

11th November 2019

Agenda Item: 7

REPORT OF THE SERVICE DIRECTOR, AGEING WELL SERVICES

REVIEW OF THE STAFFING STRUCTURE WITHIN ADULT SOCIAL CARE

Purpose of the Report

1. To seek Committee approval of the revised departmental workforce structure for the Adult Social Care Department to improve capacity and resources to deliver the Council's adult social care strategy.

Information

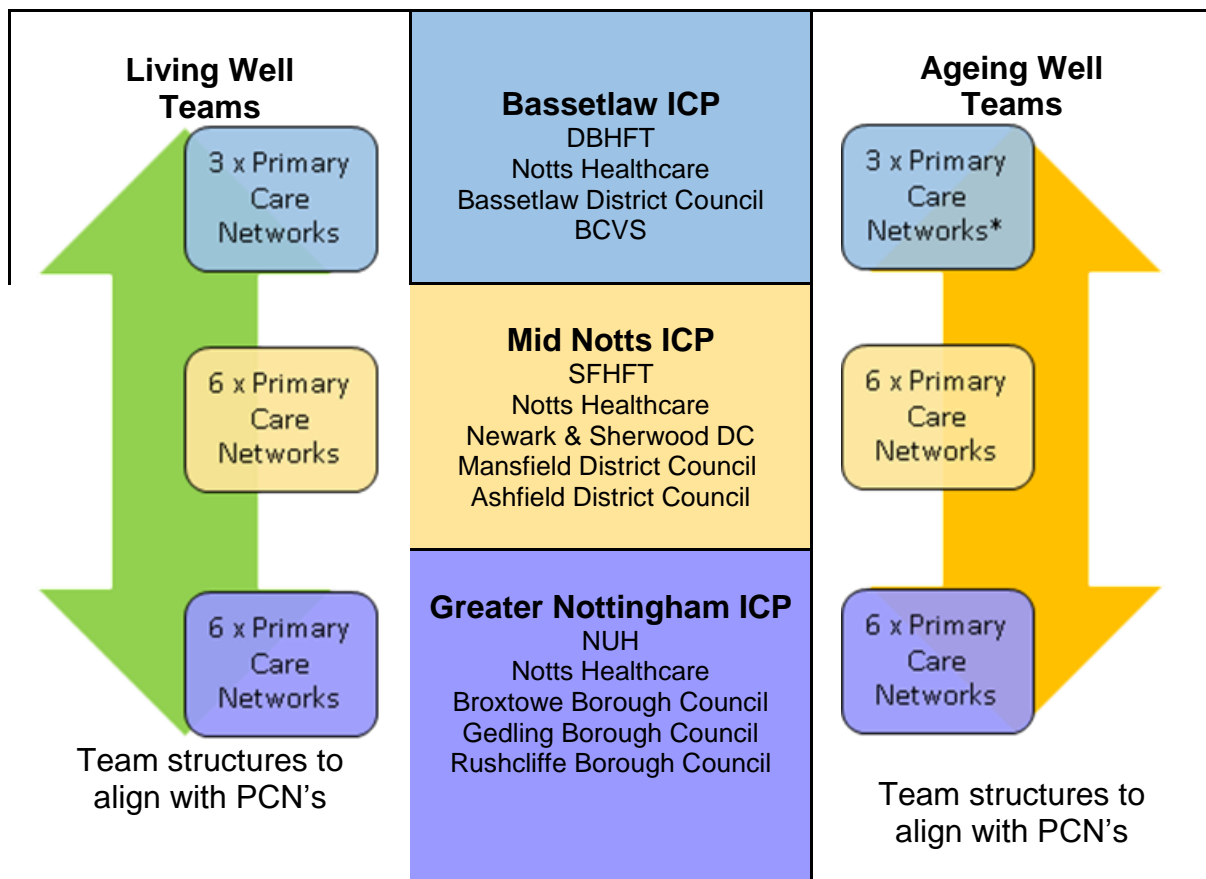
2. A report setting out a revised Senior Management structure for the Adult Social Care Department was approved by Committee on 9th September 2019. This report covers the proposed structure for the rest of Adult Social Care Department. Public Health, the majority of Provider Services, the Joint Improvement Programme and the Integrated Community Equipment Loan Service are out of scope of this report. The report also outlined the key drivers for change for the wider workforce review as:
 - delivering a new departmental operating model that drives key governance and decision making through setting strategy, policy and scrutiny with Elected Members. This will be underpinned by robust strategic commissioning plans informed by needs analysis, data analytics and the evidence base. This will in turn drive service commissioning and a mixed economy of provision
 - management capacity that is efficient and focused on delivery of key priorities and cultural change
 - embedding a high-performance culture with the conditions for delivery of excellent practice with absolute focus on improving outcomes for residents
 - ensuring a permanent staff structure resourced within available budget and able to deliver the departmental strategy
 - clear lines of accountability.
3. A workforce review has been completed across all services delivered by the Department. This included early engagement with nearly half of the department's 1,811 employees. In addition, a survey was circulated to all staff within the Department for those who were unable to attend, and 131 staff responded to the survey.

