

People and Communities Department- Structure Proposals

Proposals for the Divisional structure of the People and Communities Department for initial informal consultation.

1 Introduction

- 1.1 This paper results from several pieces or streams of work undertaken as part of the corporate Change Programme. It seeks to bring together these workstreams which considered: our changing external policy and legislative environment; the strengths and weaknesses of a commissioner- provider separation; the on-going implications of health service reform; the increasing autonomy of the schools and education system; the potential impact of the Munro Review and the increasing pressure upon Social Care systems; our profoundly shifting demography and the increasing complexity of society and the challenges this presents.

Nationally there is a massive reform programme and there are significant implications for our Department in regard to changes to welfare benefits, approaches to addressing worklessness and assertively intervening in 'complex' (troubled) families.

- 1.2 The proposals that follow have emerged from the above and are an initial view on how a single department can be structured to provide commissioning and lead a complex array of services. It therefore follows that the proposals are neither fully complete or detailed in every respect. The intention is to consult upon and refine the proposals. From this process further proposals which define the complete structure will be developed.
- 1.3 The current People and Communities Leadership Team (See Appendix 1) have considered this Divisional Director/ Chief Officer structure. There have been rigorous discussions to test the thinking and to ensure that the proposals align with the design principles established in July 2011. (See Appendix 2)

2 Background

- 2.1 The Council brought together its CYP Social Care and Education Services in late 2005 and appointed a Director of Children's Services (DCS) in 2006. During 2006 the Council and PCT agreed to fully integrate child health commissioning within the new Children's Service Department.
- 2.2 In 2007 the Council and PCT began to develop a programme to fully integrate adult care and community health services supported by a legally binding Partnership Agreement. This programme resulted in the full integration of both commissioning and service delivery operations managed by an integrated leadership team under a single PCT Chief Executive/Director of Adult Social Services (DASS).

- 2.3 The extent of integration between the Council and PCT is perhaps the most advanced in England. Between 2006 and 2012 these joint developments have led to significant improvements in outcomes for customers/service users. The range of improvement covers everything from closing the gap for our most vulnerable young children, major shifts in educational achievement, higher placement stability for looked after children, lower levels of 'not in Employment, Education or Training' for young adults, integrated care pathways for our most vulnerable adult and older people, improving rates of immunisation, etc. Across the whole People and Communities landscape by working together Council and Health Services have 'added value' for our population.

This represents an amazing track record of achievement and improvement and central to all of this has been positive, constructive and professional relationships and attitudes at every level and within every aspect of our shared landscape. All of the above provides a unique and immensely strong foundation upon which to build our new department and to further strengthen our partnerships with health colleagues.

- 2.4 In November 2010 the full Council endorsed an organisational development proposal predicated upon three major Departments/ Directorates based around 'Place'; 'Resources' and 'People'.
- 2.5 A Change Programme and Board were established to oversee these developments. The Council also endorsed the proposal to develop a 'Core Council'. This vision is of the Council as Strategic Commissioner, ensuring community wellbeing and that the public access the right services at the right time. Over time it was envisaged that the Council could reduce its role as a 'provider' of services.
- 2.6 This vision anticipated emerging national policy, particularly in relation to: NHS Reform; extension of academies; less central regulation and more sector-led improvement; community right to challenge and community right to buy etc.
- 2.7 In June 2011 the Primary Care Trust began to 'cluster' with NHS Wiltshire which required the Council and PCT to separate the PCT Chief Executive and Council Director of Adult Social Services roles from a single integrated post. The PCT's appointed a Cluster Chief Executive to lead NHS B&NES and NHS Wiltshire. In September 2011 the Council merged the Director of Adult Social Services and Director of Children's Services roles into a Strategic Director for People and Communities. The Council and PCT Board also agreed that the post holder should assume existing partnership management for Community Health Services and for the transition and eventual management of Public Health Services.
- 2.8 On 1 October 2011 the Council and PCT signed into being a Social Enterprise Community Interest Company to provide Community Health Services, Adult Care Services and Health Improvement Services (Sirona Care and Health)

- 2.9 From Summer 2011 the emergent People and Communities Department created an interim structure (Appendix 3). The Institute for Public Care were commissioned to help develop options for the future and some additional capacity was provided to help design our new function and form and to support a similar process in the PCT.
- 2.10 During all of this time there has been close working across Council, PCT and Clinical Commissioning Group colleagues with a view to maintaining and possibly extending the level of integrated working across services for children, families and adults.
- 2.11 Work has also been carried out to develop a vision or narrative for the new department (Appendix 4). The Leadership Team have considered this narrative when reviewing the proposals for the structure.

