

THE HIGHLAND COUNCIL

27 October 2011

PLANNING FOR INTEGRATION OF SERVICES FOR ADULTS AND CHILDREN

Report by Chief Executive

Summary

The report provides an update for members regarding the planning for integration of services for adults and children. It indicates the timetable for further decision making, and also seeks agreement to some key aspects to support the transition to the lead agency model.

1 Background

- 1.1 As agreed by the Highland Council and NHS Highland Board, the planning for integration of services for adults and children is progressing towards implementation in April 2012.
- 1.2 This report informs members of progress against the deliverables in the programme, including the workstreams that are being considered at the Programme Board, and seeks agreement to some key aspects to support the transition to the lead agency model.

2 Planning for Integration Update

- 2.1 The Planning for Integration Programme Board has met regularly, and is now progressing issues relating to a range of workstreams.

- 2.2 Service Outcomes

The framework has been agreed for service outcomes, that will be presented to the Highland Council and NHS Highland Board as part of the Commission in December 2011. The outcomes frameworks incorporate the commitments that have been considered, agreed and published in the existing strategic planning documents, the *Joint Community Care Plan* and *For Highland's Children 3*.

The Programme Board has agreed that key performance indicators should be developed on the basis of these outcomes, and that these should build on existing indicators. The Programme Board has also agreed that this work needs to reflect the emerging outcome statements being developed by COSLA and the Scottish Government for adult services.

- 2.3 Functions

The Programme Board has been updated regarding the various functions that will be included within each integrated service. This includes those services that are ready for transfer - for example care at

home services provided by the Council which have been recently reviewed - and those which require some work prior to transfer - for example, current 'cradle to grave' services.

The Programme Board has acknowledged the risks identified in relation to some current Community Care legislation and agreed work with the Scottish Government to resolve these matters at an early date.

2.4 Self Directed Support (SDS)

Building on the commitment to ensure a managed implementation of self-directed support in Highland, which safeguards all service users and staff whilst promoting SDS in a sustainable way, the Board has agreed to use dedicated Scottish Government funding to underpin the management and development of SDS within the lead agency model.

2.5 Communications

Meetings continue to take place with a range of staff groups, both within and across agencies. Staff newsletters have been produced on a regular basis, and the www.highlandlife.net website maintains up to date information for staff and the wider community.

Ward Forums have been held across the authority, and a public notice, launching a period of consultation, was placed in local newspapers this month.

2.6 Human Resources

The overall approach to the range of HR issues has been one of best practice and minimal change. The best practice approach is exemplified by the establishment of a Staff Governance working group, which is comparing the policies and practices of the two agencies in relation to:

- learning and development
- health and safety
- communication with staff
- involvement and engagement
- equalities.

The minimal change approach is exemplified by the recommendation to pursue solutions based around transfer of staff using the Transfer of Undertakings and Protection of Employment (TUPE) Regulations, which allows staff to transfer on their existing pay and conditions of service.

The approach to TUPE is that which public agencies in Scotland are obliged to follow, incorporating "TUPE Plus" and "Avoidance of a 2-tier workforce". Essentially, these respectively extend TUPE beyond a narrow legalistic reading and provide additional protection for staff in the period beyond transfer. Adoption of these principles would reassure staff and their trade unions about their future pay, conditions of service, pension and work environment - and thus will enable staff to engage fully in the important discussion about the future model of services.

Discussions with the Scottish Public Pensions Agency which will allow staff to remain in their existing pension scheme are well-advanced and have identified no technical difficulties.

The working group used the five elements of the NHS Scotland Staff Governance Standard to compare practice across the agencies:

- *Well-informed*
- *Appropriately trained*
- *Involved in decisions which affect them*
- *Treated fairly and consistently*
- *Provided with an improved and safe working environment*

The group has concluded that practice across NHS Highland and the Highland Council is comparable across four of the five elements, but there are differences of approach under the *Involved in decisions which affect them* element.

It has been suggested that the Highland Council should adopt the principles of the Staff Governance Standard. This is likely to involve consideration of the way the Council currently involves staff and their representatives in policy development, organisational change and employee relations issues, and further work will be undertaken to develop proposals.

2.7 Finance

The Programme Board is considering detailed information relating to current and projected budgets, to establish the financial envelope of the services that are transferring. The Board is also considering any financial risks, including in relation to Self Directed Support, IT and Central and Corporate Services costs.

This work recognises the interdependencies in relation to the HR work, and the need to ensure that these work streams are well co-ordinated.

2.8 Information Management and Technology

The various issues that require to be addressed, relating to information management, systems and technology are being identified, and action plans are being developed. To date, this work re-affirms the view that there are no insurmountable issues.

2.9 Property

The Board has considered the options with regard to the properties currently used by children's and adult services across the organisations.

Around 60 properties are presently owned by Highland Council, and would in the lead agency model be used solely for the provision of Adult Services by NHS Highland. It is proposed that a "Licence to Occupy" would be the most favourable option for management of the property issues at the commencement of the Lead Agency approach. This would provide time for work to then be undertaken on the long term model for property ownership and management.

