (Tusla, 2016b: 21) represented the culmination of a period of increased statutory regulation with the heightened emphasis on performance. It was therefore largely anticipated.

Nonetheless, the increasing complexity of accountability and reporting requirements from Tusla contained in the 2016 Service Agreement posed significant challenges. Respondents noted that in addition to the

14 The Health Information and Quality Authority (HIQA) is an independent authority established to develop standards, inspect and review health and social care services, and support informed decisions on how services are delivered in Ireland.
compliance and legal documentation required, additional monitoring and evaluation requirements, such as setting targets, developing Key Performance Indicators, and providing business plans, were placing a burden on their internal staff capacity. At the same time, the nature of new requests geared towards unit cost analysis, for quantifiable data on persons and outcomes, called for dedicated resources (human and system) in which organisations were lacking. For small and medium organisations in particular, compliance with many of these information requests required greater reliance on the skills of CEOs or board members or needed advice from external professionals.

In particular, the introduction of a ‘value for money’ provision in the 2016 Service Agreement required organisations to produce evidence of effective use of funds, value achieved in the application of funds, and the avoidance of waste and extravagance. Service providers queried the extent to which economic considerations, voiced in terms of value and rationalisation, appeared to be dominating the discourse on funding. Respondents raised a number of concerns, notably whether a value-for-money rationale is compatible with the objective of delivering better outcomes for clients. In an environment focused largely on cost efficiencies, some participants reported experiencing pressure to demonstrate effectiveness through providing ratios of staff-to-client allocations. They expressed concerns about reducing time spent with clients at a time when the complexities of working with individuals had increased as a result of external, complicating factors such as difficulties in the housing sector. The need for stricter adherence to accounting for cost per service or service user was perceived by these respondents as constraining opportunities for re-allocating or re-assigning resources internally.

7.3 Revising Relationships

As outlined above, prior to the introduction of commissioning, systems in place for managing relationships with external providers were undergoing transition. Providers were experiencing greater regulation and heightened emphasis on performance, although practice varied across areas. In particular, inconsistency in application and lack of transparency emerged as a concern for all stakeholders. Respondents in Tusla and externally commented on the ambiguities of a service delivery system that, pre-commissioning, reflected a lack of uniformity and was characterised as a ‘localised and relationship-driven culture’ (Common Data).

The nature of requirements contained in the 2016 Service Agreement, the first tangible engagement with Tusla in a commissioning environment, involved levels of complexity that proved operationally challenging. The revised Service Agreement and Good Governance Framework introduced in 2017 provided an opportunity to redress many of the concerns that manifested. Together, the SA and GGF presented by Tusla in late 2017 provide the basis for future engagement. The new model is planned to apply to the 986 grant-aided agencies incorporating organisations in receipt of less than €1,000 to over €7m per annum (Tusla, 2018b: 30). It establishes a set of principles and operational specifications to be applied across funded agencies, and sets out recommended standards of governance, compliance, and reporting to be applied to organisations appropriate to their size. Standards to be applied depend on the level of funding or total income of the organisations, classified as those under €250,000 (from all sources) or those over that amount. Included is a phased implementation plan for organisations to achieve compliance. Stated aims included making compliance more achievable for funded agencies, and consistent reviewing and monitoring of financial and governance data provided to Tusla (Tusla, 2017c: 32).

Initially, the revised structures sought to replace the 2016 Service Agreement with a shorter and simpler contract clearly specifying expectations and representing a partnership approach (Tusla, 2017c). The process, involving the services of a specialist consultant as well as a series of approvals and review through Tusla’s legal and financial departments, took two years to finalise. A proposed draft of the Service Agreement provided in mid-2017 to the National Commissioning Advisory group (NCAG) contained a number of elements that members identified as highly technical and requiring specialist legal advice. Following an extensive review of the proposed agreement by the NCAG, a number of changes were incorporated. On the advice of that group, in autumn 2017 Tusla undertook regional consultations with
service providers to discuss the new framework. The Wheel functioned as a strategic partner in the process, which included a number of robust exchanges (Common Data). While the provisions contain a number of areas, for example, in relation to the transfer of liability, which resides primarily with the service provider and the extent of Tusla’s intellectual property ownership, the process incorporated a procedure for review in mid-2018 to further examine provisions in operation. While the outcome may have required compromise across several aspects, participants acknowledged that the negotiations were conducted in a spirit of partnership. One community and voluntary representative summed up a commonly held view:

There was a high degree, I believe, of practical appreciation amongst the area managers of the sensitivities of the changes in the contract and what they will mean for Tusla-funded organisations. (Common Data: R158)

In producing the new agreement, Tusla recognised a number of operational difficulties encountered by providers in using the previous Service Agreement. For example, acknowledging the complexity of a system that required organisations to fill out a separate SA per service funded, the new requirements are for agreement per organisations, with the service particulars to be one set out in separate schedules. The Value for Money provision stipulates that providers must ‘to the best of Your ability drive, deliver and report Value for Money (“VFM”) in the use of the Funding in a manner that maximises effectiveness and outcomes’ (SA: 17). Linking value with effective outcomes expanded the reference in earlier documents that equated value for money solely with cost savings.

7.4 New Requirements

In practice, the new Service Agreement operationalised a set of principles and standards set by a 2014 Circular from the Department of Public Expenditure and Reform Plan (DPER) specifying the management requirements for SLAs. The revised contract states that adoption and compliance with the provisions contained in the Circular is central to the reporting and governance obligations for transparency and accountability in public money (Tusla, 2017d: 6). These included the requirement for ‘clear measurable outputs’ and that the desired outcome be stated. Alongside these, processes that establish the timing and methodology of review of performance against outputs and outcomes specified in the agreement must be included. The provisions also contain a number of ‘assurance requirements’, including a declaration confirming that all conditions have been met and that the required service or outputs delivered have been signed at management level. These are additional to the assurance requirements that take into account relevant governance requirements, for example, the Code of Practice for the Governance of State Bodies and compliance with public procurement policy and pay policy.

One notable element of the new arrangement is the extent of the transfer of risk to the external agencies. Organisations over €250,000 must have an Audit Committee and produce quarterly management accounts. They are required to have in place a three-year strategic plan approved by their Board. All organisations must have a risk management plan and, for those over the €250,000 threshold, a Risk Committee. Greater transparency is required of organisations in relation to their Board composition, and terms of service are limited to three years. The new arrangements call for ‘a governance assurance model and plan for internal operations with recommendations on functioning, staffing and systems’ (Tusla, 2018b: 30). In relation to the role of Board members, accountability responsibilities include oversight of financial and management controls. Systems and internal financial stipulations aligned with the DPER Circular include HR management and staffing policies, including compliance with regulatory standards and the provision of support and training for staff.

The structure for the new Commissioning Unit incorporates a Compliance function to support the stated aim of making compliance more achievable for funded agencies. The approach recognises that organisations may struggle to comply with the governance standards, and where deficiencies exist, Tusla will work on a ‘comply or explain’ basis working towards improvement (Tusla, 2017c).
In accordance with the new 2017 Service Agreement and accompanying Good Governance Framework introduced for 2018, the Financial Compliance Unit will be responsible for the following in relation to Tusla-funded services:

**Service Level Agreements:** Maintenance and monitoring of signed SLAs.

**Compliance Statements:** Issuing and maintaining yearly statements to funded organisations.

**Financial Statements:** Review of audited financial statements and corrective actions taken if necessary.

**Risk Analysis:** Identifying high-risk organisations for review or audit.

**Internal Audits:** Communicating audit findings to commissioners and tracking implementation of recommendation.

Desk reviews will seek to assess organisations’ compliance with the new Service Agreement and Good Governance Framework. Standards to be applied depend on the level of funding of service providers (those under and over €250,000) and will seek to ensure, for example:

- segmented listing of Tusla funding and expenditure
- directors’ remuneration levels, meetings, and transparency
- inconsistencies in audited or financial statements
- levels of governance costs
- potential risks or deficits operating.