3 Proposed Structure

- 3.1 An organisation chart is provided (Appendix 5).
- 3.2 The proposed structure enables the complete strategic integration of all services for children, families and adults across the full spectrum of early learning, education, health, housing, care and skills and employment. It brings together direct provision for children and young people from the universal to specialist level. It brings together commissioning capacity across health, care, education and public health in order to provide a complete array of services that are integrated, preventative, efficiently targeted, evidence informed and which aim to reduce both inequality and the impact of inequality.
- 3.3 Each Divisional Director will hold a specific 'Policy Lead'. This will require them to provide a policy framework for that given area to shape and influence the service development and policy development taking place within each Division. This will enable all development to be 'tested' in terms of relevance, fitness for purpose and impact upon key policy priorities. For example how would a revised policy and school admissions address inequalities, how will it impact upon our priorities for complex families, etc.? The policy lead role will provide advice and challenge and will ensure that our policy frameworks are refreshed and up to date. Over time policy leads will change and/or shift, however, at all times they will align with our design principles and values.

3.1 Regeneration, Skills and Employment

- 3.1.1 A 'matrix' management arrangement will be in place. The Divisional Director will be located within the 'Place' Directorate and will be directly line managed by the Strategic Director for Place. A 'dotted line' accountability will be in place to the Strategic Director for People and Communities.

- 3.1.2 The Skills and Employment Team will form part of the People and Communities Department, but will be line managed by the Divisional Director for Regeneration, Skills and Employment. Location within the People and Communities Department will enable integrated planning and working with People and Communities colleagues around long term worklessness, complex families and vulnerable groups. It will also enable the Council in its 'Place making' and 'enabler/ developer' roles to use its leverage to promote skills, training and employment opportunities both for the general population and specifically for vulnerable groups within the B&NES population.
- 3.1.3 The post holder will hold a cross-departmental policy brief for Community Engagement which sits well with the wider regeneration agenda.

3.2 Public Health

- 3.2.1 The Director of Public Health and Public Health Team will transfer to the Local Authority on 1 April 2013. Following the passage of the Health and Social Care Act (2012) we await the regulations from the Department of Health regarding the Director of Public Health role.
- 3.2.2 The Council envisages that the Director of Public Health as a Chief Officer will lead on all aspects of public health and will play a critical corporate role in the development of health, planning, open space, licensing and regulatory functions across the Council. A protocol will be developed to identify how the DPH will support and advise/influence the Strategic Directors for Place and Resources and relevant Divisional Directors so that public health and wider determinants of health issues are appropriately factored into key Council functions and decisions outside of the People and Communities Department. The Director of Public Health will also provide professional advice and guidance to the CCG.
- 3.2.3 The commissioning of public health will be located within the Integrated Commissioning Unit and the post-holder will hold a cross-departmental policy brief for addressing inequalities and intelligence.

3.3 Acute and Specialist Health Commissioning

- 3.3.1 The post holder will be Chief Operating Officer of the Clinical Commissioning Group. The post will be directly accountable to the Accountable Officer of the CCG. The post will form part of the senior leadership team of the Department and the Strategic Director will hold responsibility for day to day operational management of this Division. The Strategic Director will also be accountable to the Accountable Officer of the CCG and the Clinical Commissioning Committee for the integration of acute and community health and the provision of integrated care and health services.

