

# Report



meeting ADULT SOCIAL CARE AND HEALTH  
DEPARTMENTAL BRIEFING

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## **REPORT OF THE STRATEGIC DIRECTOR FOR ADULT SOCIAL CARE AND HEALTH**

### **THE ROLES AND RESPONSIBILITIES OF THE NEW ADULT SOCIAL CARE AND HEALTH DEPARTMENT**

#### **1. Purpose of the Report**

- 1.1 The purpose of this document is to set out the roles and responsibilities of the new Adult Social Care and Health Department.

#### **2. New Department**

- 2.1 On 6<sup>th</sup> April 2006 the County Council approved a new structure for the Council at 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> tiers. The reorganised Council has four service departments – Adult Social Care and Health, Children's and Young People, Communities and Resources – and a Chief Executive's Department. One of the reasons behind the new structure is the decision to appoint a Director of Children's Services as required by the Children Act 2004. To mirror the transformation of children's services (set out in 'Every Child Matters - Change for Children'), the Department of Health published a Green Paper<sup>1</sup> on social care in 2005 and a White Paper on the future of community health and social care services in January 2006.
- 2.2 The Department of Health has published statutory guidance on the role of the Director of Adult Social Services, which includes a number of key responsibilities, including:
- coordinating a strategic needs assessment of the local population with the Director of Children's Services and the Director of Public Health

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<sup>1</sup> Independence, Wellbeing and Choice ' is the Green Paper published in March 2005, which set out the Governments vision for the future of adult social care in England. Most of its proposals have been endorsed by and incorporated within the White Paper, published in January 2006 (Our health, our care, our say; a new direction for community services).

- the delivery of local authority social services functions listed in Schedule 1 of the Local Authority Social Services Act 1970 in respect of adults<sup>2</sup>
  - the specification of social care needs
  - professional leadership and co-ordination of services across social care, health and housing
  - leading the implementation of national and local standards
  - working in partnership with service users and local stakeholders to plan and deliver services
  - promoting social inclusion and wellbeing
  - developing a workforce plan for the whole of the social care sector.
- 2.3 The new adult care department must therefore not only be ‘fit for purpose’ in relation to these statutory duties of the director, but must also be able to ensure delivery of the aspirations of the Green and White Papers (see **Appendix 1**).
- 2.4 At the same time as approving the Council’s new departmental structure, Members also decided that the name for the new adult care department would be the Department of Adult Social Care and Health:
- **Social care**, because the term has come to describes better the range of services and partnerships for which the Council is responsible
  - **Health**, because the Council is committed to a joint working with NHS and other partners to improve the health and wellbeing of its citizens, through prevention as well as care.
- 2.5 As many other Local Authorities in the country have already done, Nottinghamshire wishes, through this re-designation of adult services, to recognise the breadth and complexity of the services that it delivers.
- 2.6 The White Paper includes a commitment to outcomes that we know people want for themselves:
- the ability to maintain their own health
  - a sense of personal wellbeing
  - the opportunity to lead an independent life.
- 2.7 The Council shares the view expressed in the White Paper that achieving these outcomes for people requires a sustained realignment of the whole health and social care system. Changing the name of the department will not achieve this in itself, but it signals very clearly the Council’s commitment to this objective.

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<sup>2</sup> Adult users of social services are defined as people aged eighteen or over with assessed social care needs, including people with frailty due to ageing; people with physical disabilities; people with sensory impairment; people with learning disabilities; people with mental health needs; people with long term medical conditions requiring social care; people who misuse substances; and asylum seekers.

## **Strategic direction for the new department**

- 2.8 In the future, the strategic direction set by Government in existing guidance and in the White Paper will include:
- facilitating increased choice and independence through direct payments and other options for individual purchase of services
  - enhancing prevention through partnerships and building community capacity
  - promoting independence through enabling more people to live in their own homes through a variety of supported living arrangements
  - planning and commissioning services to meet the needs of the population collaboratively with a wide range of stakeholders
  - managing a large social care market with a wide range of providers, to increase capacity and reduce cost
  - ensuring high quality and targeted directly provided services with a specific focus
  - supporting and promoting social inclusion and wellbeing through building community capacity and reducing inequalities.
- 2.9 Adult social care services must be delivered with consistency across the whole county. For some specialist functions for example, specialist learning disability and mental health services and also purchasing, procurement and performance monitoring, it is not economic to deliver and manage services on anything less than a countywide basis.
- 2.10 There are also services that need to be managed more closely on a district or locality basis, because they depend on local partnerships to be effective or because of the sensitivity required regarding local needs and circumstances.
- 2.11 In some circumstances both these approaches are necessary. For example, where the main health provider covers the whole county, like the Healthcare Trust, the department has to be able to work both countywide and at a more local level and needs to include other partners like the District Councils, some housing providers and voluntary sector bodies.
- 2.12 A significant rationale for the new structure has been the need to ensure the new department can respond in a consistent way across the whole county and be flexible enough to accommodate local circumstances.
- 2.13 Furthermore, the department must be sensitive to the specific needs of people who ask for help, in particular:
- older people
  - people with physical or learning disabilities
  - people with mental health problems and drug addiction.
- 2.14 It must not create 'silos' that might prevent good practice being developed with one client group being shared across others. This is one reason why the

