

11 July 2016

Agenda Item:6

**REPORT OF THE SERVICE DIRECTOR, SOUTH NOTTINGHAMSHIRE AND
PUBLIC PROTECTION AND THE SERVICE DIRECTOR, NORTH
NOTTINGHAMSHIRE AND DIRECT SERVICES****TRANSFORMATION PROGRAMME – INTEGRATION IN SOUTH AND NORTH
NOTTINGHAMSHIRE****Purpose of the Report**

1. The report provides the Committee with an update on the progress of integration arrangements in South Nottinghamshire and Bassetlaw. The report seeks approval for the Better Care Funding to be assigned to fund three integration posts, one in Bassetlaw and two in South Nottinghamshire, as previously agreed at the Better Care Fund Board meeting in May. Approval is required to establish the Bassetlaw post and agree the transfer of funding to Rushcliffe Clinical Commissioning group the South posts as host employer.

Information and Advice**Background****South Nottinghamshire including Nottingham City**

2. The Transformation Programme across Greater Nottingham is overseen and agreed by the Greater Nottingham Health and Care Partners (GNHCP). The partnership is made up of Rushcliffe, Nottingham West, Nottingham North and East and Nottingham City Clinical Commissioning Groups (CCGs), the City and County Council, the combined Acute Trust (Nottingham University Hospital and Sherwood Forest Acute Trust), Nottinghamshire Healthcare NHS Foundation Trust (County Health Partnerships), Nottingham Citycare Partnership, Circle, East Midlands Ambulance Service and Nottingham Emergency Medical Services.
3. The vision of the partnership is to “create a sustainable, high quality health and social care system for everyone through new ways of working together, improving communication and using our resources better”.
4. To achieve this vision and to deliver care closer to people’s homes requires partners to move away from high-cost, reactive and bed-based care to a model that is preventative, proactive and focuses on wellbeing and independence. Integration and alignment of services within health and social care is the key. As a result there will be less reliance on acute hospital and residential and nursing care, and lengths of stay in hospital should

reduce.

5. Closer working together and the alignment of health and social care services is crucial in delivering this ambition.

Bassetlaw

6. The Transformation Programme in Bassetlaw is overseen and agreed by the Integrated Care Board (ICB) which was established in 2013. The partnership is made up Bassetlaw Clinical Commissioning Group, Doncaster and Bassetlaw Foundation NHS Trust, Bassetlaw District Council, Nottinghamshire County Council, Bassetlaw Community and Voluntary Service, Nottinghamshire Healthcare Foundation NHS Trust and primary care.
7. Bassetlaw CCG and its partners have a vision for health and care, 'A Community of Care and Support', which sets out its aspiration for the population of Bassetlaw until 2019. This vision describes what the local population can expect:
 - Better care for our frail and the elderly population
 - More and better care provided locally
 - A high quality local hospital with 7 day working, easy access, and essential services, such as 24 hour Emergency Department, and consultant-led maternity unit
 - Same day GP led care, with access to the right health care professional
 - More support for independent living with enhanced sheltered housing choices
 - Patients with a mental health condition to receive improved care through teams, professionals and services working more closely together
 - Care homes to be an integral part of our local community
 - Our local organisations to take joint responsibility for improving care and support
 - Integrated delivery of care and support through team working
 - Organisations to work across boundaries
 - Professions to work together in teams with our patients at the centre of their care
 - Organisations to openly share and pool resources where it will benefit the patient.
8. Through the ICB a range of strategic programmes have been implemented in relation to: urgent care; care for the elderly in the community; care homes; mental health services; and supporting people after acute illness. These strategic programmes have laid the foundation for increased integration of care across the health and social care system.
9. In order to build on these achievements and to lay the foundation for a sustainable health and care economy in Bassetlaw, partners have agreed that a natural progression is a transition from the ICB to an Accountable Care Partnership. Through this approach the NHS, local government and the third sector will jointly aim to transform health care and prevention, improve health and care outcomes and the patient experience and more efficiently use public sector funding.
10. An accountable care partnership describes the development of collaboration between key partner organisations and the population, to coordinate and deliver efficient care. For Bassetlaw this approach is being developed by organisations commissioned to achieve a single set of outcomes with shared systems and incentives. The longer term ambition is to

provide a high quality, safe health system, with an emphasis on innovation and collaboration, whilst remaining responsive to local and national requirements.