- 3.3.2 These arrangements will be supported by a legally binding partnership agreement between the Council and the Clinical Commissioning Group. This agreement will articulate the organisational integrity and independence of the CCG, it will also define respective organisational boundaries and accountabilities and set out the process by which either party can disengage from the integrated structure subject to appropriate notice periods. This will enable both organisations to assure themselves that appropriate due diligence has been carried out in developing the structures.
- 3.3.3 The post holder and team will be employees of the CCG. The Council, PCT and CCG are committed to the extension of integrated commissioning to the benefit of our communities and therefore we will utilise powers under Section 113 of the Local Government Act (1972) to enable senior staff employed by one organisation to discharge management and other functions on behalf of the other organisation.
- 3.3.4 This Division would interact with other CCGs and Commissioning Support Organisations (CSOs) about the provision of acute, specialist and bespoke services on behalf of the local population. It would act as 'lead commissioner' with regard to the RUH.
- 3.3.5 The post holder would have a critical role re the long term re-alignment of health services to promote effective health pathways and reduce demand for acute-based services. This aligns with the Quality, Innovation, Productivity and Prevention (QIPP) agenda.
- 3.3.6 The post holder would manage the Designated Nursing and Doctor roles with regard to Child and Adult health safeguarding and for Looked after Children on behalf of the CCG. This function would work across the whole department linking up with colleagues focused upon CYP and adult safeguarding.
- 3.3.7 The post holder will hold a cross-departmental brief for developing an outcome-based performance improvement and management system.

3.4 Adult Care, Housing and Health (Non-Acute) Strategy and Commissioning

- 3.4.1 The post holder will act as deputy to the Strategic Director and will discharge through appropriate delegation, the statutory duties of the Director of Adult Social Services and will oversee Housing policy. The post holder will assume overall responsibility for adult safeguarding policy and the integrity and effectiveness of the overall safeguarding system for adults. This will include the assurance of safeguarding within the development of commissioning intentions, commissioning strategies, procurement process, contracting and in contract management arrangements.

- 3.4.2 This Division will provide the base for integration of commissioning of services across the People and Communities landscape. A range of commissioning specialists will be directly located and line managed within this Division. Other commissioning specialists will be line managed within other Divisions but will either be co-located or will operate as part of a 'virtual' integrated team. The aim will be to enable effective commissioning capacity able to work across all boundaries to provide the best integrated pathways for individuals. There will be a retained focus on specialist knowledge supported by a culture of collaborative working. Where required post holders will have appropriate authority to act/discharge responsibilities on behalf of relevant organisations using section 113 of the Local Government Act (1972) powers.
- 3.4.3 It is envisaged that an internal 'commissioning board' will be formed bringing together the commissioning Divisional Directors and Senior Commissioning Staff. This group will develop and oversee a departmental commissioning framework, agree and monitor implementation of commissioning priorities and facilitate an effective commissioning 'gateway' procedure.
- 3.4.4 Housing Services will form a part of this Division although there may be some limited changes as the Council considers delivery of housing within its overall development agenda.
- 3.4.5 The post holder will hold a cross-departmental policy brief for complex families, which fits well with the lead for integrated commissioning.

3.5 Children and Young People Strategy and Commissioning

- 3.5.1 The post holder will act as deputy to the Strategic Director and will discharge, through appropriate delegation, specific agreed statutory duties of the Director of Children's Services and will oversee Education policy. The post holder will assume overall responsibility for children and young people's safeguarding policy and the integrity and effectiveness of the overall safeguarding system for children and young people. This will include the assurance of safeguarding within the development of commissioning intentions, commissioning strategies, procurement process, contracting and in contract management arrangements.
- 3.5.2 This Division will lead on commissioning services for children and young people (as part of the Integrated Commissioning Unit) including preventative, early years, learning, youth, social care, child health, etc.
- 3.5.3 The strategic overview of the school and education system will be retained within this Division with responsibilities for standards, performance, etc. located here. The post holder will interact with schools, DfE, OSC, Academies and Academy Chains. The virtual school for children in care will be located in this Division.

- 3.5.4 The Business Support Unit for the whole Department will be led from this Division and will provide the full range of business support services to all Divisions within the Directorate. It will also support school governance and the administration of the LSCB, LSAB and CTB.
- 3.5.5 The post holder will also manage the 'off line' CYP Quality Assurance, audit and IRO functions which support social care delivery and standards for children and young people.