Under the new model, interaction between Tusla and providers has become more formalised. Organisations must engage with an Area Manager or National Account Manager in a specified number of annual meetings, with documented processes to review service performance. Service deliverables include specified outputs and anticipated outcomes. The area-based structure allows for funding (in the main) to be awarded by the local Area Manager and services agreed at the local level. The delegation of responsibilities associated with commissioning recognises, however, that the area-based structures are not equipped to carry out in-depth financial and governance functions. Tusla has proposed a centralised solution to support Area Managers in relation to these functions: ‘This will enable the Area Managers to focus on their key area of expertise (service), and support will be provided centrally via independent advice and expertise on financial and governance matters’ (Tusla, 2017c: 33).

### 7.5 Capacity and Resources

In fulfilling the requirements outlined in the section above, training and support systems are needed. The proposed arrangements raise a number of issues concerning the capacity of the community and voluntary sector to engage in a commissioning approach. In a competitive funding environment, organisations will be required to have the requisite internal capacity and skills to be able to devote attention to critical areas such as planning and resource-allocation, alignment of plans with targets, and staff training. The availability of information systems, financial management expertise, and human resource personnel is essential for organisations to fulfil such functions.

At the same time, a number of administrative and operational core functions required of ‘commissioning-ready’ organisations are underfunded and hence absent from the structures and internal governance capabilities of service providers. Among non-profit providers, the core functions associated with compliance, governance, and monitoring are typically under-resourced. Service providers interviewed for the baseline study characterised their organisations as operating with ‘flat’ structures, with funding allocated to clinical staff and little capacity for management or administrative functions. In an environment where the state agency only funds direct services, these functions typically have to be funded through other sources.
Participants in the baseline cited the wide disparity in internal capacity and infrastructure between different-sized organisations as an issue for the future. Consensus existed that large providers are better placed to compete in a commissioning environment. Before commissioning was introduced, a number of the organisations featured in the baseline study had been the beneficiaries of external investment in their administrative and operational capacity as well as competencies in evaluation and service design. Acknowledging that bigger, better-resourced organisations had a favourable advantage, one such participant stated:

> You know, we have been doing proposals and funding applications on a sort of large, multi-annual ones with some of the philanthropic funders, so we have built some capacity within the organisation to do that, but I don’t think there’s been any real support for organisations around it. (Baseline: R8)

The call for allowances to be made for smaller organisations continued, with the issue emerging as a concern throughout the period of the study. Several participants interviewed for the Common Data study highlighted the risk of losing organisations that have a history of providing quality services to the community. One participant expressed a widely held belief that small organisations:

> will be passed out by larger national agencies who have the ability to put together really good quality commissioning documentation and, you know, in a competitive process could lose out badly. (Common Data: R154)

In rural areas in particular, respondents highlighted the role played by small organisations embedded in local communities and the intangible ‘value added’ aspects of their services. Others expressed a related concern that the commissioning framework would lead to a ‘completely service-driven’ landscape in which attention to elements of support such as participating in informal networks would be lost. The Tusla staff member below stuck a cautionary note in reflecting on the import of commissioning for small community-based providers:

> A risk we run with commissioning is that it will work fine in the larger urban areas because you’ll have organisations with the capacity. But you still need services in very remote community settings, and the bigger organisations will not have any interest in working there, so we can’t afford to lose the smaller organisation in this journey. (Common Data: R88)

In comparing the position of small and larger providers to compete in a commissioning environment, the issue of full-cost recovery emerged as a key concern. In particular, the ‘hidden’ cost of providing services, including time spent managing staff as well as expenditure on payroll and general overheads, was often questioned. Among small and medium-sized organisations participating in the baseline study, a perception existed that core costs could be more easily absorbed by large providers. Larger organisations operating with human resource, financial, and information management systems already in place, respondents believed, could subsume these costs to produce more cost-efficient tenders. Likewise, with systems in place to administer these functions, they could manage contracts awarded more effectively.

7.6 Summary Messages

- Principles and practices by which Tusla is constrained include the agency’s responsibility to comply with statutory requirements for transparency and accountability of public money.
- Under the new governance framework, interaction between Tusla and service providers has become more formalised, with greater emphasis on documented processes and standardisation.
• For funded agencies, the complexity of accountability and reporting requirements is placing a burden on internal staff capacity.

• New stipulations introduced by Tusla for ‘assurance requirements’ challenge organisations that are under-resourced in corporate management, legal, and compliance functions.

• Larger organisations with human resource, management, and information systems in place are viewed as better placed to subsume the costs associated with commissioning.

• Value-for-money provisions are perceived among providers as heightening economic considerations as the primary criterion for funding.
8

Findings Five – Evidence and Outcomes

8.1 Introduction

This section presents findings in relation to the theme of evidence and outcomes in Tusla’s work. It is in two sections. The first focuses on Tusla’s overall expenditure and the service mix provided by external organisations funded under Section 56 of the Child and Family Agency Act, 2016. This data speaks to the overall connection between what services Tusla funds internally and externally and its overall strategic aims in respect of prevention, early intervention, and Family Support. The second section is more discursive and focuses on the now-developing agenda of evidence-informed practice and outcome measurement within Tusla’s Commissioning strategy. It is based primarily on qualitative interviews and some documentary analysis.

8.2 Expenditure

As set out in the methodology section, a key overall question for the full study on the PPFS programme relates to the place of prevention, early intervention, and Family Support in Tusla’s culture and operations, and whether this is changing over the lifetime of the project. In order to generate the data necessary to answer this question, we worked collaboratively with the PPFS national team on developing a categorisation scheme to reflect Tusla’s main areas of expenditure. Different approaches were considered, for example, extracting data on prevention spend across Hardiker levels of need, from available sources on pay and non-pay expenditure. This approach was rejected, however, because of the technical and resource challenges it would involve. The scheme that was agreed allowed for the key categories of Family Support (including prevention and early intervention), Child Protection, and Care to be isolated with Tusla’s expenditure. The choice was somewhat pragmatic in that it reflected the fact that it would be possible to group the main extant subcategories of expenditure into the overall categories more readily, with fewer assumptions about the nature of posts or grants. The overall categorisation scheme was as follows:

<table>
<thead>
<tr>
<th>Care</th>
<th>Educational Welfare Services</th>
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</thead>
<tbody>
<tr>
<td>Child Protection</td>
<td>Therapy and Counselling</td>
</tr>
<tr>
<td>Family Support</td>
<td>Domestic and Sexual Violence Services</td>
</tr>
<tr>
<td>Management, Support,</td>
<td>Legal and Guardian Ad Litem</td>
</tr>
<tr>
<td>and Administration</td>
<td></td>
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</tbody>
</table>

While still a challenging overall task, the nature of posts and role titles allowed the Whole Time Equivalent (i.e. positions) and pay cost breakdown to be established. Similarly, it was relatively straightforward to allocate most of the non-pay items to the major categories. More difficult was the allocation of some non-pay items to the different categories, particularly those covered by Service Agreements under Section 56 of the Child and Family Agency Act, 2013. This aspect of the work required some ‘best guesses’ and assumptions by the PPFS national team staff – these were consistently applied across the three years for which data was available. Thanks to the work of the Tusla team involved, it was possible to generate the required data for 2015, 2016, and 2017.15