4. From the engagement sessions and survey a set of six key principles were developed which are considered important to future service delivery. These were:
 - Promoting people's independence and strengths at every opportunity
 - Improving people's experience of social care
 - Protecting the most vulnerable in our society
 - A workforce that allows us to work flexibly to meet demand
 - Developing a sustainable health and social care system
 - Being cost effective and as efficient as possible.
5. Staff told us about the things they felt the Department was already doing well and about those areas they felt could be improved. Whilst staff had many varied views, six key areas of consensus emerged which are described below:
 - staff told us how the Department's existing Reablement and Enablement services work well and increase people's independence and reduce the need for ongoing packages of support. Staff felt strongly that these services should be expanded to ensure that there is enough capacity to offer these services to all people who could benefit, especially when they may have new or increasing needs for support. The proposed Maximising Independence Service (MIS) will bring Reablement and Enablement services together under one Group Manager, to provide a joined-up service for people of all ages above 18 years, from the start of their journey with the Department. The MIS will provide a consistent offer to all new service users. It will provide good information and advice, resolve people's issues at the earliest opportunity, provide therapy led short term preventative services to support people to regain their independence and wellbeing and support people to remain living in their own homes for as long as possible.
 - staff told us that having specialist knowledge and expertise about a person's support needs (for example, mental health or visual impairment) is vital to being able to help people to achieve their goals. They felt that access to specialist teams and roles helps the Department to deliver a better service but that there were still opportunities to encourage better integration and multi-disciplinary working between services and teams, particularly in relation to people who have more than one support need or diagnoses. The proposed structure for the Living Well Service will create multi-speciality teams bringing together staff from the existing Learning Disability, Mental Health, Asperger's and Physical Disability Teams, to provide a more holistic approach to support service users and their families.
 - staff told us that they felt that the Department relied too heavily on temporary posts and that this had a detrimental impact on staff morale and staff turnover. The proposed structure significantly reduces the number of temporary posts within the Department in key areas of service delivery.
 - staff told us that where teams have been able to co-locate across specialisms and alongside health teams this is working very well and is of benefit to both service users and staff. In the proposed Ageing Well structure, teams have been aligned to local Primary Care Networks to facilitate better joined up working with Health which will provide a better and smoother service for people. It is intended that the proposed Living Well model will also align to Primary Care Networks.

- staff told us that a key element in promoting independence is supporting people to gain employment. The iWork team supports people into paid employment with support tailored to the individual and the specific employment opportunity with the objective of jobseekers being able to function independently in the workplace. It is therefore proposed that the iWork team transfers, as is, to the Maximising Independence Service as part of the wider enablement offer.
- staff told us that we need to simplify some of the Department's operational processes and a programme of work is being planned to address this with their involvement.

6. The proposed new model for the Department will provide an improved customer journey because more people will be provided with prevention and re-ablement services to improve their independence and wellbeing. Also, more people will retain the same team and lead worker until their issues are resolved, avoiding the need for them to be passed on to different teams and workers whenever possible.

7. The proposed workforce model represents a shift to a place-based approach. Community teams have been designed to align to Primary Care Networks to develop virtual multi-disciplinary teams working proactively with people with complex and/ or long-term conditions in local communities, supporting people to remain as healthy and independent as possible. This model will also enable social care staff to be more visible to people in their local areas, as well as to our key partners in the NHS, district councils and the community and voluntary sector. The diagram below visualises this place based and collaborative approach to shaping local communities.