3.6 Children and Young People Provider Services

- 3.6.1 This Division integrates those CYP services that provide services to CYP, Families, Schools and other providers. The Division will be led by one Divisional Director supported by a team of Service Managers organised on the basis of 'Preventative' and 'Specialist' services. The precise alignment and apportionment of current functions into preventative and specialist services will be consulted upon during early summer. It is envisaged that a 'project/task management' approach will be developed. This will enable staff to work across team/service boundaries to support developments in the preventative or specialist spheres. This is to recognise the reality that some teams/services work across the full spectrum of prevention – statutory intervention – rehabilitation and will need to have clarity of line management for the whole function.
- 3.6.2 It is envisaged that an array of care, education and early learning services will be provided in both the preventative and specialist configurations. This Division will operationalise the departmental response to Complex Families, enabling the development of a virtual team to wrap around supported families and interact with key partners such as voluntary sector (commissioned), police, housing, AWP etc. The Divisional Director will have a critical relationship with the Deputy Director- Adult Care, Housing and Health re: the response to the Complex Families agenda.
- 3.6.3 This Division will also be supported by a Commercial Manager/ Traded Services Manager whose role will be to develop business-readiness strategies in anticipation of further changes to Government policy on the role of local authorities as providers of services. The post holder will work with Service Managers to develop business and commercial skills and awareness.
- 3.6.4 The Divisional Director will hold a cross-departmental policy brief for integrated service delivery which aligns with integrated commissioning and Complex Families.
- 3.6.5 The Divisional Director will be accountable for the operational implementation of safeguarding practice and policy for children, young people and families. The post holder will be directly accountable to the Deputy Director for the operational quality and effectiveness of safeguarding practice and through this line accountability to the Strategic Director.

- 3.6.6 The development of the 'Principal Social Worker' post as recommended by the Munro Review will be addressed as part of the wider departmental re-structuring.
- 3.6.7 Further work will be undertaken re: the contribution to/attendance at sub-regional, regional and national safeguarding-related bodies and events so that these arrangements are articulated clearly in the new senior structure.

3.7 Off-line Safeguarding Assurance and Audit teams

- 3.7.1 The three commissioning divisions each have a Safeguarding Assurance and Audit team/function. For Children and Young People this team will provide assurance and audit for the internal Children and Young People Provider Division and will need to develop required skills and capacity to provide assurance support to Children and Young People Commissioners as and when more services are commissioned/procured externally. For Adults this team provide assurance re: commissioned services reflecting the more advanced level of commissioned/external services. This may need to be strengthened with regard to Mental Health Services. For Health, the situation is more fluid but it is anticipated that the Designated personnel will provide assurance re: providers as part of the re-configured health commissioning architecture.
- 3.7.2 It is envisaged that the three teams will work together to support the extension of the integrated commissioning function. A key task will be to articulate with Commissioners a policy on the quality assurance system to be integrated within all commissioning and contract management regarding safeguarding. This is separate to the safeguarding auditing and assurance work provided directly by each team.
- 3.7.3 Further consideration will be given to establishing a 'Lead Manager' who would lead on the co-ordination of whole-department and cross-divisional safeguarding assurance issues. This would allow the department to respond to significant unplanned (externally arising) or planned (internally arising) issues. An example of the former would be responding to a 'Little Teds' or 'Winterbourne View'. The 'Lead' role could rotate and would attract an honorarium for the tenure of each post holder.

4 Time scales for consultation and implementation

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| 27 April 2012 | Informal consultation document issued to staff, unions and associations and partners |
| 18 June 2012 | Formal consultation starts (Divisional Structure and Divisional director posts) |
| 1 July 2012 | Informal consultation document (Departmental Re-structure) starts |

15 Sept 2012	Formal Consultation ends
1 Oct 2012	Senior structure moves into 'shadow' form to enable wider restructuring to begin
8 Oct 2012	Formal Consultation starts (Departmental Re-structure)
8 Oct 2012	Consultation document despatched to staff, unions and associations and partners.
5 Jan 2013	Formal consultation ends
1 April 2013	New structure becomes operational

5 Consultation

- 5.1** As part of informal consultation a series of staff briefing sessions will begin from late April 2012 and separate briefings will be held for unions and associations.
- 5.2** People and Communities Leadership Community will meet on an 8 weekly basis from 3 May onwards to brief managers.
- 5.3** Regular briefings and updates will be cascaded through line management into routine team and service meetings.
- 5.4** Formal consultation meetings will be held both with individually affected staff and across the services.
- 5.5** PCLT members will attend team and service meetings to provide updates and answer questions/ queries
- 5.6** Staff can email questions/ concerns to:

People_CommunitiesRestructuring@bathnes.gov.uk

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