structure has a combination of three service-user focused directorates and also a strategic directorate, which will help to bind the department together and deliver some 'internal economies of scale' to counteract the loss of economies caused by the separation from children's services.

### **The vision for the new department**

2.15 A service arranged and delivered which:

- puts people who use them at their heart
- promotes wellbeing and independence
- represents the good use of public money
- are easy to access
- provides as much control as possible
- are delivered by the Council and other providers through partnerships and integrated services
- are valued by those who receive them, by local communities and by elected representatives.

This will be explored in the presentation which forms the next item on the agenda.

### **3. Strategic Director of Adult Social Care and Health**

3.1 In summary there are seven key aspects of the Strategic Director for Adult Social Services role:

- **Accountability**

The strategic director will provide professional responsibility and accountability for the effectiveness, availability and value for money of all adult services in the local authority area. As a statutory chief officer, the strategic director should not only be a member of the local authority senior management team, but should carry sufficient weight to influence partners and the planning of the full range of local authority services.

- **Professional leadership**

The strategic director will provide leadership and create the conditions for others to perform and to innovate, and will be responsible for creating the framework for the effective delivery of adult social services. S/he will need to set priorities in the context of available resources and agreements with partners through, for example, Local Strategic Partnerships and the Local Area Agreement.

- **Leading the implementation of standards**

The strategic director should lead the implementation of both national and local standards, targets for service improvement and applicable national policy initiatives, for example National Service Frameworks. S/he will ensure the provision of high quality information about performance and progress against targets and be responsible for supporting the performance assessment process run by the Commission for Social Care Inspection. S/he

will also be responsible for ensuring the protection of vulnerable adults and that local arrangements for safeguarding adults are working effectively.

- **Managing cultural change**

The strategic director will manage the process of change to ensure that the scope of personal choice is maximised and that services move toward a model that promotes the wellbeing of individuals, is person centred and supports independent living and social inclusion.

- **Promoting local access and ownership and driving partnership working**

The strategic director will be responsible for ensuring that information about services is communicated to users and potential users of services and that a 'bottom up' approach to the planning and delivery of services is taken so that services are responsive to individual needs. S/he will take a leading role in coordinating partnership working and the joint commissioning of services with partner organisations and seek to maximise the involvement of partner agencies in planning of services, bringing together public, private and voluntary sectors to develop a shared programme for change.

- **Delivering a whole systems approach to supporting communities**

The strategic director and the Director of Children's Services will work together to ensure that a whole systems approach is taken to meeting the needs of communities and the strategic director will support the transition of service users between different service providers, and between children's and adults services – including development of an integrated approach to child protection, learning disabilities, mental health services and drug and alcohol misuse services.

- **Promoting Inclusion and wellbeing**

The strategic director will be responsible for developing models of care that support the wellbeing of individuals and promote healthy lifestyles. This responsibility will include participating in the planning of the full range of council services, as well as contributing to the development of Local Delivery Plans with Primary Care Trusts.

- 3.2 A key objective of 'Independence, Wellbeing and Choice' was to increase partnership working between providers of services as well as with service users and carers, in order to encourage care to be designed around the needs of individuals. The strategic director role will be central in delivering this vision.

4. **Other key roles in the new department**

The four key **strategic responsibilities** delivered through the adult social care function can be described as follows:

- Promoting the independence of people with **mental health problems and with learning disabilities**.

- Promoting the independence of **older people and adults with physical disabilities**.
- **Managing a social care market** that provides care, offers choice, supports independence and promotes equality and social inclusion.
- Ensuring that **high performance and quality services** are at the cornerstone of everything we do.