There are also around thirteen properties owned by the Highland Council, and occupied partly for the provision of Adult Services and partly for the provision of other Council Services. In the event that the accommodation occupied is distinct, there can be a Licence to Occupy the principal accommodation along with rights to use shared areas. For other shared accommodation Shared Occupancy Agreements would be appropriate

NHS Highland has advised that there is only one NHS Highland property used solely for the provision of Children's Services. For that property, and for other NHS properties used for the provision of Children's Services which are shared with other NHS services, the 'Licence to Occupy' could also apply.

2.10 Commissioning Documentation

It is anticipated that the formal agreements with regard to integration are signed off at the December Programme Board, to allow the Council and Health Board to consider these later that month within their respective governance structures.

To this end, draft outlines have been presented to the Programme Board, detailing the format and content outline, and it is proposed that the documentation comprise –

1. Strategic Outcomes Framework
2. Partnership Agreement
3. Delivery Specification
4. Performance Framework.

Recognising that these documents would be 'high level', it is acknowledged that the outcomes framework should be explicit, the focus should be on reducing inequalities, and the Change Plans relating to Older People and Early Years should be reflected in these documents.

3 Management and Governance Structures

- 3.1 Both Chief Executives are now working to confirm the detail of management and governance structures, and it is intended that these are also presented to the Highland Council and NHS Highland Board in December.

4 Local Partnerships

- 4.1 As previously reported, it is intended to establish Local Partnerships which will consider issues relevant to each local District.
- 4.2 These Partnerships are local engagement forums, that ensure the views of individuals and communities are reflected and taken account of in the delivery of services. They underpin democratic accountability, and enable local groups to contribute to how services are delivered, within the overall strategic policy and budgetary framework.

- 4.3 The Local Partnerships will identify key local issues and priorities in relation to the delivery of services for both children and adults, and will reflect and comment on local performance. They will also propose developments and initiatives for consideration within the strategic governance structure.
- 4.4 It is intended that the Partnerships will be supported by a Ward Manager and meet four times a year in public. Membership should reflect local circumstances, but will include representation from local Adult and Children's Services management and staff, the Strategic Committees, other local members and the NHS Board, as well as the third sector.
- 4.5 Consideration will need to be given to the rationalisation of other local groups that have previously considered matters in relation to health and social care.
- 4.6 The Local Partnerships should commence when the new governance and management arrangements are in place, but detailed work is already taking place and will continue, to set up the Partnerships.

5 National Overview

- 5.1 The Scottish Government has indicated on a number of occasions that it seeks the integration of health and social care for older people. A formal announcement regarding this is likely from the Cabinet Secretary, involving a framework that will have statutory underpinning and will provide national and local accountability and consistency. This is likely to include a focus on integrated budgets that will deliver a set of agreed outcomes.
- 5.2 Meanwhile, the Scottish Government continues to support the development of the lead agency model in Highland, and this is likely to be one of the models recommended to other authorities.

6 Implications

6.1 Resource implications

The work on the Finance workstream is identifying all of the financial issues and implications, and these will be addressed in the commissioning documentation that will be considered by the Council and NHS Board.

6.2 Legal Implications

The legal implications encompass the following

- (i) Human Resources – HR has been dealt with at paragraph 2.6.
- (ii) Property - The licences to occupy and shared occupancy agreements will regulate the occupation by the NHS staff of buildings owned or leased by the Council and vice versa.
- (iii) Functions – the integration of services between the Council and NHS will require to be incorporated in a formal legal framework as required by the Community Care (Joint Working etc.)

(Scotland) Regulations 2002. A draft contract is being prepared by Highland Council Legal Services in conjunction with external legal advisers for negotiation with the NHS. When agreement has been reached with the NHS, a final draft will be presented to Council for its approval.

6.3 Equality Implications

Equality issues are being fully considered in all aspects of the planning process.

6.4 Climate Change Implications

There are no climate change implications.

6.5 Risk Implications

A risk register is maintained by the Programme Board, and is reviewed at each meeting.

Recommendation

Members are asked to note the work being undertaken on the planning for integration of services for adult and children, and that further reports will be presented, including in December 2011 in relation to the commissions and proposed management and governance arrangements.

In the meantime, members are asked to agree that:

- (i) staff will transfer between organisations on the basis of the Transfer of Undertakings and Protection of Employment (TUPE) Regulations, which allows them to transfer on their existing pay and conditions of service;
- (ii) property issues be resolved for the initial outset of the Lead Agency arrangements by means of Licences to Occupy and Shared Occupancy Agreements, on terms and conditions to be agreed by the Director of Social Work and the Director of Housing and Property;
- (iii) the Head of Legal Services and Director of Social Work will progress the drafting and negotiation of the required legal agreement; a final draft of which will be the subject of a further report.

Signature:

Designation: Chief Executive

Date: 18 October 2011

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Chief Executive