

Report to Adult Social Care and Public Health Committee

9th November 2020

Agenda Item: 9

REPORT OF CORPORATE DIRECTOR OF ADULT SOCIAL CARE AND PUBLIC HEALTH

REVIEW OF COMMISSIONING FUNCTION WITHIN INTEGRATED STRATEGIC COMMISSIONING AND SERVICE IMPROVEMENT DIRECTORATE

Purpose of the Report

- 1. The purpose of the report is to provide Committee with an update on the progress of implementing the new workforce operating model, and the outcome of the subsequent review of the Integrated Strategic Commissioning and Service Improvement function, and seek approval of the re-alignment of functions and activities to be completed by 31st March 2021.
- 2. The report also seeks approval for changes to the staffing establishment within the Integrated Strategic Commissioning and Service Improvement directorate to support the change in activities as described. Changes will take place with immediate effect for new and vacant posts. Changes to at risks posts will be finalised by 31st March 2021. These changes involve:
 - the disestablishment of the temporary 0.8 fte Better Care Fund Programme Manager (Band F) post
 - the discontinuation of the Partnership Team subject to consultation in line with HR processes which would disestablish 3 fte Transformation Manager (Band E) posts
 - a reduction of 1.5 fte Strategic Development Manager (Band E) posts within Service Improvement subject to consultation in line with HR processes.
 - the disestablishment of vacant temporary and permanent posts
 - the establishment of 1 fte Strategic Development Officer (Grade 5) post, 1 fte Commissioning Officer Post and 1 fte Contract Performance Officer (Band A) post.

Information

Background

3. Adult Social Care and Public Health (ASCPH) Committee approved the primary phase of a new operating model for the Adult Social Care workforce on 11th November 2019. The

intention was to review the model on an ongoing basis to ensure it continues to be fit for purpose and provides the right support for people who require social care. The Department has now started to review specific areas of the business, with an initial focus on the Integrated Strategic Commissioning and Service Improvement function.

4. The diagram below shows the structure that was implemented as part of the workforce operating model:



- 5. A review of the structure was commissioned to address some outstanding issues around function duplication and overlap between Strategic Commissioning, Quality Assurance and Citizen Safety (QACS), Service Improvement, and the Partnership Team. There was also a need to clearly define areas of responsibility to utilise the use of resources more effectively and improve outcomes for the people of Nottinghamshire.
- 6. The Corporate Transformation review that was presented at the Improvement and Change Sub-Committee on 21st July 2020 gave impetus to review the commissioning function and the resources to better align with service and corporate priorities. The recommended corporate transformation model is to centralise transformation functions and for any service improvement initiatives to be carried out within the department. The review has taken this into account to ensure roles support service improvements identified by the department and future corporate transformation priorities. This includes the alignment of QACS to work in line with the corporate quality assurance framework led by the Procurement Team.
- 7. The current primary responsibilities of the four areas in scope of the review are:

Service Improvement (SI) - to support the department in making service improvements to achieve business priorities and meet statutory requirements to support people achieve their desired outcomes.

Integrated Strategic Commissioning (ISC) - to 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 and to provide contract management in some areas of the market.

Quality Assurance and Citizen Safety (QACS) - to provide a quality assurance and contract management function across the County. To ensure a sustainable social care market that can meet the care and support needs of local people. To provide strategic oversight of the statutory safeguarding function.

Partnership Team – to work with key partnerships including the Clinical Commissioning Groups (CCGs), Healthcare Trusts and District Councils to support greater integration in line with Integrated Care System and Council objectives.

Review Approach

8. The review was structured in stages as the diagram below shows. The approach included engagement with key colleagues across the directorate.



- 9. It has also been necessary to review all vacancies across the directorate. The pandemic has meant that the work that was previously planned against some resources was suspended and there would now be a different focus. It is proposed that some temporary and permanent posts are therefore disestablished as they are no longer required in the current context. Full details of the posts are outlined at **Appendix A**.
- 10. The posts identified are 1 fte Liberty Safeguards Implementation Project Manager (Band D), a 0.5 fte external workforce Project Manager (Band B), 1 fte Business Change Analyst (Band C), 0.5 ASWP (Band C), 1.5 fte Programme Officer (Band B), and a 1 fte e-Support Worker for Mosaic (Grade 5).

Summary of Key Findings

Service Improvement (SIT)

11. Service Improvement has provided a range of support functions to the department in the past which have primarily been focused on project management and filled a gap where there was a lack of capacity. In reviewing the function, it has highlighted that the Service Improvement offer needs to focus on improvements and align better to departmental priorities, practice quality and development. It also needs to reflect the revised corporate transformation framework which looks at the resource allocation and responsibility in four key areas: Transformation, Change, Service Improvement and Continuous Improvement.