8. An assessment of the proposed distribution of the workforce, across the County's seven districts, shows that this is broadly in line with both the current proportion of packages of care being supported and the spend on these packages. Numbers of new service users approaching the Council is consistent by district across services for people aged 65 years and over and for people aged 18-64 years old. Workflow across the districts and localities will continue to be monitored.
9. The Department has successfully trialled a number of new ways of working over the past two years and it is now timely to remodel the workforce in a way that shifts resources to maximise the evidence benefits of these. For example:
 - investment in the 3 Tier Model and work with the Customer Service Centre has supported an increased resolution rate in the Adult Access Service from 76% in 2017/18 to 84% currently
 - increased investment and focus on reablement services have seen an 18% increase in people completing a programme of reablement in 2018/19 compared to 2017/18
 - 79% of people who completed a programme of reablement in the first half of 2019/20 needed no ongoing package of homecare, compared to 74% in 2017/18
 - the establishment of the Notts Enabling Service has allowed an additional 879 people to take part in a programme of independence
 - only 9% of people supported by the Notts Enabling Service go on to require formal assessment and support. This combined with the work to resolve people's support needs at the earliest opportunity has seen a 39% reduction since 2016/17 in the requirement for formal assessments and support plans.
10. The Department's overall performance against various benchmarking figures to date has been good. There are some areas, however, where there is further room for improving the services that we offer. For example, data shows that whilst the Department offers a programme of independence to 43% of people aged over 65 years and 65% of people aged 18 – 64 years old, there are more aspirational national targets outlined by the Institute for Public Care (IPC) that we intend to work towards. These include that:
 - the proportion of older people who receive less than 10 hours of domiciliary care as a proportion of all older people receiving domiciliary care should be no more than 15%
 - the proportion of older people assessed as having care who are offered a programme of reablement should be more than 70%
 - the proportion of adults with a learning disability who are offered a programme of enablement should be more than 30% (with 100% of those with moderate to low needs)
 - the proportion of adults who have a newly acquired disability who should be offered an assessment to help them maximise their opportunities for independent living should be over 90%
 - the proportion of adults recovering from mental ill-health who should have a programme to support their long-term recovery, that includes helping them to both self-manage their symptoms plus includes peer support, should be over 70%
 - the proportion of those who are assessed as needing domiciliary care and should receive their care within 48 hours of the assessment being completed should be over 90%.

Provider Services

11. In September 2019, the Committee approved a reduction in Direct Services Group Manager posts from two to one Group Manager, Provider Services, from April 2020. It is proposed that in order to support this reduction, both existing Service Manager posts are retained, one for day opportunities and one for registered services.
12. Alongside the review of the Department's structure and workforce, a longer term piece of work is being undertaken to agree development plans for all aspects of directly provided services within Adult Social Care, including day and employment services, County Horticulture, County Enterprise Foods, Shared Lives, short breaks and other residential services. Proposals are being developed in line with strategic objectives and the principles of the workforce review, with a view to adapting or redesigning service delivery and staffing structures where necessary.
13. Plans for some areas of service are further progressed than others, for example a development proposal for the County Horticulture and Work Training Service was approved by the Committee in February 2018 which included improvements to the commercial offer at Brooke Farm. This is now at a stage where changes need to be considered in relation to hours of operation and the job roles needed to run an effective enterprise. The current workforce structure will be redesigned to support this and may include changes to existing job descriptions and working hours with the potential for alternative roles to be created. To progress this, it is proposed to engage with affected staff on the design of the operational model and structure and consult on any changes to job descriptions and role dimensions with a view to implementation from April 2020.
14. Further reports will be presented to the Committee in the coming months as subsequent development plans progress.

Proposed Future Workforce Structure

15. **Appendix 1** outlines the proposed Departmental workforce structure, with the exception of the services set out at **paragraph 2**.
16. The proposed structure being considered in this report is divided into three key areas:
 - **Ageing Well** - which will cover services for adults aged over 65 years and also the customer pathway into adult social care services (through the MIS) which will maximise the early resolution of contacts, prevention and re-ablement. The service also includes the adult social care team based within the Multi-Agency Safeguarding Hub (MASH) which receives and responds to all safeguarding referrals. The Ageing Well Community Teams locality alignment will support the further development of strength and place-based approaches to working with partners and local communities
 - **Living Well** - which will cover all age disability services with combined multi-speciality teams supporting adults of any age with learning disabilities, mental health issues, physical disabilities, autism spectrum disorders and other complex needs. Although disciplines will be combined within place-based teams, areas of specialism will be retained which will not only share knowledge and best practice but will also strengthen our support offer to people with co-existing and complex conditions