15 A separate background paper has been prepared which indicates some of the main allocation decisions and assumptions behind the categorisation scheme.
Taking the baseline year of 2015, Tusla’s overall expenditure was €650 million, of which €234 million was in pay and €416 million was in non-pay. Pay costs covered a total of 3,461 Whole Time Equivalent Positions. Of this expenditure, Care was the dominant category, representing 53% of total expenditure and 59% and 43% of non-pay and pay costs, respectively, and 46% of all WTEs. Family Support represented 15% of total expenditure, 19% of non-pay and 9% of pay costs, respectively, and 8% of WTEs. Child Protection reflected 12% of overall expenditure, 5% of non-pay and 25% of pay costs, respectively, and 22% of WTEs. Thus, the profile in 2015 is one where the Care category is most significant across all in terms of pay, non-pay, and WTEs, Child Protection has significant WTE and pay costs, and Family Support has lower WTE and associated pay costs but higher non-pay costs than Child Protection.

Not surprisingly, in the relatively short time between 2015 and 2017, these relativities have not changed significantly. That said, in the context of an overall increase in Tusla’s budget to €703 million, there have been some significant changes in each category and differences in the level of change between them. Thus, Family Support WTEs have increased in absolute terms by 109, a 38% increase, with a very slight increase in Child Protection WTEs of 2% and a slight decrease of 1% in Care. In the period, Family Support pay costs increased by 41%, Care pay costs increased by 7%, and Child Protection costs reduced by 2%. In relation to non-pay costs, Family Support increased by 11%, Child Protection by 13%, and Care by 5%.

In designing the approach to analysing the data, the desired direction of change in the main expenditure categories was that Family Support (and prevention, early intervention) would increase to reflect Tusla’s commitment to the area, and that over time, if these services achieve their intended outcomes, there would be reductions in Child Protection and Care spends. With the caveat that the changes in proportions of total expenditure are relatively small and the period covered is only 24 months, Family Support as a proportion of spend increased by 2% between December 2015 and December 2017, total Care spend reduced by 1%, and Child Protection spend also reduced by 1%. The changes in the proportion of expenditure in these latter two categories in this brief period cannot be related to the impact of Family Support in any way. However, shifts within the overall expenditure mix, while minimal, can be read as the beginning of or potential for the overall shifts in expenditure sought by the overall PPFS programme of investment.

**Externally Funded Services’ Mix**

As stated in the methodology section, an original objective of this study was to establish a baseline of service provision grant-aided by Tusla under Section 56 of the Child and Family Agency Act, 2013. Ultimately, if a suitable methodology was implemented, it would be possible to track changes in the service mix, in particular the degree to which there is a shift towards evidence-informed prevention and early intervention and Family Support services, over the study period and into the future. Primarily for resource reasons, this objective was not realised. With the support of an external consultant, Tusla designed and implemented a Service Arrangement Survey, operationalised through the SurveyMonkey platform. The UCFRC team inputted to the development of the survey in relation to Family Support service categorisation.

The survey proved challenging to complete for many of the funded agencies, on account of problems with question clarity and interpretation, and management of the data input. Additionally, the lack of standardisation in measures and units of services did not facilitate appropriate comparisons between services – ultimately the survey was perceived negatively among the externally funded service community, which was articulated at an NCAG meeting. One consequence was that implementation took much longer than anticipated – the survey was closed in 2017, having been opened initially in 2015. Thus, the survey reflects service provision across the period rather than a single calendar year as initially intended. The UCFRC agreed to analyse the available data and ultimately worked with 437 complete responses, representing 82% of the number of services agreements in 2016. The foregoing caveats and concerns in analysing the data suggest that what follows should be viewed with caution.
Of the 437 complete questionnaires, 33% were from the South, 21% from Dublin North East, 20% from the West, 17% from Dublin Mid Leinster, and 9% were nationwide service providers. From this sub-sample of complete surveys, 48% had a charitable status, 26% were limited companies, and 26% reported other organisational legal structures. This analysis identified the distribution of services by region. The South reported the largest number of Family Support service providers, as well as Domestic Violence, Early Years, and Education and Welfare Services. Dublin North East has the largest number of providers of Alternative Care, Child Protection Services, and Psychology.

Table 5: Service Providers by Region

<table>
<thead>
<tr>
<th>Findings</th>
<th>Family Support</th>
<th>Alternative Care</th>
<th>Child Protection</th>
<th>Domestic Violence</th>
<th>Early Years</th>
<th>Education Welfare</th>
<th>Adoption</th>
<th>Psychology</th>
</tr>
</thead>
<tbody>
<tr>
<td>West</td>
<td>65</td>
<td>5</td>
<td>8</td>
<td>21</td>
<td>20</td>
<td>7</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>South</td>
<td>95</td>
<td>13</td>
<td>16</td>
<td>22</td>
<td>68</td>
<td>23</td>
<td>1</td>
<td>6</td>
</tr>
<tr>
<td>Dublin North East</td>
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<td>23</td>
<td>9</td>
<td>30</td>
<td>16</td>
<td>0</td>
<td>9</td>
</tr>
<tr>
<td>Dublin Mid Leinster</td>
<td>42</td>
<td>9</td>
<td>7</td>
<td>16</td>
<td>24</td>
<td>7</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>National</td>
<td>19</td>
<td>6</td>
<td>2</td>
<td>7</td>
<td>3</td>
<td>4</td>
<td>2</td>
<td>4</td>
</tr>
</tbody>
</table>

From the data available, it was possible to determine the number of organisations that provide a single service and those that provide multiple services. From this analysis it was also possible to identify that most services reported being engaged in family support (n = 276), followed by early years services (n = 145).

Figure 3: Single and Multiple Service Providers Nationwide

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16 ‘National’ refers to those agreements covering services provided on a nationwide basis.
Family support provision was explored further to determine the nature of the sub-services provided. The majority reported providing Integrated Family Services: community based (n = 97), followed by Integrated Family Services: targeted bundle (n = 77).

Figure 4: National Sub-Service Category of Family Support Services Nationwide

While this survey proved unsuccessful insofar as it did not generate the detailed data initially sought, the information obtained offers a broad profile of service provision nationwide. More importantly, it illustrates the value in generating such information and doing so with regularity. However, the experience also demonstrates the importance of designing a fit-for-purpose instrument that is implementable locally without overly burdening funded organisations or Tusla’s own staff. In the wider context of matching needs and services developing through the Area Planning processes, it will be critical that this type of information on service provision be available to support Area Managers in their work. But it is also critical that the information be aggregatable to regional and national levels, so that it will be possible to establish the degree to which strategic commitments to evidence-informed prevention, early intervention, and Family Support are met in the service mix provided directly and funded by Tusla.

8.3 Moving Towards Evidence-Informed Practice

A core principle of the Commissioning Strategy is the requirement to focus on services that are evidence-based and evidence-informed in order to achieve defined outcomes for children. Developing capacity to monitor and evaluate outputs and outcomes had, from the outset, formed part of the agency’s commissioning remit. However, this element has not been addressed during the course of this study. Rather, it has been accorded priority in the implementation phase of the Commissioning Strategy. As outlined in the Corporate and Business Plan 2018, Tusla is proposing ‘to develop a Performance and Accountability system outlining agreed performance targets that will measure and monitor service delivery’ (Tusla, 2018b: 62). Additionally, the Corporate Plan committed to the development of an Outcomes Framework that ‘clearly articulates the desires outcomes and measures for children, youth, families and communities who engage with Tusla services’ by the end of 2018 (Tusla, 2018a: 63).