The rationale for the four Service Directors in the Adult Social Care and Health Department is founded on these closely inter-related strategic responsibilities. Their roles and responsibilities are set out below.

#### 4.1 **Service Director - Mental Health and Learning Disability**

The rationale for having this post was the need to:

- remain coherent with the countywide Healthcare Trust
- be able to adjust to the changing requirements of single line management with the Trust for both mental health and learning disability
- strengthen strategic commissioning, reflecting the challenge of increasingly costly learning disability care packages and the requirement to accurately map the needs of a growing population
- manage the market better and enable more services to be provided 'in-county'.

The service director is responsible for a gross budget of £60 million, of which £25 million is the costs of approximately 700 directly employed staff and local authority services and £35 million is commissioned services and direct payments. The post will also become responsible for a further c100 staff currently employed within the Healthcare Trust, to be transferred under 'Single Line Management' arrangements in 2007.

In this directorate two service heads will report to the service director. Their roles are:

- Service Head – Commissioning
- Service Head - Community Support Services.

#### 4.2 **Service Director – Older People and Strategic Partnerships**

This service director is responsible for a gross budget of £85 million (£45 million net), of which £35 million is for directly provided services and £50 million is for commissioned services. The Service Director is also responsible for c1330 directly employed staff. The directorate will have operational responsibility for fieldwork services in the north of the county and have a strategic lead for older people and partnerships. This responsibility will be exercised through management of key staff with a responsibility for providing services or planning and commissioning services for older people. In addition, this service director will:

- lead the department on the development of the older persons block within the Local Area Agreement
- lead the development of new housing options for older people
- take responsibility for the further development of assessment and care management services and the Single Assessment Process
- lead the implementation of the older persons' mental health strategy.

The service director has responsibility for the following managers and service heads:

- Locality Manager – Broxtowe, Gedling and Rushcliffe
- Service Head – Strategic Housing and Supporting People
- Service Head – Residential and Day Care (Older People)
- Service Head – Interagency Planning and Commissioning.

#### **4.3 Service Director – Physical Disability and Independent Living**

This Service Director is responsible for a gross budget of c£85 million (£45 million net) of which £35 million is for directly provided services and £50 million is for commissioned services. The post holder is also responsible for c1000 directly employed staff. The post has operational responsibility for fieldwork services in the south of the county and a strategic lead for physical disability services, carers' services and independent living. This responsibility is exercised through the management of key staff with a responsibility for providing services or planning and commissioning services for adults with a physical disability. However, like the Service Director for older people, this post exercises strategic responsibilities, which cut across client groups and geographic responsibility. In particular, the post has responsibility for:

- the strategic development of direct payments and (in future) individualised budgets
- occupational therapy services
- specialist services for sensory impairment
- supported employment services.

The service director has responsibility for the following managers and service heads:

- Locality Managers – Bassetlaw and Newark, Ashfield and Mansfield
- Service Head – Supported Employment and Catering
- Service Head – Interagency Planning and Commissioning
- Principal Officer – Charging and Assessments.

#### **4.4 Service Director - Strategic Services**

The rationale for having this service director is recognition of the importance of:

- purchasing and market management as key requirements of the future development of social care services, closely linked to planning and commissioning functions
- the importance of equalities, and the emphasis that social care departments must give to reducing inequality
- the importance of performance measurement and the collection of good information to inform service quality improvements and developments
- information management and the requirements of the White Paper to develop information 'prescriptions' with the NHS
- the need to retain an organisational development function, including core learning and development responsibilities, business planning and workforce planning.

This service director is responsible for a staffing complement of c300 full-time equivalent staff, with a budget of approximately £10 million. This is not a large budget in comparison to other service areas, but the market management function is responsible for contracts to the value of approximately £100 million. Further work needs to be completed to identify the final likely budget allocation for this service directorate.

The service director is responsible for the following managers and service heads:

- Service Head – Strategic Management and Business Change
- Service Head – Equalities and Business Performance
- Service Head – Purchasing and Market Management
- Principal Officer – Welfare Rights Service.

## 5. **Principles Underpinning the New Structure**

- 5.1 For the new structure, 6 key principles guide the development of the structure of each new department. The Adult Social Care and Health Department meets these principles in the following ways:

- **Statutory Requirements**

The creation of a Strategic Director of Adult Social Care and Health is in direct response to the statutory requirement to do so. The department also has the capacity to fulfil its other statutory requirements in relation to meeting needs of the local population, standards of services provided etc.