- **Strategic Commissioning and Integration** - which will cover oversight and development of the adult social care market and the strategic commissioning of adult social care services in partnership with other public services, such as health, housing and district councils. This area will also have responsibility for the transformation of adult social care and departmental savings and efficiencies work.
17. The structure reflects the ongoing permanent requirements of the Department to deliver its statutory duties. In the current structure there are circa 240 full time equivalent (FTE) temporary posts. These temporary posts have been reviewed throughout this exercise and fall into one of the four categories below:
- required permanently in the new workforce model to support the ongoing delivery of the departmental plan and adult social care strategy, including the delivery of statutory duties (included in **Appendix 1**)
 - there are 3 FTE posts proposed in the new permanent structure where current approval expires on 31st December 2019; these are set out in **Table 2**. The proposal is to extend these posts temporarily until the new permanent structure is implemented in April 2020.
 - required for a temporary period to support the delivery of temporary programmes of work and on completion of the work the posts will no longer be required (listed in **Table 1** below)
 - posts previously established temporarily where the work will be completed by April 2020 so not required in the new permanent structure post April 2020.
18. In undertaking the above review of temporary posts in line with the design of the new workforce model, the heavy reliance of the Department on temporary posts will have been resolved as well as addressing a number of the issues that arise from managing services with large temporary cohorts of staff. For example, the Notts Enabling Service is currently a largely temporary service and is struggling with a turnover rate of nearly 40%.
19. The workforce model that has been developed has reduced the number of centralised teams that focus solely on individual functions. Whilst the model retains the capacity and skill set to complete these functions, such as reviews, bringing this capacity into fewer more holistic teams allows for greater agility and flexibility to respond to changing needs and demands across the customer journey.
20. The model seeks to deliver a simplified customer journey building increased capacity into areas where it is known there is opportunity to provide a better customer experience and meet people's needs as early as possible. This has been done by increasing the remit and capacity of teams that sit at the earlier stages of a customer's journey. This will help us to achieve even greater performance in the areas of Early Resolution and Promoting Independence as outlined in **paragraphs 9 and 10** above.
21. The model will enhance Strategic Commissioning to ensure that it is firmly based on best practice and the commissioning cycle. Major reviews, for example, planning of whole life disability provision, will be undertaken. These will require the combined skill set of the

whole directorate to ensure service user and market engagement are maximised, and decisions are based on well informed analysis. The new model will allow closer alignment with strategic partners both within and outside the Council and will provide for integrated planning and commissioning.

22. The current Deprivation of Liberty Safeguards workforce is included in the Ageing Well staffing structure (**Appendix 1**). This will require review as part of implementing the new Liberty Protection Safeguards. This work cannot, however, be completed until further clarity is provided in the national Code of Practice and Regulations and will need to be completed at a later stage. A separate report is being presented to Committee today covering this in more detail.
23. Additional work will be required to review the out of hours Approved Mental Health Practitioner (AMHP) provision in response to the recommendations of the independent review of the Mental Health Act. Once the implications of the recommendations and any new guidance or legislation are fully known, a separate report detailing any workforce requirements will be presented to Committee at the earliest opportunity.
24. The target operating model shown at **Appendix 2** describes the broader strategic vision for the Department and how it aims to operate.
25. It is proposed that the revised structure will take effect from 1 April 2020, although some transition arrangements will be required.
26. To complement the proposed permanent structure there remains a need for some temporary posts, those identified as part of the temporary post review for a defined period to complete discrete pieces of work. These are at a significantly reduced number from the existing circa 240 FTE posts.
27. The temporary posts being requested for 1st April 2020 until 31st March 2021 are summarised in **Table 1** below which also clarifies if the post is currently established and the request is for a 12 month extension or if the request is to establish the temporary post going forward for 12 months from 1st April 2020.

Table 1: Temporary posts requested from 1st April 2020 until 31st March 2021

Area	Post Title	Grade	FTE	Cost p.a. £	Extension or establishing
Data Input Team	Business Support	4	5	147,347	Extension
Ageing Well	Project Manager	D	1	58,407	Extension
Liberty Protection Safeguards Implementation	Project Manager	D	1	58,407	Establishing
Service Improvement for Process Review	Project Manager	D	2	116,815	Establishing
	Mosaic Technical Specialists	C	2	108,892	Establishing
	Business Change Analyst	C	1	54,446	Establishing
	Programme Officer	B	1.5	71,787	Establishing

	Programme Officer	B	0.5	23,929	Extension
	E support Worker	5	1	34,731	Establishing
Total			15	674,762	

28. In addition to the proposed revised structure there is also a planned programme of work to look again at the processes and systems in place across the Department with a view to streamlining and improving these. The aim of the work will be to both increase efficiency and increase the amount of time that social care staff can spend working with service users to meet their needs.
29. It is proposed to extend the below posts temporarily until the new permanent structure is implemented in April 2020 to provide continuity of service as the posts are reflected in the new proposed permanent staffing structure. These posts are summarised in **Table 2** below.