Changing expectations from Tusla in regard to the use of evidence had been widely anticipated. In preparing for the new environment, the Baseline Study elicited views on the challenges posed in practice for respondents in gearing up to work in an outcome-focused culture. As these remain highly resonant for the implementation of Tusla’s approach, they are summarised in this section. To the extent that it featured in the Common Data Collection, the issue of evidence arose in the context of participants underscoring that it is a critical next step, instrumental in ensuring a meaningful transition to commissioning practice.

In anticipation of heightened attention to the use of evidence in Tusla’s decision-making systems, respondents from funded agencies reported increasing emphasis on the role of evaluation in their organisations. While, for the most part, service providers were supportive of the principles behind
the need for greater accountability and of the benefits of evidence-based practice, they highlighted several capacity deficits. These include lack of capacity required to generate, analyse, and utilise data; the need for training and guidance in defining and measuring outcomes; and recognition of the complexity of developing meaningful outcome indicators. Respondents from Tusla largely concurred with these views and expressed a need to develop specific competencies such as skills with which to access and evaluate evidence as critical, particularly in negotiating with larger organisations operating with in-house research staff. Respondents interviewed during the Common Data Collection indicated that while changes in regard to the use of evidence were not yet apparent, the development of training and guidance would be a critical next step.

With the Commissioning Unit in operation, and governance and mechanisms for engagement in place through the SA, senior staff who were interviewed indicated that the next priority will be to focus attention on the issues of evidence and outcomes (Common Data). Importantly, this exercise could not take place until the issues around contracts and governance had been addressed. One potential approach outlined had been to cultivate the development of expertise within sector areas, based on models of best practice. As outlined by a senior staff participant, Tusla recognises that across the categories of services, each speciality area (e.g. fostering or bereavement services) has its own data-gathering tools. Any approach undertaken in designing outcome data systems, therefore, is best developed in consultation with the service providers.

8.4 From Outputs to Outcomes

Both in principle and in practice, transitioning from a culture of outputs to outcomes presents a number of challenges for management and evaluation systems. Specifically, a focus on outcomes requires information to be provided to demonstrate effectiveness in terms of the difference made to service users. Historically, requests for information on the nature of services provided had pertained mostly to activities and outputs. As articulated by the participant below, outcome-oriented assessment challenges recipients of funding to ask themselves the fundamental question whether their service made a discernible difference:

> At the end of the day, can we demonstrate that the input that we offer to our client groups is actually making a difference in their lives with specific reference to the issue we are working with? (Baseline: R10)

At baseline, respondents reported an elevated organisational focus on developing outcome and performance indicators, with the majority actively engaged in designing systems to monitor the effectiveness of their work. However, several expressed a sense of uncertainty about standards and levels of evidence required by Tusla and indicated the need for detailed guidance from the agency. Apart from the national outcomes included in Better Outcomes, Brighter Futures and a commitment to the Hardiker model, organisations struggled to understand Tusla’s expectations in relation to the scope of outcomes. In practice, this resulted in a high degree of variation in what providers were being asked for and what they could produce, with individual organisations exercising a degree of latitude in defining their own outcomes. At the time of the final data collection in late 2017, a sense prevailed among providers that despite the emphasis on outcomes, reporting requirements (through the new Service Agreement) focused largely on service activity data.

While the introduction of Tusla’s Commissioning Strategy provided the impetus for addressing performance-oriented reporting, the focus on outcomes took place in the context of a broader trend towards evidence-based and evidence-informed practice that had permeated Ireland’s children and youth sector. A number of organisations reported that their own commitment to evidence came not from Tusla or the HSE but rather in the interest of good practice. The Logic Model, a tool to precisely define programme objectives, differentiating between activities, outputs, and outcomes, offered a structure for framing and articulating goals (W.K. Kellogg Foundation, 2004). Among several larger organisations it had become standard practice.
However, outcome-measurement posed a number of practical challenges for organisations in the study. Ultimately, organisations grappled with the challenge of developing realistic outcomes.

In a performance-related culture, several respondents experienced pressure to demonstrate a specific result and, moreover, to attribute that to their particular programme. Difficulties in reporting progress in relation to outcomes were compounded for service providers tackling multiple disadvantage. Respondents emphasised the need for performance measurement systems to account for the complexity of the socio-economic challenges facing children, young people, and families. The participant below expressed a common sentiment in urging Tusla to adopt a pragmatic approach based on dialogue:

> And I’m saying to Tulsa, ‘You know what we are dealing with. You tell me what you expect by way of outcomes, and I’ll tell you what I think we can get, and we will try to see how we can work together.’ (Baseline: R12)

In relation to measuring outcomes at a higher level of need, participants reported a number of problems in the collection of data and metrics used to present their work. However, the wider social and environmental outcomes that may be associated with the longer-term benefits of such an intervention are difficult to predict and typically occur outside of the timeframe of the service contract. Respondents underscored the importance of ensuring that ‘soft’ or developmental outcomes in physical, emotional, or psychological well-being are given due weight in assessing the effectiveness of services. In measuring such outcomes, respondents cited the use of indicators such as increases in personal competencies in these areas, as well as measurement of factors such as access to community networks, as indicators of progress. A number of providers cited the development of a trusting relationship with an adult as the most critical factor for a high-risk young person. They called for dialogue and interaction among stakeholders in articulating soft outcomes as well as setting standards for the measurement of relevant social and emotional well-being indicators.

Some organisations reported linking in with national membership bodies or umbrella organisations as a way of accessing support for the development of indicators, including ones that could apply within the sector or for specialist services. A common mechanism for reporting on outcomes within specialist areas, some believed, would be especially beneficial for smaller services that lacked the capacity to develop these indicators on their own.

8.5 Capacity Issues

The emphasis on performance measurement required the use of dedicated resources across a number of areas:

**Systems and Data Management:** Service provider respondents frequently referred to the increasing amount of time spent on record-keeping, data management and monitoring functions. However, they lacked resources, both staff and infrastructure, to adequately support these functions, with the need for online information management systems becoming greater. Critically, data systems in use were designed to record activity-related information (number of clients seen, nature of intervention, sessions, and discharge). Existing systems did not have the capacity to record progress towards outcomes or, where outcome indicators did exist, to monitor performance and programme fidelity.

**Research and Evaluation Skills:** Outcome-oriented reporting requires internal resources and skill sets for collecting, analysing, and interpreting data. Participants required guidance in defining and measuring outcomes as well as training and expertise in evaluating outcomes. The availability of specialised research support is critical in enabling providers to generate the necessary evidence to demonstrate whether a programme is achieving its intended outcomes. Several organisations engaged the services of external expertise in supporting evaluation. However, even when outsourced, the lack of internal resources required to dedicate on an ongoing basis to producing and utilising data required for evaluation was viewed as challenging. Larger organisations with internal research capacity, or access to it, had acquired
competencies and understood the importance of an outcomes-based approach to planning and delivering services. Overall, the absence of funding for research emerged as a core theme in the study. Staff time engaged in research, planning, and training activities was typically underfunded.