Additional capacity to support transformation and integration

11. In order to create additional capacity to deliver the work programmes that are required in Greater Nottingham and Bassetlaw, it is proposed to recruit to three Transformation Programme posts.
12. It is proposed that two Transformation Programme posts are enabled in Greater Nottingham, to be jointly funded by the Clinical Commissioning Groups and the County Council on a 50:50 split. The Council's funding for the posts will come from the Better Care Fund (BCF). These posts will be employed by Rushcliffe CCG.
13. It is proposed that one Transformation post is established for Bassetlaw, to be employed by Nottinghamshire County Council. This post will be fully funded by the Council through the BCF.
14. Two Transformation Manager posts were previously approved by ASCH Committee in November 2014 on temporary basis for two years. This was as part of the additional capacity required by Adult Social Care and Health (ASCH) to implement the departmental savings and efficiency plan and enable the department to undertake the necessary transformation to adult social care services in the County. These posts are dedicated to support the integration agenda with health across the County. One post focuses on South Nottinghamshire and the other was established for both the Mid-Nottinghamshire and Bassetlaw planning units, because the ASCH Senior Management structure had one Service Director covering both areas and the size of the combined areas (in population terms) was roughly equivalent (South Nottinghamshire – 42% of the total, Mid and North Nottinghamshire – 58% of the total). In addition, there are three CCGs operating in Mid and North Nottinghamshire, which is equivalent to South Nottinghamshire.
15. The post holders started in post in April 2015 (Mid and North Nottinghamshire) and May 2015 (South Nottinghamshire). Subsequent developments have resulted in the need to request additional transformational capacity to support integration work, dedicated to Greater Nottingham and Bassetlaw.
16. The reasons for needing extra capacity in Greater Nottingham are:
 - a) to support the cultural and behavioural change required by the planned integration programme across multiple commissioning and provider organisations of which Greater Nottingham (including South Nottinghamshire) is made up.
 - b) to provide the support required to deliver the aspirational transformation required by the Sustainability and Transformation Plan (STP).
 - c) to sustain the pace of change required in the establishment of new models of care in order to deliver the STP, and in the process reflect investment across the other planning areas around their transformation programmes.
17. The reasons for needing extra capacity in Bassetlaw are:

- a) the ASCH Senior Management structure was changed in 2015 to reflect the fact that the nature and extent of the involvement required in each planning unit justified there being oversight from a dedicated Service Director. It was proving impossible for the Service Director covering Mid and North Nottinghamshire to attend all the relevant meetings appropriate to the post and provide the time to build up the trust and relationships necessary within each area, to achieve successful outcomes for social care. The same difficulty now applies to the combined Transformation Manager post, as the scale and pace of work to develop the Better Together Alliance in Mid-Nottinghamshire has dominated the postholder's time during 2015/16. This has left significant gaps in the support for integrated working in Bassetlaw.
 - b) Bassetlaw Clinical Commissioning Group is developing proposals to establish an Accountable Care Partnership. It is expected that there will need to be a greater focus on integrated working during 2016/17, with more attendance and involvement expected from the Council. This cannot be supported by the current Transformation Manager, due to ongoing commitments within the Better Together programme in Mid-Nottinghamshire.
 - c) the integration agenda is very significant from a political and strategic perspective. The potential benefits to service users and potential clients have been clearly expressed and it is imperative that sufficient involvement from the Council is provided to the emerging discussions in Bassetlaw, so that social care interests are appropriately addressed by any new proposals.
 - d) in addition to the Local Plan being developed by Bassetlaw and the Accountable Care Partnership developments, Bassetlaw has been asked to join with South Yorkshire to develop that region's STP. Therefore, there is an additional set of wider sub-regional meetings that need to be attended by social care, to ensure that the Council's interests are reflected in that planning requirement and associated implementation.
18. Approval was given by the Better Care Fund Board on 26 May 2016 to fund the integration posts as outlined. For South Nottinghamshire the posts required are 1 FTE Integration Programme Manager (Band 8c) and 1 FTE Integration Project Support Officer (Band 7). These posts are to be funded equally by the south Nottinghamshire CCGs and the County Council. For Bassetlaw, 1 FTE Transformation Manager (Band E) is required.

Other Options Considered

- 19. There are currently 2 FTE Transformation Managers based within the Council and providing supporting work on health and social care integration. However, given the extent and range of change required in this area, as identified earlier in the report, it is necessary to establish additional temporary capacity.

Reason/s for Recommendation/s

- 20. Additional capacity is required to deliver the Transformation Programmes in these two planning units.

Statutory and Policy Implications

21. This report has been compiled after consideration of implications in respect of crime and disorder, 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, sustainability and the environment and ways of working 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

22. The costs and funding of the three additional temporary posts are as follows:

South Nottinghamshire

1 FTE Integration Programme Manager (Band 8c) £30,500 per annum

1 FTE Integration Project Support Officer (Band 7) £18,125 per annum

With an equal (50%) contribution from CCG partners.

Bassetlaw

1 FTE Transformation Manager (Band E) £60,030 per annum

For the three posts, the total BCF contribution is £217,310 for two years.

Human Resources Implications

23. Establishment of three additional posts, as described in **paragraph 18**, to be recruited on a fixed term contract for a period of two years.

Implications for Service Users

24. Greater integration between statutory agencies will have a positive impact on service user/ patient experience of health and social care services.

RECOMMENDATION/S

That the Committee:

- 1) notes the update on the progress on integration with health partners in both the South Nottinghamshire and Bassetlaw planning units.

- 2) confirms that the Better Care Funding, which was agreed at the Better Care Fund Board in May 2016, be allocated to fund the three Transformation posts.
- 3) agrees the establishment of one Bassetlaw Transformation Programme post (Band E)
- 4) agrees the transfer of funding outlined for the South Nottinghamshire posts to Rushcliffe Clinical Commissioning Group as employer for these positions.

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Constitutional Comments (LM 24/06/16)

25. The recommendations in the report fall within the Terms of Reference of the Adult Social Care and Health Committee.

Financial Comments (KAS 24/06/16)

26. The financial implications are contained within paragraph 22 of the report.

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.

Overview of Departmental Savings and Efficiencies Programme – report to Adult Social Care and Health Committee on 3 November 2014

Electoral Division(s) and Member(s) Affected

All.

ASCH412