Table 2: Existing temporary posts included in the new proposed workforce where extensions are requested until 31st March 2020

Post Title	FTE	Current end date	Cost of extension until 31 st March 2020 £
Commissioning Manager	1	31 st December 2019	17,282
Strategic Development Officer	2	31 st December 2019	15,357

30. The costs of these in year short-term extensions will be met from within existing budgets for the remainder of the 2019/20 financial year.

Implementation

31. The proposed changes will be subject to detailed consultation with employees and their recognised representatives. The structure will be populated using the Council's agreed employment policies and procedures. Implementation will be undertaken using the principles of maintaining employment and wherever possible minimising the use of competitive processes. This could also include the facility to redeploy and in some cases retrain where there are vacancies with a comparable skills match. This approach will maximise opportunities and reflects the refreshed approach to transformation and change across the Council.
32. The intention is to, wherever possible, minimise the use of long term temporary contracts other than for the recognised purposes of covering staff absence for a time limited period. Staff and their representatives will be fully engaged in the consultation process subject to approval for the new structure being given.

Other Options Considered

33. Other options were considered as part of the early engagement process undertaken with employees; it was agreed that continuing with the current structure was not an option and as such the proposed workforce model has been developed.

Reasons for Recommendations

34. In order to support the Department to better deliver on the Adult Social Care and Public Health Departmental Strategy, to be better placed to build on existing good performance and strive to achieve the aspirational targets described above, and to address the feedback from the early engagement.

Statutory and Policy Implications

35. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Financial Implications

36. The requested permanent structure (**Appendix 1**) can be funded within the existing staffing budget of the department. The posts requested temporarily from 1st April 2020 (**Table 1**) can be funded from reserves for 2020/21. The short term in-year extension of 3 FTE posts for a 3-month period (**Table 2**) will be met from existing in-year staffing budgets for the remainder of the 2019/20 financial year.

Human Resources Implications

37. Consultation and implementation will be undertaken using the County Council's agreed approach to consultation and employment policies and procedures. There is detailed work to be undertaken to determine the individual contractual positions of the staff affected.

RECOMMENDATIONS

That Committee:

- 1) approves the proposed permanent staffing structure for the Adult Social Care Department as attached at **Appendix 1**.
- 2) approves the extension or establishment of the proposed temporary posts from 1st April 2020 to 31st March 2021 as summarised below:

Area	Post Title	Grade	FTE	Cost p.a. £	Extension or establishing
Data Input Team	Business Support	4	5	147,347	Extension
Ageing Well	Project Manager	D	1	58,407	Extension
Liberty Protection Safeguards Implementation	Project Manager	D	1	58,407	Establishing

Service Improvement for Process Review	Project Manager	D	2	116,815	Establishing
	Mosaic Technical Specialists	C	2	108,892	Establishing
	Business Change Analyst	C	1	54,446	Establishing
	Programme Officer	B	1.5	71,787	Establishing
	Programme Officer	B	0.5	23,929	Extension
	E support Worker	5	1	34,731	Establishing
Total			15	674,762	

- 3) approves the extension of temporary posts to 31st March 2020 where current approval expires before that date as summarised below:

Post Title	FTE	Current end date	Cost of extension until 31 st March 2020 £
Commissioning Manager	1	31 st December 2019	17,282
Strategic Development Officer	2	31 st December 2019	15,357

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Constitutional Comments (EP 15/10/19)

38. The recommendations fall within the remit of the Adult Social Care and Public Health Committee by virtue of its terms of reference.

Financial Comments (KAS 18/10/19)

39. In line with the Chancellor's Spending Round and subsequent announcements, the Council's Medium Term Financial Strategy now assumes that the Winter Pressure Grant will be rolled into the Better Care Fund (BCF) along with the Improved Better Care Fund (IBCF) and that this funding will continue for at least the next three years. As a result, the proposed permanent structure along with the areas outside of the scope of this report are contained within the overall departmental staffing budget of £65.5m.
40. The temporary posts requested can be funded from the Adult Social Care Transformation Reserve which currently stands at £4.8m.

HR Comments (GME 14/10/19)

41. Subject to Member agreement the proposals will be formally consulted upon and implementation will be in accordance with the agreed employment policies and procedures of the Council.

Background Papers and Published Documents

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

[Adult Social Care – Senior Management Structure: report to Adult Social Care and Public Health Committee on 9th September 2019](#)

[Adult Social Care and commercial development – report to Adult Social Care and Public Health Committee on 5th February 2018](#)

Electoral Division(s) and Member(s) Affected

All.

ASCPH687 final