In its commissioning practice, Tusla has established targets, by levels of evidence against which the agency expects to monitor performance (Tusla, 2017b: 19). The impetus behind gathering a baseline of evidence stemmed from low levels of knowledge of the funding pool. Anecdotally, Tusla estimates that less than 5% of the programmes it funds are evidence-based or evidence-informed. Adopting the Veerman and Yperen (2007) framework, Tusla set a target proportion of commissioned service by level of evidence by 2018. Tusla will encourage an incremental build towards funding more evidence-based activity across its service delivery framework, using the four levels of evidence framework to determine how services are commissioned in the future:

Level 1 – Describes the goals, activities, and target groups for a particular service.

Level 2 – Identifies the theory that underpins the intervention, and identifies how and why this intervention will lead to specific outcomes.

Level 3 – Involves systematic evaluation to show that desired changes have occurred with the clients engaged in the intervention.

Level 4 – Level of evidence can answer whether the intervention itself has caused the outcome.

Over five years, 100% would be in Level 2 (from 15% in Year 1), 25% in Level 3, and 10% in Level 4.

In principle, the guidance emphasises that Tusla will take a capacity-building approach. Recognising the need to provide for innovation and to adopt a flexible approach to demonstrating evidence, Tusla will consider: ‘There will be many cases where services are available but these services have not demonstrated that they can actually address the needs because they do not have evidence of impact, but again Tusla commissioners may support organisations to build their evidence base’ (Tusla, 2017b: 9). The agency also recognises that where needs change rapidly and a response is required, it may commission a service that has only Level 1 in evidence but is believed to meet agency priorities. Also, commissioners may fund services testing out new approaches at Level 2. The principle of support for innovation incorporates a partnership approach to working with the community and voluntary sector, through which Tusla committed to exploring ‘innovative models of practice’ provided by the child and family services sector in Ireland and to explore and share models of best practice.

8.6 Summary Messages

- The working hypothesis of the PPFS Programme is that a shift in the overall spend towards prevention, early intervention, and Family Support will result over time in better outcomes for children; comparative data on the overall spend level reflect an emerging commitment by Tusla to such a shift.

- Tusla has trialled a methodology to systematically capture the nature of the service mix provided by externally funded organisations. While only resulting in some limited usable high-level data, it evidences the potential value of such approaches to local and national commissioning activity.

- Attention to the use of evidence in Tusla’s decision-making is in its infancy.

- A number of challenges are anticipated in using outcome indicators. They include greater awareness of the complexities and of the differentiation between ‘hard’ and ‘soft’ outcomes.

- Standards for measuring relevant social and emotional well-being indicators are needed.

- Capacity deficits are widespread with regard to data (generating, analysing, and using) for defining and measuring outcomes.
• There is significant value in working with external providers to define outcomes.
• In designing systems to monitor effectiveness, providers require detailed guidance from Tusla.
• Moving from service activity data is an issue – systems in use are designed for recording activity-related information.
• The ongoing absence of funding for research and evaluation is an overriding issue.
Discussion and Conclusion

9.1 Introduction

The introduction of Commissioning has been undertaken to facilitate Tusla’s objective to use the total resources available for children and families in order to improve outcomes in the most efficient, equitable, proportionate, and sustainable way. This discussion section considers progress towards achieving Tusla’s overall Commissioning objective. First, it sets out an overview of achievements and reflects on some of the challenges faced. Second, it reflects on the experience and potential of Commissioning more broadly, based on our findings and the extant research literature.

9.2 Progress and Challenges

Tusla’s main achievements in relation to Commissioning during the period of this study were:

- Piloting and developing an approach to Area Planning/Commissioning to cover all 17 areas by the end of 2018, and building internal Tusla capacity in doing so;\(^{17}\)
- Developing a range of good-quality materials on Commissioning, from strategic through to operational levels;
- Establishing the Commissioning Unit and moving towards full staff complement;
- Developing a Commissioning Plan to reflect some of the outstanding capacity-building work on Commissioning internally and with funded organisations;
- Developing a Service Agreement format to underpin future funding relationships with community and voluntary sector providers and involving them in the process;

While noting these significant achievements, particularly in the context of the early development of a new organisation, progress was less than originally hoped. The context for this is outlined here.

The findings of this study indicate that while the infrastructure for establishing a commissioning model is in place, commissioning practices are not embedded in the organisation to the degree planned at the outset of this Work Package. Much of the progress in furthering commissioning as originally intended took place in the latter half of 2017. For the most part, this is attributable to the delay in establishing the Commissioning Unit. In the absence of the necessary support and structures, the capacity of Tusla’s operational systems to deliver on some key activities has been compromised. It has also affected the ability of Tusla staff in functional areas related to commissioning (Workforce Learning and Development, Finance, Quality Assurance) to engage internally with a centralised commissioning resource supported by dedicated personnel with assigned roles and responsibilities.

For Tusla, building the infrastructure and developing its own internal systems took longer than envisaged.\(^{18}\) Ultimately, the need to put in place agreed systems, principles, and processes assumed much of the focus for commissioning activity. As a new entity, Tusla encountered a number of issues related to

\(^{17}\) Also within this timeframe, under the Parenting Work Package, the National Parenting Commissioning Framework (in draft stage at the time of writing) was developed by a Sub Group of Tusla and external members adopting the four stages of the commissioning process and the use of best evidence.

\(^{18}\) A comprehensive account of system change in the delivery of the PPFS Programme is provided in a separate Work Package and Overall Implementation and Outcomes Study Final Report (forthcoming September 2018).
organisational development. Before staff were assigned to the Commissioning Unit, a series of approvals and statutory requirements had to be agreed with the Department of Children and Youth Affairs. Change management is also a factor in the incorporation of elements such as the FRC programme or the CYPSCs into the Commissioning Unit. The process involved layers of complexity, staff restructuring, role definition, and integration that may not have been anticipated at the outset. These required time to fit within the new and emerging structures and processes for managing a complex set of arrangements. As a new approach in Ireland, developing commissioning required the engagement of specialist knowledge, consultation from other jurisdictions, and the adaptation of this expertise to the Irish context.

To some degree, therefore, the time required to align internal systems and resourcing before undertaking a commissioning approach may have been underestimated. Nonetheless, while progress has been delayed, it must be acknowledged that the planning and practices that constitute Tusla’s Commissioning Strategy have undergone critical revisions over the period 2015–17. Overall, they demonstrate a positive intent on the part of the agency to address the complex nature of working in this new terrain. In addition, the degree of fluidity in the planning and structures has enabled initiatives such as the Creative Community Alternatives programme to emerge as an aligned part of the commissioning infrastructure.

A major concentration of effort, not anticipated at the outset, has been on the governance and financial relationships with external organisations. The fundamental premise for commissioning is the shift from a grant-based to a standardised system of contractual arrangements. The extent of the change management required to achieve this is not to be underestimated. The state of the system transferred from the HSE reflected a diverse mix of programmes and services that included grants from the HSE relevant to children and families, school completion programme funding, Family Support Agency, and FRC structures. Varying administrative systems and different levels and scales of governance among the range of external providers highlighted the need for standardised policies, procedures, and practices. For Tusla, developing the 2017 Service Agreement and Good Governance Framework required an assessment of the systems, capacity for analysis, and performance models operating in pre-existing arrangements before introducing a new, standardised model.