Overarching Changes

- 12. Service Improvement therefore needs a more defined offer that focusses on three distinct areas of responsibility:
 - Service Improvement to manage service improvement initiatives and resources to support the business to deliver its objectives and priorities, as well as implementation of statutory responsibilities including new legislation
 - Digital, Business Systems and Data Quality to progress digital strategy and other digital developments across Adult Social Care & Health; improve and implement a data quality strategy and oversee the business systems team
 - Quality and Practice embedding quality and practice a more focussed quality and practice offer would be developed to embed strength-based practice, owning and driving performance to support the department to develop high performing teams.
- 13. There are currently 3.5 fte Strategic Development Managers (SDMs) that support the management of the team. As the structure moves towards three distinct areas of

responsibility, a reduction in these posts is therefore proposed, subject to the outcome of the consultation process. This would require a reduction of 1.5 fte SDM (Band E) posts. Further details can be found at **Appendix A**.

- 14. An area that requires re-shaping is the departmental digital offer. Whilst the Service Improvement Team took on responsibility for Mosaic case management system last September, other digital functions are spread across the department and it is proposed that relevant functions and posts are brought together. Work is also required with teams to adopt a more focused and structured approach to data quality, that fits with the developing management information strategy.
- 15. The review is seeking to address some inconsistencies in similar graded roles by working to one role description to better support the revised offer. This specifically refers to the current Grade B roles of Transformation partner and Programme Officer posts
- 16. The review is proposing to change the name of the function to **Service Improvement**, **Quality and Practice** to reflect the future offer which includes data quality.

Integrated Strategic Commissioning (ISCT)

- 17. There has been some overlap of activity between the team's remit around joint commissioning with that of the Partnership Team. The team also continues to provide a performance management function for younger adults and non-statutory contracts which can create an inconsistent approach to contract performance management across the department.
- 18. The Housing with Care and Support Team was established as a newly merged service following the workforce review. This new structure is working well, but a minor reconfiguration is required to maximise the effectiveness of the team and ensure that there is sufficient commissioning capacity in both sections of the team.

Overarching Changes

- 19. It is proposed that younger adults and non-statutory contract management responsibility is moved to the QACS. This will involve some transfer of resources. It is proposed that the initial transition of resources to support statutory contract management takes place with immediate effect with the transition of non-statutory contract management to take place more gradually. This would bring about a consistent contract management approach across the department and in line with the corporate quality framework. This will be achieved by the reduction of 0.87 fte Commissioning Officer (Band B) post and the creation of a 1 fte Contract Performance Officer (Band A) post to support the change.
- 20. The team would assume the strategic lead for health partnerships including the Better Care Fund performance, currently held by the Partnership Team, by the start of April 2021. Whilst the reduction in duplication will mean that much of this can be absorbed into the ISCT, it is proposed that a 1 fte Strategic Development Officer (Grade 5) post is created to support this work.

21. It is proposed that new Commissioning Officer (Band B) post be established in the Housing with Care and Support Team which will be funded through the disestablishment of the Advance Social Worker Practitioner (Band C) post.

Quality Assurance and Citizen Safety (formerly Quality Market Management) (QACS)

- 22. Following the pandemic, the QACS team has been at the forefront of coordinating the emergency response with providers. Whilst the QACS leads on the performance management of statutory services for older adults, this is inconsistent for younger adults and largely does not include non-statutory services. This led to some confusion and potential inconsistency of approach and, where appropriate, all performance management activity should shift to QACS.
- 23. Under the revised workforce structure, operational and strategic safeguarding functions were separated. To address this, both the operational and strategic functions of safeguarding would now sit under the Ageing Well directorate in order to better support safeguarding outcomes and to allow QACS to focus on its key functions.
- 24. The review took place when the team was in the middle of responding to and supporting the care market during the pandemic. This meant that the function service review was 'light touch'. In the next few months, management would reflect on the Covid-19 response and learning, and take a more detailed look at further opportunities to refine and make improvements for the future within QACS.

Overarching Changes

- 25. Given the change of function the review is proposing to re-name the function Quality and Market Management with immediate effect.
- 26. The team would assume responsibility for the management of all contracts including non-statutory providers currently managed by Strategic Commissioning. This would ensure consistent quality monitoring and auditing across all commissioned services within the department. Identified resources as laid out in paragraph 19 will move across to provide additional capacity.
- 27. The strategic safeguarding function and associated resources have moved to Ageing Well in line with the Workforce Re-Modelling start date of 1st September 2020.

Partnership Team

28. The work of the Partnership Team has been in three main areas: developing a strategic approach to the Better Care Fund; working with front facing teams to develop more integrated care pathways; and developing joined up Information Technology systems and processes between social care and key partners (ICT interoperability). Whilst all of these functions have been of value, there has been some duplication and confusion of roles and responsibility with the function of Integrated Strategic Commissioning and Service Improvement.

- 29. Integrated and joint commissioning functions fall within the remit of the ISCT as part of the wider commissioning agenda, whilst ICT interoperability and digital development aligns with business systems that sit within Service Improvement.
- 30. The resources that were working on health integration with partners were brought together under a temporary new Programme Manager to create the Partnership Team in September 2019. Funding for this post has been subject to discussion with health partners and the decision has been made by health to discontinue to fund the post. The team has been temporarily moved into the SIT, subject to the outcome of the proposals contained within this report.