- **Community and Civic Leadership**

The Strategic Director of Adult Social Care and Health will be expected to demonstrate leadership across social care and health services in relation to social inclusion and wellbeing. Each service are provides for countywide and local management of services. Localisation of the structure is particularly evidenced at 3<sup>rd</sup> tier and below, which provide capacity for local partnership working.



- **Service First**

The focus of three of the four new service directorates is service and customer driven. Their business is about assessing and meeting needs, locally and as close to home as possible. The range of service functions enables a coherent set of services (a menu) to be offered, with an appropriate mix of commissioned and directly provided services. The fourth service director provides the capacity to develop user-engagement and customer satisfaction measures, which in turn underpins the delivery in the three other directorates.

- **Governance**

The retention of locality managers and service managers with district responsibilities provides the interface with local Members that has proved so beneficial in the past and will continue to be important in the future. At the same time, the retention of service directors who have a 'care group' responsibility (e.g. learning disability, older people) enables Members to understand clearly where responsibility lies for specific service issues.

- **Management Framework**

The structure contains clear lines of professional accountability from the individual care staff, up through service managers and locality managers to service directors. There is clarity about who takes responsibility for decisions and, at each level, a supervisory structure that supports this.

- **Fairness and Equity**

The division of responsibility for functions between four service directors offers an equitable distribution of responsibilities, taking into account not only the number of discrete functions managed at tier three but also the complexity of those functions.

## 6. **Conclusion**

- 6.1 This report sets out the responsibilities of the Adult Social Care and Health Department and of those of each service area under a Strategic Director.

**DAVID PEARSON**

**Strategic Director, Adult Social Care and Health**

## APPENDIX 1

**(Taken from White Paper – Our health, our care, our say: a new direction for community services)**

### **Our vision for social care for adults in England**

1. Our society is based on the belief that everyone has a contribution to make and has the right to control their own lives. This value drives our society and will also drive the way in which we provide social care.
2. This is a vision for all adults. It includes older people and younger adults who need care and support, people who are frail, people with a disability or mental health problems and people who care for or support other adults. It is also a vision for those who provide care services.
3. Services should be person centred, seamless and proactive. They should support independence, not dependence and allow everyone to enjoy a good quality of life, including the ability to contribute fully to our communities. They should treat people with respect and dignity and support them in overcoming barriers to inclusion. They should be tailored to the religious, cultural and ethnic needs of individuals. They should focus on positive outcomes and well-being, and work proactively to include the most disadvantaged groups. We want to ensure that everyone, particularly people in the most excluded groups in our society, benefits from improvements in services.
4. Over the next 10 to 15 years, we want to work with people who use social care to help them transform their lives by:
  - ensuring they have more control
  - giving them more choices and helping them decide how their needs can best be met
  - giving them the chance to do the things that other people take for granted
  - giving the best quality of support and protection to those with the highest levels of need.
5. We will achieve this by:
  - changing the ways social care services are designed. We will give people more control over them through self-assessment and through planning and management of their own services;
  - developing new and innovative ways of supporting individuals;
  - building and harnessing the capacity of the whole community to make sure that everyone has access to the full range of universal services;

- improving the skills and status of the social care workforce.

6. In summary, the vision we have for social care services is one where:

- services help maintain the independence of the individual by giving them greater choice and control over the way in which their needs are met;
- the local authority and Director of Adult Social Services have key strategic and leadership roles and work with a range of partners, including Primary Care Trusts and the independent and voluntary sectors, to provide services which are well planned and integrated, make the most effective use of available resources, and meet the needs of a diverse community;
- local authorities give high priority to the inclusion of all sections of the community and other agencies, including the NHS, recognise their own contribution to this agenda;
- services are of high quality and delivered by a well-trained workforce or by informal and family carers who are themselves supported;
- we make better use of technology to support people and provide a wide range of supported housing options;
- we provide services with an emphasis on preventing problems and ensure that social care and the NHS work on a shared agenda to help maintain the independence of individuals;
- people with the highest needs receive the support and protection needed to ensure their own wellbeing and the safety of society;
- the risks of independence for individuals are shared with them and balanced openly against benefits.

7. We do not deliver this vision at the moment. Sadly, the organisation and provision of our services do not help everyone to meet these goals consistently.

8. We want to use this vision to demonstrate where we need to change and to guide the way we provide care. Our challenge is to make this vision a reality.