Finally, the emphasis on governance and systems is grounded in a number of pragmatic realities that emanate in a changing regulatory environment. Fundamentally, the impetus for new management and governance standards stems from a regulatory climate in which Tusla is increasingly under pressure to provide assurances that public money is well spent. The 2018 Business Plan states that in 2017 Tusla faced an ‘unprecedented level of external scrutiny’ that included inspections by HIQA, investigations by the Ombudsman for Children, and appearances before the Public Accounts Committee (Tusla, 2018b: iv). These required Tusla to have systems of accountability in place, not only for its internal governance and operations but also, by association, for external organisations funded. For Tusla to provide evidence to the public and political system that accountability, transparency, and good governance are in place for all organisations in receipt of public money, the agency, not surprisingly, passed on the stipulations to its funding recipients.

9.3 Cultural Change: Preparing the Way

In addition to the scale of system change outlined above, it is important not to underestimate the degree of cultural change involved in moving to a commissioning model. Commissioning represents a fundamentally different way of working based on new and emerging principles. A significant development is the transition to an approach based on collaboration with the community and voluntary sector. Reflecting the imperatives identified in the research literature, Tusla is committed to working to a partnership model to collaborate and engage positively with the sector using a continuing process of monitoring, evaluation, and improvement involving ongoing interaction (Tusla, 2018d).

A persistent theme of this study has been the extent of the shift required of Tusla staff to engage in collaborative working. For most staff participating in the study formerly based in the HSE, engagement in a formal, and not informal, process with community and voluntary sector organisations would have
been unprecedented. The process of commissioning, beginning with consultation on area needs, involved parties in dialogue at a strategic level. The nature of such engagement called upon stakeholders to identify elements of joint responsibility and mutual objectives. This principle of collaborative working represented a cultural change in how Tusla or a state agency conducts its work. The ramifications for Tusla staff, experienced in practice, included a need to address their capacity requirements in skills such as contract management, or community development skills required in interacting with the community and voluntary sector.

The introduction of reform must be viewed in the context of a culture in which, it was acknowledged, change was difficult to initiate and where the new agency had inherited a portfolio of services from the HSE. The potential to address ‘legacy’ funding issues was seen as a major opportunity for reform. For some participants, the creation of a new entity in the form of Tusla provided a welcome opportunity for a reassessment of spending priorities. As demonstrated in the findings, stakeholders indicated the need for a fundamental reappraisal of the culture of automatic grant renewal. At the same time, the prevalence of this practice presented a challenge for Tusla in seeking to introduce new arrangements.

A number of factors indicate a degree of readiness for change. The case for commissioning is clear and founded on a number of well-established principles related to transparency and accountability. In operational terms, achievements include clarity on the principles of effective commissioning; Tusla has identified what will be commissioned at national, regional, local, and individual levels. The terminology of commissioning is embedded in the language and corporate identity of the agency. The approach developed by Tusla to date has engendered a certain amount of goodwill in the community and voluntary sector as regards its intent. In particular, commissioning is accepted as having a distinct, capacity-building approach and is recognised as having differentiated itself from the UK-based procurement model. Critically, however, positive sentiments expressed in relation to Tusla plans by external stakeholders are generally accompanied by reservations about whether the intentions and principles underpinning their approach can and will be implemented in practice.

9.4 Coherent Commissioning

Tusla has made progress in its goal of establishing an appropriately resourced commissioning unit and compliance unit with requisite governance arrangements and delegations in place. Developing a standardised approach to commissioning practice which is embedded throughout Tusla is a priority. It is imperative that the move from theory to practice is both timely and strategic. The complexity Tusla will face in achieving coherence as the implementation of commissioning rolls out should not be underestimated.

The coordination and consolidation of activities taking place under the Commissioning workstream is at a critical juncture. By the end of 2018, all 17 areas will have completed their commissioning plans (Tusla, 2018a). In making sure that commissioning plans are being implemented across the country, consistency will be required. Tusla’s Business Plan calls for a team from Tusla to develop a strategy for oversight of commissioned services (Tusla, 2018b: 67). Additionally, respondents highlighted the need for alignment between each area plan and Tusla’s corporate strategy in order to match priorities as a potential gap.

It is imperative that commissioning efforts do not take place in individual silos, under a general banner of commissioning. Rather than doing things separately, there is a need for cohesion and cross-reference in the system. The coordination and consolidation of commissioning framework and mechanisms will be a challenge. As well as 17 separate area plans, commissioning frameworks for CCAs and Parenting Support will all be in place. In addition, joint commissioning is being planned for the CYPSCs. Ensuring cohesion and integration across the various mechanisms for commissioning across the system is a complex task.

Equally, alignment is important in ensuring that the instruments developed by different functional areas of Tusla are harnessed to work to the goals and overall commissioning approach. For instance, Tusla has developed a standardised approach for the development of SAs and governance framework. However, there is a need to align the SA and commissioning framework. In practice, this will play out in
the outcome indicators and understanding of evidence selected and included in SA as the main data collection instrument. Likewise, plans for the Outcomes Framework taking place in Quality Assurance need to work with the commissioning process as the unit for testing its application and, if necessary, improving practice.

9.5 Embedding Area Planning

A continuing priority of Tusla is to adopt and embed the methodological approach of commissioning planning to support the identification of need and a cost-effective, evidence-based, and evidence-informed response to those needs (2018 Business Case). To date, the emphasis on capacity has been primarily at the local level, developed with the support of external consultants. Through the methodology developed in partnership with IPC, understanding of commissioning as a set of related practices has evolved. It has established a standardised and coherent approach to commissioning practice for adaptation throughout the country, exemplified in the continuum of activities in the commissioning cycle focused on planning, purchasing, and monitoring the quality of services.

As a result, the theory and practice of commissioning has permeated the top levels of Tusla management and those directly involved in the phased training programme. Nonetheless, for the vast majority of providers and Tusla staff not tasked directly with commissioning responsibility, the concept and terminology are unfamiliar. For instance, references to ‘shaping need and provision’ and language of ‘the market’ will remain cryptic for many. Patience and time to embed such concepts will be required. As the first Area Planning training demonstrated, resistance to the use of terminology initially provided a hostile environment for commissioning training.

Embedding the approach

Tusla participants in Phase 1, while generally receptive to the process, emphasised that the theory and practice associated with the methodology are new and labour-intensive. A potential threat is that after the initial impetus, commissioning planning may be superseded by institutional pressures and other priorities within Tusla. It is imperative that having invested in the training, implementation of plans be given the priority needed to become embedded in the system. This will be achieved by the following:

- Inclusion of an accountability mechanism at a high level in Tusla through which Plans can be referred to ensure adherence to goals identified. Conversely, this will also identify where plans are not being implemented or where priorities identified through the process are being overridden.
- Within the Commissioning Unit, particular emphasis be given to the role in overseeing that the Area Plan is used and regularly reviewed.
- Ensuring all commissioning plans meet the standards specified in training materials.
- Linking area priorities with national priorities.
- Effective information systems for capturing and turning data collected in needs assessment into intelligence.
- A data system to track whether needs identified in area plans translate into funding over time.

Engaging with external stakeholders, part of the cycle of commissioning, introduced a positive dynamic into the interaction between Tusla and external agencies. However, it was acknowledged that this is a tentative first step and that it is important that it not become a token exercise. It is critical that consultation and interaction not be viewed as an isolated event associated with needs analysis and that they be applied also to continual monitoring and improvement elements of the commissioning cycle. For the future, the following considerations will be important:

- Tusla staff will require training in communicating and developing skills in areas such as community development, facilitation, and negotiation.
• Accessing the views of community and voluntary sector organisations on improvements in the mechanisms for engagement is critical.
• Developing and disseminating information on good practice in this area, including a set of metrics for engagement, would facilitate future practice.
• Accessible language is required in engaging with the community and voluntary sector. Replacing the technical language associated with ‘marketisation’ and avoiding over-theorising the commissioning approach are important in communication.
• Facilitate learning opportunities or events for mutual exchange across sites and between commissioning teams as implementation rolls out.

