

Appendix 1

Commissioning Models Table

Model	Benefits	Issues / Concerns
<p>Network Model - this is the current model of delivery which will be reviewed</p>	<ul style="list-style-type: none"> • One member of staff to pull together work across all providers with clear structures and processes • Gives an element of independence from the network and can see the bigger picture • Providers feed into a central point but still make day to day decisions on their own services 	<ul style="list-style-type: none"> • There can be confusion over what is the co-ordinators responsibility and what is a service managers • The co-ordinator is not a manager, nor do they oversee the network and therefore decision making sits with the individual organisation leads • Whilst knowledge is shared, staffing and other skills are not shared amongst the network • There are multiple clinical governance but no lead
<p>Consortium</p>	<ul style="list-style-type: none"> • Providers will share the same objectives • Providers will pool resources • It can offer new opportunities for staff • The CAMISH 'brand' will reduce confusion amongst young people 	<ul style="list-style-type: none"> • If one provider is not performing well, all members of the consortium are responsible, this is particularly relevant for any finances that are not part of a block payment • Decision making may be slower due to the number of parties involved, this may include decisions not being made due to no consensus • Will need structure and a solid framework
<p>Lead Provider</p>	<ul style="list-style-type: none"> • Quicker decision making process • Lead provider carries the risk rather than risk being shared across several providers 	<ul style="list-style-type: none"> • Commissioning have less control if something goes wrong with a subcontracted service. The lead provider will be responsible for any action as a result of under-performance • We may limit the number of providers bidding and lose the successful collaboration we have made so far • This would support the option of streamlined governance, IT and policies and processes as highlighted in the JTAI. • Lead provider carries the risk rather than risk being shared across several providers