Overarching changes

- 31. Given the identified issues around duplication and lack of clarity around roles and responsibilities, particularly in relation to integrated commissioning with health partners and the development of digital solutions, the proposal is to move digital/system functions to the SI, and the Better Care Fund (BCF) and health integration functions into the ISCT with other aspects of operational health partnerships of this work being the responsibility of the relevant locality managers within Ageing Well and Living Well.
- 32. The discontinuation of health funding has resulted in disestablishing the temporary Better Care Fund Programme Manager (Band F) post with effect from 30th September 2020. The current 3 fte Transformation Manager (Band E) posts do not clearly align to the future needs of the department within the ISCT and SIT. It is therefore proposed that, subject to the outcome of a consultation process, the Partnership Team is disestablished and that the 3 fte Transformation Manager (Band E) posts would be put at risk in line with HR processes. It is proposed that the activity within that team would be distributed between SI and the ISCT and the digital/system posts would move to the SIT to support this work, with a small additional resource being identified to support the additional activity required in the ISCT which is identified in Table 2 in **Appendix A**.

Other Options Considered

- 33. To maintain current structures would not support improved departmental alignment or the re-focussing of activity and resources in line with departmental priorities and the new corporate Transformation Programme. Additional resources would need to be identified to maintain the current BCF Programme Manager role.
- 34. To re-align the Transformation Managers currently based within the Partnership Team to sit within the SI and ISC Teams: the current grading of the posts does not align with the existing structures within these teams and so the posts and grades would need to be subject to considerable re-shaping.
- 35. To move the 1.5 fte Strategic Development Manager (Band E) posts from SI and 3 fte Transformation Manager (Band E) posts from the Partnership Team to the proposed centralised Transformation Team yet to be established: it is not clear whether the roles would be compatible and how easily the current roles and grades would transfer into this team, as the function is yet to be established.

Reason/s for Recommendation/s

- 36. To remove duplication and overlap, and provide greater clarity around the roles and responsibility of the Integrated Strategic Commissioning and Service Improvement Directorate and to maximise the use of current resources.
- 37. To address the discontinuation of the funding from health partners for the BCF Programme Manager post.
- 38. To incorporate learning from the departmental and corporate response to the Covid 19 pandemic.
- 39. To ensure that activities and resources align to the proposed corporate transformation function within the Strategic Insight Unit.

Statutory and Policy Implications

40. 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

41. Through the re-alignment of activity identified, the review would result in a £530,017 budget reduction.

Human Resources Implications

42. Subject to Committee approval the proposals would be formally consulted upon and implementation will be in accordance with the agreed employment policies and procedures of the Council.

Implications for Service Users

43. The review will support greater effectiveness in the delivery of Adult Social Care provision. It will provide consistency of approach in area such as contract management and will support systems for driving improvement to both internal and external services.

RECOMMENDATIONS

That Committee gives approval:

to re-align functions and activities and to re-name Teams to provide greater clarity of roles and responsibilities as detailed in paragraphs 13, 19, 20, 21, and 32

- 2) to make the necessary staff changes to support the change in activities as described. This includes:
 - the disestablishment of the temporary 0.8 fte Better Care Fund Programme Manager (Band F) post
 - the discontinuation of the Partnership Team subject to consultation in line with HR processes, which would result in the disestablishment of 3 fte Transformation Manager (Band E) posts
 - the reduction of 1.5 fte Strategic Development Manager (Band E) posts within Service Improvement subject to consultation in line with HR processes
 - the disestablishment of vacant temporary and permanent posts
 - the establishment of 1 fte Strategic Development Officer (Grade 5) post, 1 Commissioning Officer Post and 1 fte Contract Performance Officer (Band A) post.

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Constitutional Comments (KK 29/10/20)

44. The proposals in this report are within the remit of the Adult Social Care and Public Health Committee.

Financial Comments (OC20 29/10/20)

45. Appendix A confirms the cost of the dis-established posts which is £657,687 and the newly established post which is £127,670. Therefore, there is a budget reduction of £530,017 this made of permanent reduction of £364,585 and temporary reduction of £165,432.

Budget Reduction Impact

Change to Establishment	Financial Impact
Proposed disestablishment of 11.67 FTE	£657,687
Additional cost of establishing 3 FTE	£127,670
Net Impact/budget reduction	£530,017

HR Comments (SJJ 08/10/20)

46. 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.

<u>Adult Social Care and Health – senior management structure – report to Adult Social Care and</u> Public Health Committee on 9th September 2019

Review of the staffing structure within Adult Social Care – report to Adult Social Care and Public Health Committee on 11th November 2019

<u>Update on progress with future approach to transformation and change – report to Improvement and Change Sub-Committee on 21st July 2020</u>

Electoral Division(s) and Member(s) Affected

All.

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