9.6 Management of Funding Relationships

The literature review highlights the challenge of moving from ideas of efficiency and outcomes to practical implementation and, in particular, the risk of mixed messages on twin priorities of value for money and good outcomes. Alongside this, in clarifying the formalities of these key considerations for practice, is the challenge of maintaining partnership working in the context of commissioner–'commissionee' relationships.

In practical terms, much of Tusla's focus in 2015–17 has been on the development of standards and relationship management for engaging with the community and voluntary sector. As a consequence, interaction between the agency and external providers has become more formalised. Pre-commissioning, respondents’ characterisations of the service delivery landscape – as representing a lack of uniformity across regions, with inconsistency in the application of standards and expectations for performance monitoring – emerged in the Baseline and Common Data Collection. In this context, the creation of new structures and standardisation and the removal of ambiguity can be seen as a positive step. However, the provisions contained in the new Service Agreement and Good Governance Framework will undoubtedly test the capacity of the community and voluntary sector to respond. In applying these arrangements, a number of inherent risks to the relationship with the community and voluntary sector can be identified.

The structuring of the Unit divides responsibility between the Unit’s finance/governance and service functions. However, the assurances given to the community and voluntary sector in relation to a soft, capacity-building approach will require deft management between the financial and compliance oversight functions. It is important that the subtleties underlying the differences between commissioning and procurement (e.g. Value for Money) do not get lost in the separation. The findings demonstrated the strong sense pervading the community and voluntary sector that the value-for-money aspects will dominate.

In particular, it will be critical to ensure that the formalities of contractual relationships do not diminish the principle of partnership working. Building on the strong links established, a partnership approach will require a commitment to continued dialogue and to supporting ongoing consultation with representatives of the sector (e.g. The Wheel). Structured interaction through consultative mechanisms like the National Commissioning Advisory Group can play a central role in monitoring the roll-out of new arrangements.

Practical actions to consider include the following:

• Including a mechanism for professional qualifications of staff in the ranking of proposals would assuage fears that the lowest cost provider will be preferred.
• Tusla staff requested training on the SA to respond to external organisations’ queries.
• Alignment of the outcomes and performance indicators in the SA and planned for with the commissioning materials (current and evolving).
• Some differentiation to be made for smaller organisations, and whether the 250k cut-off is too much.
9.7 Using Evidence

Fundamental questions for Tusla are: What do we want to achieve for children and their parents? What are the best methods, services, and approaches to achieve this? How will we measure if it is being achieved? The literature review highlights that commissioning is only meaningful if there are clearly defined outcomes and standards for measuring these outcomes. While work has advanced through the Area Planning process on identifying the nature of need and broad patterns of service provision, development of a framework for evidence is only at the early stages – and is articulated as a key current priority now that Services Agreement formats have been devised.

What the findings indicate is that the most current reporting is on outputs rather than outcomes, and that the capacity for engaging with issues of outcomes, evaluation, and evidence exists only in a small number of organisations. The findings highlight the complexity of outcome measurement in the child protection and welfare field, and in particular, the significance of softer outcomes. They also imply the opportunity for Tusla to develop more meaningful outcomes by engaging with providers, particularly in niche provision areas, and the need to avoid one-size-fits-all approaches. As with governance and reporting, the findings indicate the need to build capacity in this area both at the provider level, in generating meaningful service outcome data, and in Tusla, in analysing and interpreting this data for monitoring and system improvement purposes. Particularly important for Tusla will be developing capacity to support decision-making on service provision choices where various evidence-based programmes are involved.

9.8 Capacity

Capacity is the cornerstone for the implementation of commissioning. Highlighted in the literature is the requirement to be able to commission and be commissioned, to generate data and translate it into meaningful information for use in commissioning, and to work within outcomes and results-oriented systems. Much of the commissioning work to date has focused on capacity building, particularly within Tusla itself and primarily on the Commissioning process or cycle – accepting that this has involved the community and voluntary sector as stakeholders to some degree. More widely, there has been a certain amount of communication and consultation efforts with external providers within Commissioning. As evidenced in the findings, much remains to be done in developing ‘commissionee capacity’ and in working effectively in partnership. There are also gaps in capacity on data generation, analysis, and dissemination, both within Tulsa and among the provider community. And, as demonstrated above, the evidence and outcomes dimension of service provision choices is only at a very early stage, and will require much consultation and training and support activity for it to be fully and successfully implemented.
Conclusion and Recommendations

This report has focused on the development of Commissioning within Tusla in the context of the overall Development and Mainstreaming Programme for Prevention, Partnership and Family Support. It has focused on Tusla’s initial programme of action and the results achieved. The study has been guided by three original objectives:

1. To determine whether Tusla’s service commissioning is increasingly rigorous and evidence-informed and if it privileges prevention and early intervention.
2. To establish the value of Tusla’s activities in increasing provider capacity to undertake evidence-informed commissioning for services.
3. To determine the impact on the service provision landscape for children and families.

As outlined previously, objective 3 has proven to be beyond the scope of the study, and our main focus has been on objectives 1 and 2, in particular the latter. Our main conclusion covers both of these. Before doing so, it is important to highlight that the original ambitions for Commissioning over the lifetime of the PPFS programme were not realised for different reasons, already articulated, and that our approach to this study became more formative than summative during its lifetime.

In sum, the evaluation team concludes that Tusla has undertaken significant work in building solid foundations for the long-term implementation of commissioning in the organisation. Specifically, the development of the Commissioning Unit, the creation and ongoing development of materials, the development of a Service Agreement, critically, the piloting of a Commissioning model at local level represent key achievements that will support future implementation. Significant work on building commissioning capacity, broadly understood, remains to be done – particularly significant is the need to build and support the capacity of external organisations to engage effectively with commissioning. The following section sets out key recommendations for the future.

10.1 Recommendations

While some of these recommendations align with extant commitments by Tusla’s Commissioning Unit, the following represent particular priorities in the view of the research team.

Principles

1. One obvious strength of Tusla’s work to date has been to specify a set of principles that reflect a valuing of existing relationships with the community and voluntary sector community, in creating a service mix that will improve outcomes in the most efficient, equitable, proportionate, and sustainable way. One way to ensure genuine ongoing commitment to these principles is to enact monitoring processes and associated metrics that:
   a. assess the degree of partnership within commissioning decisions
   b. assess the impact on the service provision landscape of commissioning decisions and flag risks to the achievement of its principles
   c. assess the achievement of a balance: between governance/fiduciary responsibilities and partnership working; between performance monitoring and supporting capacity development; and between value for money and quality services in commissioning decisions.
Building Capacity

2. Tusla needs to commit with urgency to the following capacity-building priorities:
   a. provide comprehensive training, support, and guidance to the community and voluntary sector to become ‘commissioning-ready’
   b. provide training support and guidance internally and to the community and voluntary sector to become ‘governance-ready’
   c. provide training support and guidance internally and to the community and voluntary sector to become ‘outcomes and evaluation ready’
   d. consider developing a dedicated unit:
      i. to support its own staff and the community and voluntary sector in building capacity in data, monitoring and evaluation
      ii. to support the community and voluntary sector to adapt to the new Commissioning environment (for example, in facilitating the development of new local service-provision partnerships among small-scale providers that respond to prioritised needs).

Outcomes

3. The Commissioning Unit needs to be a key stakeholder in developing Tusla’s outcomes framework. In turn, it needs to include the external service provision community in the process of agreeing sector-specific, valid, implementable, and measurable outcomes. Any development of an outcomes framework must incorporate reasonable attention to ‘softer’, intermediate outcomes, achieved on the journey to safe and developmentally appropriate childhoods.

Infrastructure

4. In order to ensure consistency, the Commissioning Unit must have a central role in all Commissioning activities to ensure adherence to agreed principles and alignment with Tulsa’s strategic goals.

5. Whether within the Commissioning Unit or elsewhere, a fully implemented Commissioning Strategy requires a dedicated function for data collection, collation, and dissemination to underpin local-area and national-level needs assessment and service provision decisions (see also Recommendation 2.d).

Communicate

6. This research demonstrates the ongoing fears among the community and voluntary sector stakeholders regarding Commissioning. Notwithstanding the efforts already made, Tusla needs to prioritise ongoing communication with the sector to reduce such fears and to build and maintain commitment to this new way of working.

Measure it

7. Tusla is at the very early stages of implementing a Commissioning Strategy. Ultimately, like all of the organisation’s efforts, the strategy needs to result in better services and outcomes for children and parents. At this point, an evaluation framework is required against which Tusla can measure its Commissioning ‘performance’ – both in implementing its strategy and achieving its outcomes.
References


Tusla, Child and Family Agency (2016b) *2016 Service Arrangement*.


Tusla, Child and Family Agency (2017b) *Commissioning Toolkit*.


Tusla, Child and Family Agency (2017d) *Section 56 Service Arrangement Part A*. Available at: www.tusla.ie/uploads/content/Tusla_Section_56_Service_Arrangement_(Final)_PART_A.pdf.


Appendix 1
Common Data Collection: Interview Materials


PARTICIPANT INFORMATION SHEET – INTERNAL

The UNESCO Child and Family Research Centre at NUI, Galway are currently undertaking a major research and evaluation study of Tusla’s Programme for Prevention, Partnership and Family Support, part of which focuses on the overall implementation and outcomes of the programme.

As a Tusla employee, your views are very important to us. We are asking you to take part in an interview which will last approximately between 60 – 90 minutes in duration; about your views on the mainstreaming programme for prevention, partnership and family support. By participating, you can help to inform the research and evaluation surrounding the overall implementation and outcomes of the programme. We would be grateful for your support. The interview will cover topics that surround the aims of this research which include:

1. To investigate the implementation of the PPFS and its outcomes as these relate to:
   a. Tusla’s Structures, Policies, Procedures, Roles, and budgets;
   b. Tusla’s Service Delivery Framework;
   c. Tusla’s Culture and Climate;
   d. The capacity of Tusla and its Stakeholders as this relates to prevention, early intervention and Family Support; and
   e. Parents and Children.

2. To investigate the effect of Tusla’s External Environment on the PPFS

3. To investigate the sustainability of changes achieved by the PPFS

4. To identify any unintended consequences, positive and negative, arising from the programme

5. To identify learning from the experience of building a prevention, early intervention and family support system for:
   a. Tusla and its stakeholders;
   b. DCYA and other Departments of State; and
   c. International policy and academic audiences.

The emphasis will be on exploring if the programme was implemented as intended, and the barriers and enablers to this. As well as assessing whether the intended outcomes were achieved, a focus will be placed on identifying unintended outcomes, both positive and negative arising from the programme. To have utility for Tusla and others, a key aim of the research will be to generate learning to inform future policy and practice. Additionally, as this is an organisational development/change programme, a key focus for the research will be the sustainability of its impacts.

With your permission, the interview will be audio recorded and transcribed for use in the research. The
research will lead to a written report. Information provided will be anonymous and no individual will be identifiable in the report.

Your participation is entirely voluntary and you can refuse to respond to any questions you do not wish to answer. You are also free to withdraw from this research at any point without any consequences. The information you provide will be stored securely and will only be accessed by the researchers.

If you have any questions about this study please email Dr Patrick Malone at patrick.malone@nuigalway.ie or phone 091-493498.

If you have any concerns about this study and wish to contact someone independent and in confidence, you may contact the Chairperson of the NUI Galway Research Ethics Committee, c/o Office of the Vice President for Research, NUI Galway, ethics@nuigalway.ie

THANK YOU VERY MUCH
YOUR PARTICIPATION IS GREATLY APPRECIATED

PARTICIPANT INFORMATION SHEET – EXTERNAL

The UNESCO Child and Family Research Centre at NUI, Galway are currently undertaking a major research and evaluation study of Tusla’s Programme for Prevention, Partnership and Family Support, part of which focuses on the overall implementation and outcomes of the programme.

As a stakeholder organisation to Tusla, your views are very important to us. We are asking you to take part in an interview which will last approximately between 60 – 90 minutes; about your views on the mainstreaming programme for prevention, partnership and family support. By participating, you can help to inform the research and evaluation surrounding the overall implementation and outcomes of the programme. We would be grateful for your support. The interview will cover topics that surround the aims of this research which include:

1. To investigate the implementation of the PPFS and its outcomes as these relate to:
   a. Tusla’s Structures, Policies, Procedures, Roles, and budgets;
   b. Tusla’s Service Delivery Framework;
   c. Tusla’s Culture and Climate;
   d. The capacity of Tusla and its Stakeholders as this relates to prevention, early intervention and Family Support; and
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The emphasis will be on exploring if the programme was implemented as intended, and the barriers and enablers to this. As well as assessing whether the intended outcomes were achieved, a focus will be placed on identifying unintended outcomes, both positive and negative arising from the programme. To have utility for Tusla and others, a key aim of the research will be to generate learning to inform future policy and practice. Additionally, as this is an organisational development/change programme, a key focus for the research will be the sustainability of its impacts.
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THANK YOU VERY MUCH
YOUR PARTICIPATION IS GREATLY APPRECIATED

PARTICIPANT CONSENT FORM

Please tick:

☐ I have read the Participant Information Sheet pertaining to the Development and Mainstreaming Programme for Prevention, Partnership and Family Support: Overall Implementation and Outcomes.

☐ I understand the information provided and have had enough time to consider this information

☐ I know that my participation is voluntary and that I can withdraw at any time

☐ I agree to take part in an interview

☐ I agree to the audio recording of this interview

☐ I agree to the use of anonymous quotations in the reporting of the findings

Name: ___________________________________________ Date: __________________

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PARTICIPANT CONSENT FORM

Telephone Interview

In advance of your telephone interview with our researcher, we will ask you to confirm the information as detailed below:

☐ I have read the Participant Information Sheet pertaining to the Development and Mainstreaming Programme for Prevention, Partnership and Family Support: Overall Implementation and Outcomes.

☐ I understand the information provided and have had enough time to consider this information.

☐ I know that my participation is voluntary and that I can withdraw at any time.

☐ I agree to take part in an interview.

☐ I agree to the audio recording of this interview.

☐ I agree to the use of anonymous quotations in the reporting of the findings.
INTERVIEW SCHEDULE

COMMISSIONING

The PPFS model involved activities towards embedding Commissioning as a new approach to funding organisations delivering services for Tusla.

1. To what extent has it resulted in changes to
   a) how funding decisions are made now?
   b) how you anticipate them being made in the future?

2. To what extent has it resulted in changes to the types or mix of services delivered?

3. Is there anything you would like to add in relation to these questions?